

Spotlight on the Safety Net

A Community Collaboration

Wake Smiles Prizes Dignity and Empathy Alongside Evidence-based Oral Health Care

Dental professionals have an incredible privilege when serving their patients. An instant connection is made, and trust is placed in the literal hands of the provider. Given the vulnerable and prone position of the patient, oral health professionals have an important responsibility that should not be taken lightly. We are invading the personal space of our patient and putting our hands in a place often associated with pain or shame. And yet, within seconds of us walking into the operatory, the patient trusts us. At Wake Smiles, we believe this is one of our greatest honors and do our best to validate the patient by treating them the way we would treat our loved ones.

Wake Smiles, one of four standalone dental clinics in the North Carolina Association of Free & Charitable Clinics (NCAFCC), is the only nonprofit dental clinic in Wake County, North Carolina that is solely focused on serving uninsured adults living under 250% of the federal poverty level. Our mission is to improve the lives of underresourced adults through better oral health.

Wake Smiles is a proud member of the NCAFCC, which is made up of organizations that work diligently to improve access to care in our state, ensuring that those who are uninsured get the care they deserve. According to NCAFCC Annual Outcome Survey findings, 67 NCAFCC member clinics provided a value of \$364,214,235 in services to communities across the state as of 2023 [1].

As a result of unemployment, lack of insurance, challenges related to transportation, and level of education, lower-income adults rarely, if ever, visit a dentist. This leads to a much higher risk of cardiovascular disease, stroke, diabetes, and other systemic problems that are increasingly being linked to poor oral health. Lower-income adults also lose more teeth over time than higher-income adults. By age 65, about 40% of adults in households with an annual income of less than \$15,000 have lost all their natural teeth [2].

With a patient population of over 900 individu-

als, we focus on living our values of compassion, collaboration, dignity, gratitude, and service while providing exceptional evidence-based care. Our education, prevention, and restoration programs are designed to meet individuals where they are to stop progression of disease, restore integrity of dentition, and empower people with the knowledge and skills to keep their improved health beyond the time they are under our care. In 2023 we were able to provide \$1.7 million in care and save the state \$4.5 million in reduced emergency room visits [1].

The patients served at Wake Smiles come from diverse backgrounds, often carry the weight of working several jobs paying minimum wage, are not in their native culture or using their native language, and have intense stress and underlying medical conditions. A strong percentage of patients seen at Wake Smiles are taking several medications and are suffering from xerostomia (dry mouth) as a side effect that impacts their oral and overall health outcomes.

One systematic review has addressed the association between poor oral health and common psychological disorders (e.g., a diagnosis of depression, generalized anxiety disorder, panic disorder, obsessive-compulsive disorder, post-traumatic stress disorder, or a phobia) [3]. The study demonstrated a significant association between common mental health disorders and tooth loss; individuals with common psychological disorders had higher rates of decayed, missing, and filled teeth surfaces than controls. Overall, the researchers concluded that the rates of dental decay and tooth loss were higher for patients with common mental disorders as compared to the general population [3].

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We partner with agencies that serve individuals experiencing housing insecurity and substance use disorders. According to the National Institute on Drug Abuse, “Research indicates that 43 percent of people in SUD [substance use disorder] treatment for nonmedical use of prescription painkillers have a diagnosis or symptoms of mental health disorders, particularly depression and anxiety” [4]. We also know the chemical impact that substance use has on dentition and overall health and cannot deny the social and mental impact it has on those suffering from this disorder.

In addition to the research, there is an observable bidirectional relationship that exists between oral and mental health status. When someone is experiencing depression or anxiety, they often lack motivation to perform basic life skills such as brushing teeth. In turn, the lack of care over time creates a sense of shame, isolation, and self-loathing, creating a cycle that inhibits the ability to self-care. We see this often at Wake Smiles, as many of our patients have been diagnosed with mental health disorders. Our job as oral health professionals then extends past the oral cavity and dives into aspects of social work, where assessing mental health status is vital to providing proper oral health care. Given that research is limited on this topic, more evidence-based approaches that guide oral health workers to correctly provide care to the estimated “792 million people in the world living with mental illness” are warranted [5].

As health care providers, we have vowed a Hippocratic Oath to provide care ethically and to cause no harm. Unless we aim at treating the patient wholistically, we could be causing iatrogenic harm,

resulting in poorer health outcomes and betraying the types of practitioners we worked so hard to become. As we continue to grow at Wake Smiles and impact a greater number of individuals, it is our goal to put our patients first, investigate ways to provide as much integrative care as possible, and continue to help individuals smile beyond the operatory. **NCMJ**

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