FOCUS

for Ontario Dental Hygienists



Research corner:
Pregnancy and oral health

Article:
Effects of obesity on oral health

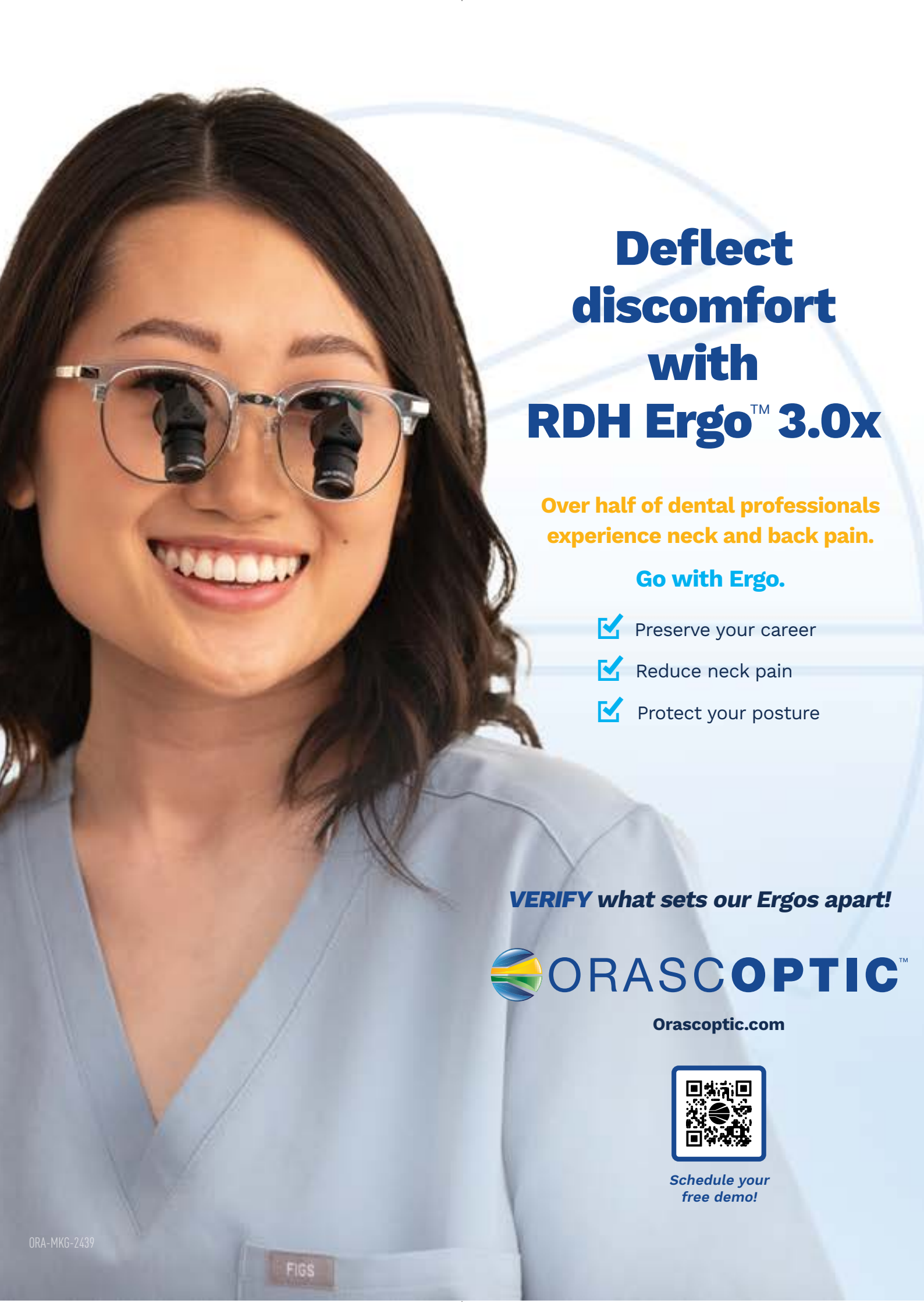
Student column

CEO's message

Celebrating a legacy of leadership and dedication in dental hygiene

odha
Ontario Dental Hygienists' Association

July 2024
Volume 28 • Issue 3



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ODHA 2024-2025 MEMBERSHIP ONLINE REGISTRATION OPENS - AUGUST 1

Click here to learn more about the Membership Perks.





