

Covid-19 Pandemic: Addressing Dental Needs of Third-Grade Students Post Pandemic

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INTRODUCTION

The Covid-19 Pandemic made access to dental care difficult for many in March 2020 as clinics suspended routine care and limited treatment to emergency dental needs. As the pandemic lessened in the years following and cases of COVID-19 declined, dental clinics resumed addressing routine and urgent dental needs. Urgent Dental Needs (UDN) is defined as "having signs or symptoms that include pain, infection or swelling at the time of dental examination." Children with UDN are "recommended to seek dental treatment as soon as possible" (1). This study is a continuation of a previous study finding the COVID pandemic negatively impacted 3rd grade students dental health with an increase in prevalence of UDN and decrease in treatment completion status in the year following the pandemic (2).

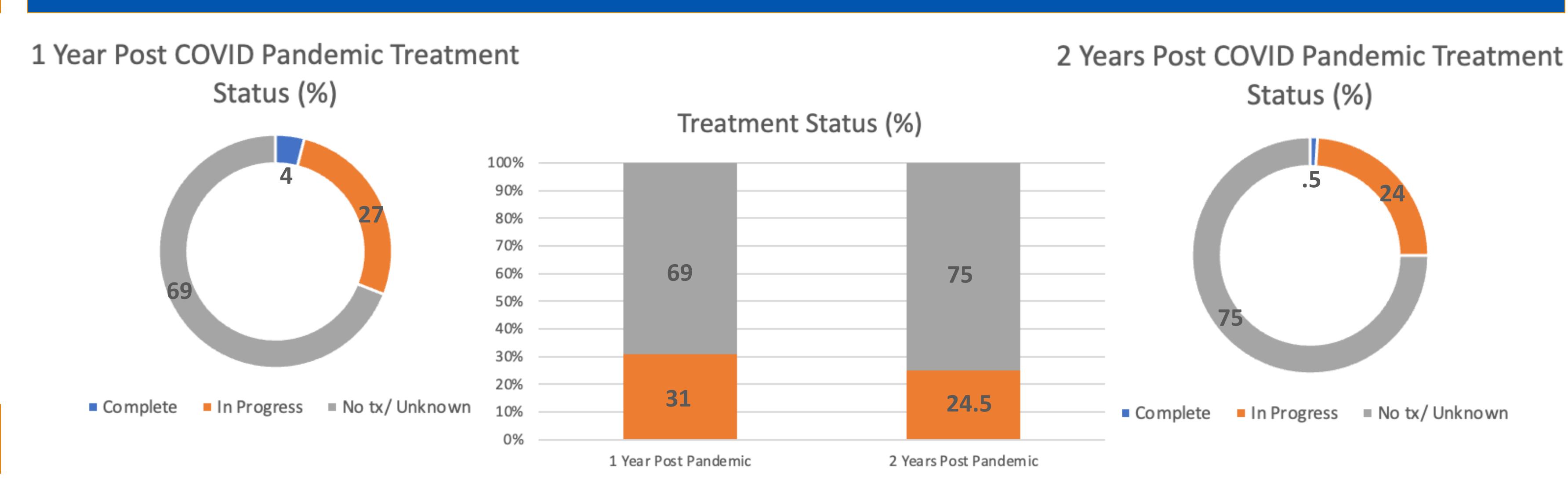
OBJECTIVE

- Compare the prevalence of urgent dental needs (UDN) of 3rd grade students in Collier County Florida one year after the COVID pandemic (school year 2021-2022) and two years after the COVID pandemic (school year 2022-2023).
- Compare the completion of treatment of the UDN in the same population one and two years post pandemic.

METHODS

- This is a chart review of the University of Florida Outreach Screening Program that screens 3rd grade students in the 36 Collier County Elementary Schools to identify dental needs.
- Criteria for UDN include large, decayed areas with or without signs or symptoms of pain, infection, or swelling.
- The recommendation that the student be seen as soon as possible for treatment is notified to the parents via letter and phone call. Parents were contacted by phone 3 months after the screening and at the end of the school year for treatment status inquiry.

RESULTS



- The number of students screened 1 year post pandemic was 1,880 compared to 2,093 2 years post pandemic.
- The prevalence of UDN 1 year post pandemic was 14.5% (272) compared to 10% (223) 2 years post pandemic.
- The treatment status 1 year post pandemic was 4% completed, 27.2% in process, and 68.7% no treatment/unknown.
- The treatment status 2 years post pandemic was 0.45% completed, 24.2% in process, and 75.3% no treatment/unknown.

CONCLUSIONS

- The prevalence of UDN decreased two years after the COVID pandemic.
- The completion of UDN was inferior two years after the COVID pandemic compared to one year after the pandemic.
- Completion of UDN was hypothesized to improve as more time has passed from the COVID pandemic.
- These unexpected findings may be due to the demographics of the population studied that frequently migrates and is difficult to contact. This may indicate that other influences may be more prevalent in preventing access to care than the recovery from the pandemic.

REFERENCES

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