### Orofacial Pain: Specialty Recognition





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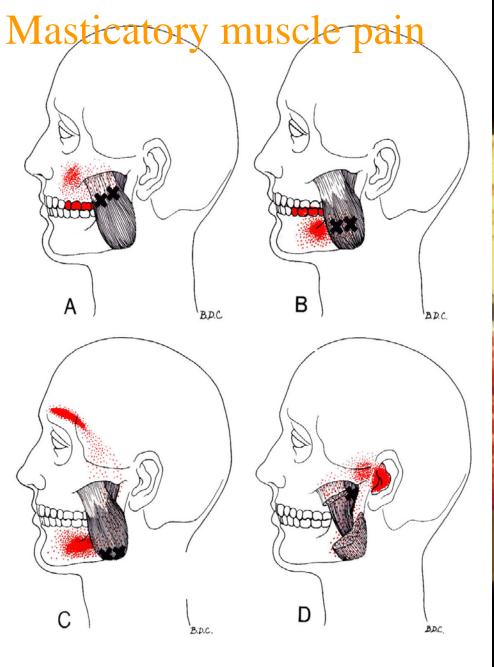
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#### The Problem

The lack of access to care for patients suffering from chronic orofacial pain disorders.

# Problem: access to care for chronic orofacial pain disorders.

- 10 million people with chronic orofacial pain go without care each year. \*Aaop.org
- One in 6 patients who visited a general dentist reported orofacial pain within the past year. \*Horst. J Am Dent Assoc. 2015
- 4 out of 10 patients with chronic pain report inadequate relief 5 years after symptom presentation and treatment initiation. \*Portenoy R. Amer Pain Soc News 1999.



#### TMJ arthralgia



Neuropathic pain



# Orofacial Pain The state of the art

- Intracranial disorders
- □ 1º Headache disorders
- □ 2º Headache disorders
- Neuropathic pain
- Intraoral pain disorders
- TMDs
- Cervical pain disorders
- Associated structures
- Axis II mental disorders

2 <sup>0</sup> = temporal arteritis, post trauma headache, medication overuse headache

Neuropathic; episodic (TN) and constant, SMP

TMD: TMJ, masticatory muscle

Assoc structures:extra-cranial: ENT,sinus, salivary

### Problem: access to care

- Orofacial pain includes neuropathic, musculoskeletal, vascular, odontogenic, glandular, and intracranial etiologies
- 95% of dentist reported a preference to refer these patients to orofacial pain specialists \*Rosenbaum RS. J Mass Dent Soc. 2001
- 32% of dentists stated the reason they refer such patients is because of low reimbursement by insurance agencies

\*Rosenbaum RS. J Mass Dent Soc. 2001

# Specialty recognition would expand: Insurance Coverage Referral Networks **Improved Care**

#### ADA American Dental Association®

Date: May 17, 2017

- To: ADA Specialty Recognition Communities of Interest
- From: Task Force on Specialty and Specialty Certifying Board Recognition
- RE: Proposed New ADA Agency to Recognize Dental Specialties and Certifying Boards

### Specialty Requirements

- Represented by a sponsoring organization
- Membership reflective of specialty
- Certifying board

### Specialty Board

- Each board shall certify qualified dentists as diplomats
- No more than one board shall be recognized for the certification of diplomats

# Formal advanced education programs

- of at least two years accredited by the Commission on Dental Accreditation
- to provide the special knowledge and skills required for practice of the specialty.

# AAOP: Clinicians and Educators

## A Network of Healthcare Providers treating Orofacial Pain

- Approximate 400 members nationwide
- International chapters on five continents
- Over 1000 members worldwide
- 75% of private practitioners devoting practice to the management of orofacial pain
- 25% Educators based in universities and teaching hospitals





### ADA Recognition

- In 2000, the AAOP first attempted to gain full status recognition by the ADA as a specialty of dentistry
- AAOP develops written and oral specialty examination to establish diplomat status in OFP.
- AAOP develops CODA accreditation standards for 2 year residency
- In 2016 Twelve OFP programs had achieved CODA accreditation

### Specialty Recognition

- ABDS created
- ADA looses lawsuits in Florida and Texas in favor of OFP specialty recognition by ABDS
- 2018 : Dental Boards in Mn, NC, Ohio recognize OFP specialty
- ADA proposes New Agency to Recognize Dental Specialties and Certifying Board

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### ADA Recognition

- It is the Association's belief that the needs of the public are best served if the profession is oriented primarily to general practice.
- Specialties are recognized in those areas where advanced knowledge and skills are essential to maintain or restore oral health.

### Specialty recognition

proposed specialty must be a distinct and well-defined field which requires unique knowledge and skills beyond those commonly possessed by dental school graduates

- The scope of the proposed specialty requires advanced knowledge and skills that:
- (a) are separate and distinct from the knowledge and skills required to practice in any recognized dental specialty;
- (b) cannot be accommodated through minimal modification of a recognized dental specialty.

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