CEO'S MESSAGE

Marg Harrington, MHS, MHE
Chief Executive Officer

To say this is a busy time in oral health is an understatement. So many things are going on, and I wanted to use this opportunity to share a few of them with you.

Canadian Oral Health Summit

I had the privilege of attending the Canadian Oral Health Summit from June 20-22 in Halifax, Nova Scotia. There was a significant number of representatives from dental hygiene, which was fantastic. It was a great opportunity to connect with representatives from oral health professions, researchers, and Health Canada, many of whom I had only met virtually.

The three days were packed with presentations on a wide range of topics, including a workshop on "vision for sustainable virtual oral health care," a discussion by Health Minister Mark Holland about the Canadian Dental Care Plan, and a presentation about data being collected related to the oral health of Canadians. An important theme running through most of the presentations was improving access to oral care.

The Summit was also an opportunity to celebrate the work of Dr. Michael Glogauer, who received the CADR/ACFD National Dental Research Award. His work, and that of other oral health researchers, is shared with ODHA members through our professional development offering "Conversations with Dr. Michael Glogauer and Kim Ivan."

The Summit also marked the formal launch of the National Oral Health Research Strategy 2024-30. The overall goals of the strategy are to improve oral health and reduce inequities, and improve oral research capacity. The full strategy, including the priorities, can be found here.

Oral Health Workforce in Canada

Following the Summit, I was pleased to attend an invitation-only workshop, "Strengthening the Oral Health Workforce in Canada." The workshop, organized by the Canadian Dental Hygienists Association and the Canadian Dental Association, was very timely and provided an opportunity to examine the current landscape, consider

innovative strategies to address workforce planning, and begin work on identifying actionable strategies. The event was an important step in laying the groundwork for improved oral health workforce data collection and planning.



Oral Health Access Fund

The 2023 federal budget included a commitment of $250 million in funding over three years, starting in the 2025-26 fiscal year, and $75 million ongoing to establish the fund. Funding will be delivered through two streams:

- Stream 1: Oral health education and training
- Stream 2: Oral health care access and prevention of oral diseases

ODHA's Long-Term Care Advisory Committee (LTCAC) is leading the work on our Stream 2 Expression of Interest, which is due July 31, 2024. I am excited to work with our LTCAC members on this important initiative. They are: Carolyn Weiss (Chair), Lynda McKeown, Tonia Peachman-Faust, Maridavid Rankie, Gillian Stewart, and Lara Timler. Our submission is focused on establishing a comprehensive oral care program in long-term care led by registered dental hygienists.

Stay tuned for more updates. Wishing you a relaxing and safe summer.



Research corner

Kim Ivan, RDH, BIS (Hon) is an award-winning dental hygienist with over 39 years of dental hygiene and leadership experience. She is a long-time member and volunteer of ODHA serving in various capacities including former president. Currently, Kim is ODHA's Policy Advisor and Chair of the Research Advisory Board.

PREGNANCY AND ORAL HEALTH

Disclaimer: Research corner is not intended to provide clinical advice nor should it be used as a replacement for professional dental or medical advice. Dental hygienists are encouraged to consult with College of Dental Hygienists of Ontario (CDHO) practice advisors and refer to CDHO guidelines. Dental hygienists are responsible for the decisions they make and for the consequences associated with those decisions.

Periodontal disease and adverse pregnancy outcomes

Research has demonstrated an association between periodontal disease and adverse pregnancy outcomes, such as preterm birth, low birth weight, and preeclampsia. Adverse pregnancy outcomes seriously impact the health of the pregnant person and the neonate, increasing the risk of multiple lifelong challenges.



Although global medical technology has improved, the incidence of adverse pregnancy outcomes has not decreased.

Thus, this worldwide public health problem needs urgent solutions. Nannan et al. (2022) reviewed the evidence on periodontal disease and adverse pregnancy outcomes and explored the potential mechanisms explaining this relationship.

