Role of Dental Healthcare Practitioners in Vaccination

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Editorial

Dental health care professionals have an essential importance in not just persuading their patients to become vaccinated, but also in providing vaccines. Which is not something that had previously occurred as a professional concern, and it required the coronavirus disease 2019 (COVID-19) pandemic to cause such concern in health care professionals. Fortunately, there are dental care and public health professionals, including those in the journal’s readership, who are far more foresighted and well-informed than many others and who have long recognised the important, if not critical, role that these doctors can play independently and collaboratively in ensuring vaccination of patients.

Several countries already allow dentists to deliver immunizations; these rules existed before the pandemic. Arkansas enacted a bill authorising dentists to deliver the COVID-19 vaccination in November 2020. Oregon, on the other hand, is the only state that allows dentists to administer vaccines. After cutting through the unnecessary bureaucracy, politics, and organizational territorialism, perhaps more governmental bodies will understand the critical role that dental health practitioners can play in preventing contagious diseases, just not COVID-19 and influenza.

Numerous immunizable diseases are seen in clinical practise, and clinicians may be asked to identify and/or treat them. Mumps, measles, chicken pox, condyloma acuminatum, shingles, and oropharyngeal squamous cell carcinoma are just a few instances. The vaccine’s positive effects are well-documented and unquestionable. The FDA amended the guideline of vaccine for prevention of oropharyngeal and many other head and neck cancers in June 2020.

The WHO has taken notice of vaccine apprehension (WHO). Vaccine hesitancy was ranked amongst the top ten dangers to world health by the WHO in 2019. Acquiring trust of the public to tackle vaccine misinformation was named one of the top ten health problems of the decade by WHO in current decade. The reasons for vaccine apprehension are undoubtedly diverse, and they may even involve prejudices imposed by medical professionals. Nonetheless, a lack of health literacy combined with the power of social media has aided in the spread of vaccine disinformation, which is clearly a global issue. Vaccine misinformation can also be found on a variety of different social media platforms.

Physician confidence has been shown to be a critical driver of vaccination adoption time and time again. Despite this, a national poll indicated that just 23% of 1209 polled parents were comfortable with their child having the HPV vaccine from a dentist, with 36% believing that dentists should not be delivering immunizations. In Minnesota, where dentists are permitted to deliver vaccines, 66.4 percent and 72.6 percent of questioned parents, respectively, believed that dentists were qualified to educate their patients about HPV and provide the HPV vaccine. Similarly, 79% who took their children to a paediatric oral health care centre said they would allow their child to be vaccinated by their dentist, according to another survey.

A crucial driver of vaccination acceptability is the effect of healthcare workers’ attitudes. Dentists should address preventive medical care among their patients, according to research. However, just a few percentages felt they should talk about immunizations in particular. Dentists are allowed to vaccinate their patients in Oregon. This apprehension among practitioners seems to extend to students in training. In a survey more than 50 percent students were hesitant to prescribe the HPV vaccine, despite the fact that the majority believed it was within their scope of practise. Students who believed that injecting the HPV vaccine was within the scope and role of a dentist were nearly 8 times more willing to administer the vaccine than students who did not recognize it was within the scope and role of their future practise, according to a study of dental and dental hygiene students from across the United States.

Dentists need to mobilise and be more forward as oral healthcare practitioners personally and as professional associations altogether not just in pushing our patients to vaccinate but also arguing to be on the frontline on delivering vaccinations. Dentists are well equipped to generate resistance against vaccine disinformation, be it a COVID-19 vaccine, the HPV vaccine, the flu vaccine, and perhaps even the shingles vaccine, and must take the advice of medical colleagues and health authorities in emphasising the merits of vaccination. Despite the fact that it took a pandemic for dentists as well as people to realise this, hope for well-equipped future is in the knowledge that will be woven into the educational fabric for next generation of dental physicians, and well before the next pandemic.

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