Cochrane Review: Oral health advice for people with serious mental illness

BACKGROUND
- People with serious mental illness are more likely to experience oral disease and have greater oral treatment needs than the general population.
- Oral health has never been seen as a priority in people suffering with serious mental illness.
- Poor oral health has a serious impact on quality of life, everyday functioning, social inclusion and self-esteem.

OBJECTIVES
To assess the effects of oral health advice in reducing morbidity in people with serious mental illness.

SEARCH METHODS
Cochrane Schizophrenia Group Trials Register (October 2009).

SELECTION CRITERIA
All relevant randomised clinical trials.

RESULTS
The search identified 2382 references (from 1558 studies). Only one study was suitable for further examination. This was excluded as it did not fulfil the review's criteria.

CONCLUSIONS
- Current guidance to give advice on oral health to people with serious mental illness is not based on best possible evidence.
- Further research is indicated.

FURTHER RESEARCH
- Trials were possible but none had been undertaken.
- We have been supported by NIHR Collaborations for Leadership in Applied Health Research and Care (CLAHRC) – Nottinghamshire, Derbyshire, Lincolnshire to design and conduct a relevant study.

REFERENCES

ACKNOWLEDGEMENTS
We acknowledge the support of the National Institute for Health Research, through the Mental Health Research Network. This poster presents independent research commissioned by the National Institute for Health Research (NIHR). The views expressed in this publication are those of the author(s) and not necessarily those of the NHS, the NIHR or the Department of Health.

TABLE 1. TRIAL DESIGN

<table>
<thead>
<tr>
<th>Design</th>
<th>Cluster Randomised Controlled Trial</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting</td>
<td>Early Intervention in Psychosis teams in Nottinghamshire, Derbyshire and Lincolnshire</td>
</tr>
<tr>
<td>Duration</td>
<td>12 months</td>
</tr>
<tr>
<td>Participants</td>
<td>Early Intervention for Psychoisis Teams, all care coordinators and all service users in teams</td>
</tr>
<tr>
<td>Intervention</td>
<td>Staff dental awareness training + dental checklist for service users vs. standard care</td>
</tr>
<tr>
<td>Outcomes</td>
<td>Registered with a dentist, visited a dentists within the last year, routine check up within last year, owning a toothbrush, cleaning teeth twice a day</td>
</tr>
</tbody>
</table>

FIGURE 1. TRIAL PROCESS

EIP teams in Nottinghamshire, Derbyshire and Lincolnshire (N=10; n=1037)

Randomisation (block, cluster by shire)

Dental Intervention
- (N=5)
- Dental Awareness Training + Modified Oral Health Checklist

12 month follow up
- Modified Oral Health Checklist
- Oral Impacts on Daily Performance + Detailed dental data (random sample of service users from all teams n=50)

Standard Care
- (N=5)
- Continue with treatment as usual for 12 months

12 month follow up
- Dental Awareness Training + Modified Oral Health Checklist
- Oral Impacts on Daily Performance + Detailed dental data (random sample of service users from all teams n=50)

PROGRESS
In February 2012 the 10 early intervention in psychosis teams caring for a total of 1037 people were randomised.

If you would like more information about the dental trial please contact: Hannah Jones, The Sir Colin Campbell Building 87, University of Nottingham Innovation Park, Triumph Road, Nottingham, NG7 2TU. Tel: 0115 82 31267 Email: Hannah.Jones@nottingham.ac.uk Website: http://www.clahrc-ndl.nihr.ac.uk