Why this research is important:

Reviews various aspects of the association between periodontal health and adverse pregnancy outcomes, including:

- Host response to invasive periodontal pathogens,
- impact of nutritional intake; and
- effect of periodontal therapy.

Listen to *Conversations with Dr. Glogauer and Kim Ivan*:

- Episode 108 on physiologic and pathologic changes during pregnancy can impact oral health care, such as gestational diabetes
- Episode 109 on providing safe treatment to pregnant clients, including radiographs, topical anesthetic, and chlorhexidine
- Episode 110 on oral complications in pregnancy and the relationship between periodontal disease and periodontal therapy on adverse pregnancy outcomes

For additional research on pregnancy, visit Dental Hygiene Newswire for articles on:

- Client shielding during dental radiography
- Cannabis use in pregnancy and child neurodevelopmental outcomes
- Prenatal cannabis use and maternal, perinatal, and neonatal outcomes

Pregnancy-related oral problems

Pregnancy is accompanied by various physiologic, anatomic, and hormonal changes, which can affect oral health. Pregnancy-related oral conditions can have detrimental consequences for both the pregnant individual and the developing fetus. Maintaining good oral health during pregnancy is essential for the health of the pregnant person and their infant.



Islam et al. (2024) reviewed pregnancy-related oral problems, such as gingivitis, periodontal disease, dental caries, xerostomia, dental erosion, and pregnancy tumours.

Why I like this research:

- Provides a summary table on various oral diseases and their connection to pregnancy health, including prevention and treatment approaches.
- Emphasizes the importance of oral healthcare throughout pregnancy.
- Affirms the critical role of dental hygienists in assisting pregnant clients maintain oral health.

Access ODHA fact sheets for client education on related topics:

- Women and Oral Health
- Periodontal Disease
- Tooth Decay
- Dry Mouth
- Enamel Erosion
- Brushing, Flossing, Rinsing
- Oral Health and Overall Health



ODHA NEW GRAD ADVISORY PANEL MEMBER PROFILE

- Erin Kennedy

What made you decide to pursue dental hygiene as a career?

Dental hygiene is such a dynamic career that allows me to explore the newest research and technology without sacrificing human connection throughout the day. I chose this field for the creativity it allows while enjoying the satisfaction of helping clients reach their oral health goals.

What are you enjoying most about working as a dental hygienist so far?

Collaboration with my colleagues has given me such a positive experience during the first few months. I have been inspired by the teamwork which happens to achieve the best client outcomes and experiences.

Why did you decide to join the ODHA New Grad Advisory Panel?

I am hoping to take some of the mystery out of the transition between student and clinician. Entering the workforce after graduation can be a stressful time, and I hope to share my experiences for the benefit of the graduates who come after me.

If you could give one tip to students who are about to graduate, what would it be?

As you move on to the next part of your dental hygiene journey, take time to reflect on the reasons you chose this career. Now is the perfect time to decide what values are important to you before job searching.

Tell us about your favourite ODHA member benefit.

The online professional development courses are hands-down my favourite member benefit. It's so convenient to take my continuing education on the go.

About the New Grad Advisory Panel

The transition from student to registered dental hygienist can be intimidating, complex or even overwhelming. To ease the professional journey from academia to practice, ODHA created the New Grad Advisory Panel.

The primary goal of this panel is to support students and new graduates through the development of resources and points of connection to ensure a smooth transition from school to practice. ODHA works with panel members to determine the areas of greatest need.

Effects of obesity on oral health

Ker-Yung Hong

BSc (Kinesiology), DDS (Candidate)



Ker-Yung Hong is an incoming second-year dental student at Schulich School of Medicine and Dentistry, Western University. He completed his Bachelor of Science (Kinesiology) at McMaster University in 2021. Ker-Yung has worked as a personal trainer in the past and is now engaged in research looking at how oral health relates to overall health.

