Dane County's Tooth Ache

Dane County residents are showing up by the thousands in the county's emergency rooms and urgent care clinics because of bad teeth. According to a report from Public Health Madison & Dane County (PHMDC) and the Oral Health Coalition of Dane County, more than 4,000 patients presented with dental pain at local emergency and urgent care clinics in Dane County in 2015.

A Report on Dane County Hospital Emergency Department & Urgent Care Visits for Non-Traumatic Dental Pain (at http://www.publichealth-mdc.com/publications/documents/ED-UCCDentalDataRpt201703.pdf) shows that UW Health, SSM Health – St. Mary's, and UnityPoint Health-Meriter's emergency departments (ERs) saw just over half of these patients for their non-traumatic dental pain, resulting in over $2.5 million in charges.

Probably most striking is the fact that the rate of emergency department use for dental pain by African American populations was 10 times higher than Caucasian populations. "Oral health represents one of the starkest examples of health disparities. This is concerning because these visits are preventable. If dental care was affordable and accessible to everyone equally, we wouldn't see this many people with dental infections that have escalated into emergency situations," says Debi DeNure, Oral Health Coordinator at PHMDC.

"Untreated and under-treated dental pain represents a major hidden epidemic in Dane County with profound personal and financial impact," reports Dr. Philip Bain, Division Chief of Internal Medicine at SSM Health Dean Medical Group. Bain was one of the early participants in the Emergency Department/Urgent Care Clinic Dental Pain Initiative.

"If a patient has a tooth rotting in her mouth, she often can't work, care for her children or even sleep. Tooth pain and infections have a significant impact on people's lives and can lead to more significant health problems if

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un- or undertreated. Patients often present to ERs or urgent care because they feel like they have nowhere else to turn. This is inefficient, expensive and delays definitive treatment. Getting patients into more appropriate care quicker saves money, improves outcomes and relieves overstressed ERs and urgent care clinics," says Bain.

The good news is that the report shows some progress. The number of emergency department dental visits for tooth problems is down to 2,100 in 2015 from the over 2,500 visits in 2010. The progress is likely due to health care and dental leaders taking on the issue through several collaborations.

The Madison Dental Initiative (MDI), a clinic housed at the Salvation Army, provides care for under and uninsured Dane County residents, and takes patients referred from local emergency and urgent care clinics. A partnership of dentists, hygienists, volunteers, and concerned community leaders, MDI is the last resort for many patients.

"Every Thursday night we have an emergency clinic where we get between 8 to 12 patients in pain, many 're-ferred by the emergency rooms. Those nights are both tragic and inspiring — tragic because of the helplessness of so many patients who cannot afford dental care, and inspiring because of the good work that people are coming together to do," said Curtis

Henderson, MDI's Executive Director and member of the Oral Health Coalition of Dane County.

Given the high numbers of patients presenting at ERs and urgent care clinics with dental problems, a planning team including PHMDC, dental, and medical leaders came together to approach the problem at the systems level by developing a protocol. This protocol is a standardized treatment and referral algorithm, which includes best practice prescribing recommendations for pain management with little or no opioids, and the most effective antibiotics for treating dental infections. Representatives from every health system in Dane County participated including: UW Health, SSM Health-St. Mary's and Dean Medical Group, UnityPoint Health-Meriter, GHC-SCW, Access Community Health Center, and Stoughton Hospital.

With opioid abuse and antibiotic resistant bacteria front and center nationally and in Wisconsin, dental pain is clearly not just about teeth. "If patients present to ERs and urgent care clinics initially, they will often get antibiotics and many times opioid pain meds. If they are not directed to appropriate follow up, they may end up back in the ER or urgent care. Antibiotics and opioids prescribed without treating the underlying problem can add to the concerning trends of

antibiotic resistance and opioid overuse and addiction. We had to do something," said Bain. "We needed a coordinated effort to get these folks to the care that they need ASAP.

Despite the work of dental and medical leaders, more needs to be done. "What we have are band aids to a much bigger problem," says DeNure. "Only a third of adult Medicaid recipients in Dane County are getting regular dental care. It's difficult to find a dental clinic that will accept new patients with Medicaid, and as a result, people are ending up in pain and going to the ER."

A Report on Dane County Hospital Emergency Department & Urgent Care Visits for Non-Traumatic Dental Pain (at http://www.publichealth-mdc.com/publications/documents/ED-UCCDentalDataRpt201703.pdf), presents data, but also offers general recommendations for improving oral health and reducing the use of emergency room care for dental pain. "If we want to see use of the ER for dental problems dry up, then we need to get further upstream. It's going to take many levels of solutions and system changes to make an impact," said Dr. David Gundersen, President of the Oral Health Coalition of Dane County. "The beauty is that this is a fixable problem. The report shows some of that progress, but also lets us know there's more work to do."