Modern lifestyles, characterized by convenient meals and sedentary activities, have contributed to rising obesity rates globally. High-fat diets and lack of exercise are causing people to eat over their daily caloric limits and fall short of their healthy weekly physical activity standards. While diet and exercise significantly contribute to obesity, obesity results from a large combination of factors. These include sleep, stress, and uncontrollable factors such as medication, environment, social influence, and diseases.[1] Regardless of etiology, obesity is linked to numerous other diseases, including oral disease. With dental hygienists at the forefront of clients' oral health and oral self-care, the connection between obesity and oral health can be addressed and considered by dental hygienists.



What is obesity?

Health Canada defines obesity as "a progressive chronic disease that is characterized by abnormal or excessive fat accumulation that may impair health."[2] Obesity is often measured using mass index (BMI), which considers a person's height and weight (see formula). A BMI over 25 is considered overweight, and over 30 is considered obese. Research in 2022 showed 30% of Canadians aged 18 and older were obese, which is around 1 in every 3 Canadians.[2] What is even more concerning is since 2003, there has been an increase of just under 43% in obesity among Canadians.[2] Obesity not only serves as a risk factor for other diseases but also complicates oral health maintenance due to inflammation, obstructed airways, and restricted movement.

$$BMI = \frac{Weight\ (kg)}{Height\ (m)^2}$$



Obesity and oral health

Inflammation

The flood of proinflammatory cytokines resulting from obesity has been interlinked with many other diseases, including oral disease.[3–6] Oral diseases characterized by levels of inflammation, including gingivitis and periodontitis, are affected by these proinflammatory cytokines. Systemically circulating



proinflammatory hormones[7] can make their way to blood vessels around the oral cavity and accentuate the levels of inflammation that already exist while accelerating the breakdown of tissue and bone. Additionally, increased inflammation hampers proper wound healing, affecting disease progression and post-treatment care.[3] Cytokines can also decrease salivary flow. Individuals with higher BMIs have higher hypothalamic-pituitary-adrenal axis and cytokine activity, which diminishes saliva production. Saliva is a crucial component for the maintenance of oral health.[8] Saliva plays a crucial role in buffering acidic foods, creating a balanced oral microbiome, and balancing the remineralization and demineralization of our teeth.[9]

Physical mobility deficiency

Access to oral structures is another issue for individuals who are obese. The added pressure from fatty tissues surrounding the jawbone/muscles and airways may make it uncomfortable and difficult for clients to hold their mouths open for extended periods.[10] This makes consistent and thorough cleaning of the oral cavity difficult, especially for posterior teeth. The quality and consistency of oral self-care are also seen to lessen in individuals with obesity with a lower daily frequency of tooth brushing and fewer using secondary oral products. Additionally, poor oral health behaviours were positively associated with general obesity.[11]

Role of dental hygienists

Discussing obesity can be a sensitive topic. However, through consistent recare programs, dental hygienists build comfortable relationships. Dental hygienists can highlight how obesity relates to oral health issues as an additional incentive for weight loss while providing resources to professionals in health, fitness, and diet to offer comprehensive support. Encouraging alternative oral hygiene practices requiring less dexterity and do not necessitate keeping the mouth open for long can be beneficial. Suggestions may include fluoride rinses, power toothbrushes, and dietary changes to reduce acids and sugars. Consistent recare visits can also help maintain good oral health. Understanding the multifactorial approach to treating the oral health of individuals with obesity highlights the holistic connection between oral and general health. Oral health professionals should review and utilize this knowledge to better support their clients' overall health.

* References available upon request

GEORGE BROWN COLLEGE CELEBRATES DENTAL HYGIENE DEGREE COMPLETION GRADUATES

In June 2024, the first cohort of George Brown College's Bachelor of Science (Dental Hygiene) degree completion program celebrated a significant milestone as the first group to graduate from an Ontario college with this credential.

Program Coordinator, Dr. Joanna Asadoorian, was instrumental in the development, planning, and delivery of this degree completion program. "We intentionally designed this for dental hygienists because we felt it was important to offer alternative pathways for those working in the field. While it was years in the making, it's exciting to work with students who have an interest in developing their careers beyond traditional clinical care," she said.

This one-year, fully online program, which starts in May, offers students the opportunity to develop advanced competencies in oral health advocacy, health promotion, and critical decision-making skills. With a focus on a variety of subject areas such as complex oral health care needs, research, and health promotion, students in this program develop the skills to work collaboratively with an interprofessional health care team on complex health care issues.

Rounding out a suite of programs within George Brown's School of Dental Health, Associate Dean Bethanie Huen expressed her excitement over the broad range of student capstone projects. These included initiatives like delivering oral health are services to Indigenous communities, exploring the impact of music therapy on dental client anxiety, enhancing oral health care for individuals with autism spectrum disorder, and developing a program to provide oral health care for the homeless in Ottawa. Huen remarked, "This demonstrates the impact graduates of this program can have on improving oral health in communities across Canada."

For more information or to apply, visit georgebrown.ca/S305.

PROFESSIONAL DEVELOPMENT

Free audiocasts for ODHA members



Join Dr. Michael Glogauer, DDS, PhD, Dip. Perio, and Kim Ivan, RDH, BIS (Hon) biweekly for new audiocast episodes including evidence-based information covering a wide range of important topics applicable to oral health professionals.

There are 24 new audiocast episodes presented by Dr. Michael Glogauer and Kim Ivan each year, representing over 14 hours of professional development. For additional layered learning, there are 24 keynotes and more than 533 additional resources included for quality assurance learning goals. Plus, over 126 client resources to share in practice.

Great open-access resource for oral health professionals



ODHA's Dental Hygiene Newswire website is a mobile-friendly, open access resource for all Ontario dental hygienists, dental hygiene students, and other oral health professionals in Canada. It contains the latest research, updates and news on various topics such as, oral health, mental health, diseases, addictions, and wellness, which can be used toward your quality assurance learning goals. It is updated four times a month with new research articles or ODHA news.

As part of our ongoing commitment to providing you with valuable professional resources, we recently conducted a brief survey about the ODHA Dental Hygiene Newswire. If you missed this survey, don't worry. You can still share your input by emailing us at *info@odha.on.ca*.

Professional development event



Together, ODHA and Philips hosted an extraordinary seminar led by distinguished speaker, Dr. Uche Odiatu, on June 7 in Kitchener to celebrate dental hygiene excellence in Ontario!

Our participants were truly captivated by this fantastic learning experience. Watch the video to catch a glimpse of the seminar highlights.

ODHA 2024-2025 MEMBERSHIP

ONLINE REGISTRATION OPENS - AUGUST 1

2024-2025 Membership

FABULOUS PERKS



Early Bird Draw (July 23 – July 31)

Join or renew by phone only for a chance to win:

- 1 of 7 Sonicare ExpertClean toothbrushes (retail value: $209.99). Donated by Philips, or
- 1 of 7 LM NV-2 sickle scalers (retail value: $100). Donated by Curion.





Daily Draw (August 1 – October 31)

For a chance to win 1 of 92 Waterpik ION water flossers (retail value: $139.99). Donated by Waterpik.



Weekly Draw (August 1 – October 31)

For a chance to win 1 of 24 Sonicare ExpertClean toothbrushes (retail value: $209.99). Donated by Philips.



Monthly Draws (August, September & October)

For a chance to win 1 of the following:

- Loupes gift certificates (Aug: $1,000 x 2, Sept: $500 x 2, Oct: $500 x 2). Donated by Orascoptic.
- LM 8-instrument set (3-set diagnostic instruments + winners can choose their own selection of 5 scalers or curettes) (retail value: $719). Donated by Curion.



Free Membership Draw (August 1 – October 31)

For a chance to win 1 of 5 FREE ODHA 2024-2025 memberships (value: $253). Donated by Paradise Dental Technologies.

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Two Free New Professional Development Online Courses

Including: Zero Cavity Future: Building a Smile Defense Plan for Kids; Presented by Dr. Mariana Leon, RDH, DDS; Sponsored by Colgate.

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2024 ANNUAL GENERAL MEETING

ODHA held its 2024 Annual General Meeting (AGM) on May 24, 2024, in Burlington. Terms for directors in region A, B, C, D, E, and G expired and elections were held in regions B, C and D. Harishni Ramesha (RDH) was elected to represent region B; Michelle Aube-Simmonds (RDH) was elected in region C and Amy Currie (RDH) was elected in region D. The other directors were acclaimed and include Sierra Pasternak (RDH), region A; Salimah Jinnah (RDH), region E, and Renata Albonese (RDH), region G. The ODHA Board of Directors officially welcomed the four new members at the AGM. Click here to learn more about 2024-2025 ODHA Board of Directors. The financial auditor's report and new by-laws were also approved at the meeting.



Harishni Ramesha, RDH
B – Halton-Peel, Simcoe County, Muskoka



Michelle Aube-Simmonds, RDH
C – London & Area, Sarnia-Lambton, Windsor-Essex, Huron-Grey-Bruce



Salimah Jinnah, RDH
E – Hamilton & Area, Niagara Region, Waterloo-Wellington



Renata Albonese, RDH
G – Durham, York Region

2024 ProvinciaLINK June update video release

The ODHA 2024 ProvinciaLINK June Update video, featuring important news and highlights about your provincial association, is available now.

In this edition, the ODHA President Rozina Bhimji, RRDH, and the Chief Executive Officer Marg Harrington, MHS, MHE, cover a range of topics:

- New board members
- National Oral Health Month activities
- ODHA 2024 awards, including the Student Award of Excellence, Community Service Award, Distinguished Service Award, and the Award of Honour
- Board members volunteering at the Special Olympics in Waterloo
- Educators' Forum held on June 10
- Professional development events
- 2024-2025 membership campaign
- and more

Watch the video to stay well informed of the latest ODHA developments.

odha AWARDS

ODHA's Awards and Recognition program recognizes the outstanding contribution of its members to the Association, the dental hygiene profession, and the community. The following members are the 2024 ODHA award recipients:

Lynda McKeown received the ODHA Award of Honour for her exceptional contribution to the profession of dental hygiene.

Jody Allen was awarded the ODHA Community Service Award for her dedicated participation and commitment to volunteer activities that benefit the community.

Kerry Lepicek and Cristina Gullo (not picutred) were honoured with the ODHA Distinguished Service Award for outstanding contributions to the dental hygiene profession and the Association.

Congratulations, Lynda, Jody, Kerry, and Cristina! Your hard work and dedication are truly inspiring!

Award of Honour



Lynda McKeown, RDH

Community Service Award



Jody Allen, RDH

Distinguished Service Award



Kerry Lepicek, RDH

Student Award for Excellence in Advocacy

Congratulations to ODHA student members Karen Munera Osorio (pictured-Fanshawe College) and Amber Carter (Canadian National Institute of Health). They were honoured with the ODHA 2024 Student Award for Excellence in Dental Hygiene Advocacy for outstanding advocacy efforts in the provincial. Amber will receive her award at the school ceremony in August.



Karen Munera Osorio
Student, Fanshawe College

The Student Award is sponsored by Crest+Oral-B.
To learn more about the student award, please visit https://odha.on.ca/students/student-award/.

ODHA was extremely pleased to bestow the Award of Honour on Lynda McKeown on May 24th. Lynda's acceptance speech was exceptionally inspiring for all who attended the event. With Lynda's permission, we are pleased to share it with our FOCUS readers.

I hope you find her words as inspiring and motivating as we have.

- Marg Harrington, CEO

Celebrating a Legacy of Leadership and Dedication in Dental Hygiene

- A Message from Lynda McKeown



President Rozy, CEO Marg, esteemed guests, colleagues, and friends, I am deeply honoured and humbled by the nomination for this ODHA Award of Honour, suggested by Marg and supported by colleagues Carolyn Weiss, Ruth Bushby, Maheen Cassim, Sierra Pasternak, Tonia Peachman-Faust, and Lara Timler.

I have great admiration for Marg's exceptional leadership, effectively connecting with LTC associations, and her willingness to absorb our dental hygiene 101. She has been amazing!

Receiving this award aligns me with past recipients whom I admire and respect: Rosemarie Craven, Beverley Kassirer, Cheryl Cancelli, Diane Kozachuk, Laura Dempster, Sandra Lawlor, and the most recent recipient, Kim Ivan, in 2015.

I am thankful to have colleagues like Sue Raynak and Carolyn Weiss, who are also dear friends. Sue and I have shared both professional and personal trials and triumphs. Her unwavering support has been and is invaluable.

Carolyn's transition from private practice to independent stand-alone and mobile home care is a blessing. Her strides forward include a research project with a LTC home and Lakehead University. Her efforts are truly commendable. I have no doubt she will advance dental hygiene home care initiatives far beyond mine.

I would like to share a bit of my professional journey. I graduated from the dental hygiene program at the University of Toronto in 1964, the only program in Canada at that time. I was the first dental hygienist in what is now Thunder Bay. I had the

privilege of starting to work with Dr. Arne Kaukinen in what was then Port Arthur. He had a vision and convinced three other dentists in his building to participate in his unique idea. They established a 'dental hygiene area,' a separate office, and their third chair. The dentists had only two chairs, which were always full as they were busy restoring teeth and maintaining functional dentitions. Working as an independent contractor, I provided periodontal therapy for the patients of these four dentists. This collaboration set a strong foundation for my career.

A change in leadership of the dental hygiene area after the death of Dr. Kaukinen and a couple of other adversities forced me into new situations and back to school. It is said, "Whatever doesn't kill you makes you stronger!"

I worked as a clinical therapist in private practice, operated a Fresh Breath Clinic, conducted research during and after my MA sociology studies, taught dental hygiene students, and provided dental hygiene care for residents in long-term care homes. I have served as the first president and chair of CDHO.

I know firsthand the issues of dental hygiene. It took 25 years to achieve self-regulation and gain regulatory independence from dentistry, both as the regulator and employer. Most dental hygienist colleagues shared the ideology of self-regulation. Self-regulation meant dental hygiene autonomy within dental practices. Shackles were broken. Finally, the dental hygiene profession was responsible and accountable for curriculum development, scope of practice, etc. It was hoped that at the time of the proclamation of the *Regulated Health Professions Act* and *Dental Hygiene Act* (DHA), the dental hygiene profession would become included in the 'circle of care' providers.

I recently reflected on my journey into LTC and the development of non-invasive dental hygiene oral care. It was because of the Order in the DHA. A patient/client I had seen in private practice moved into LTC. His wife wanted me to provide oral care. I saw him and recognized issues and challenges. I thought, "How can I do this?" The answer: non-controlled acts. Most of the time, debris is soft and can be removed with 'oral physiotherapy tools.' Yet, it takes professional dental hygienist 'know-how' to properly apply tools and therapies.

Those of you who know me know I am absolutely passionate about dental hygiene and its value to the health of the public. Dental hygiene did not begin as a handmaiden to dentistry, gathering oral data to be used by dentists for their treatment. Dental hygiene's prime function was to educate the public, primarily children, on 'mouth hygiene.' About 1906, Dr. Alfred C. Fones trained his cousin and chairside assistant, Irene Newman, in mouthkeeping. Fones gets the credit for the idea. What about Newman? Don't you think she helped Fones develop the term

dental hygienist and the dental hygiene school in Bridgeport, Connecticut, in 1913? I did not know until preparing this that the public school preventive dental hygiene program is credited with Bridgeport having the lowest death rate of any large city in the world during the influenza pandemic in 1918.

From my work in LTC, I know the importance of mouth hygiene. A clean mouth for health may be anecdotal, but it is self-evident. Don't clean the tooth-gum interface, embrasures, or contacts - eat sugary carbohydrate foods, gums will become inflamed/wounded, and carious lesions will very likely develop. Healthy gums prevent infection and inflammation, a key connection to systemic illness.

In 2024, dental hygiene will primarily be practiced in private dental offices. What are the 'shackles' now holding dental hygiene back? Limited insurance company codes? Our own insecurities? The inability to get recognized by government health legislation?

Dental hygiene needs to move into the community and partner with dietitians, speech-language pathologists, pediatric physicians, and others to educate the public about the importance of oral health to general health.

In conclusion, ODHA must continue to lead and inspire. Let us encourage our peers to support ODHA and unite to propel the profession forward.



Again, my thanks for this honour!

Lynda McKeown, RDH, HBA, MA

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for Ontario Dental Hygienists

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September	Aug 2	Sept 10	Sept 30
November	Oct 2	Nov 10	Nov 30

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