

Children's dental assistance in the Republic of Moldavia and the reform concept

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Summary

This paper surveys the dental assistance of the Republic of Moldavia's children. Dental pathology in children is present in 97% of cases and there are 1.2 pediatric dentists for 10,000 children. Prophylactic measures are being performed in 47% of children. 1% of children have access to orthodontic treatment. That is why a "National Program" of dental assistance reforming action in children was elaborated during the period of transition to market economy in Moldavia, highlighting prevention of dental pathology in children.

A dental department for children has been set up and is in operation in the Republic of Moldavia. The state is providing the management and the financing system. Pediatric dental surgeries are represented by a main county polyclinic in the city of Chisinau along with 122 departments and pediatric dental surgeries. 199 pediatric dentists (1.26 for 10,000 children) and 3.6 dentists for adults to 10,000 patients work in these institutions. The budgetary sphere is represented by 214 positions for the whole country, 199 of them being held. According to the Republic of Moldavia Health Care Law, No. 411 -14 from the 28th of March 1995, and to the Convention on children's rights, the state is protecting children's health and provides periodic active medical supervision. This law provides facilities for children and adolescents (0-18 years old), the aggregate number amounting to 1,335,327 children (30.91% of the population).

In 1997, dental assistance was provided for 677,000 of these children (59.27%). 1,211,000 dental check-ups were performed while a percentage of 46.3% of the children were treated. Orthodontic assistance was provided to 11,458 children. Dental diseases prevention was provided to 47.1% of children and to 22.3% of adults. The percentage of adults who need oral treatment is 39.2% and the percentage of children is 39.6%. 81.6% of children in need of dental care underwent treatment. The state is not able to entirely finance the dental assistance

through the transition period and the economic crisis. Children's dental care needs reached 97% but the free access to services is still limited. The state's possibilities regarding the achievement of the National Oral Health Program are also limited. Pediatric dental surgeries operate with 20 years old equipment, a reduced number of instruments, materials, medicines. Their increased costs do not even allow provisioning of minimum dental assistance for children, which is guaranteed by the state. The morbidity of children with oro-maxillary-facial diseases has considerably grown; the social, living and nourishing conditions have worsened. All that leads to a decreased children's access to dental assistance.

All the above mentioned information leads to the need of reforming the children's dental assistance system in order to achieve the National Program for children's oral health between 1998-2007 and children's access to high quality dental assistance.

The dental reform calls for essential changes concerning the rational use of available resources, the planning, guiding, financing, control and supervision of children's dental assistance.

The legislative framework envisaging the providing of children's dental assistance in medical establishments with different profiles is needed in order to attain such goals.

The main legislative act is The National Program of Oral Health in children from the Republic of Moldavia (1998-2007), endorsed by the Resolution of the Republic of Moldavia, No. 1235, from the 22nd of December 1998. This resolution enforces the structures of central and local public administration to provide putting into practice the items presented in the Program. The Ministry of Health, Education and Science issued a resolution, No. 53/117 from the 24th of February 1999: "Concerning the oral health status and the improving measures of children's dental assistance in the Republic of Moldavia".

The roles of the dentist and of the educators in the education establishments are made clear in this resolution. The concept of dental hygienist and his work rules are endorsed.

The national centre for children's dental assistance has been reorganized. Modern methods of diagnosis and treatment, the control and survey of the dental assistance are hereby put into practice.

Pediatric dentistry establishments (poly-clinics, surgeries, hospital departments), regardless of the local status or the subordination, are state institutions which provide children free therapeutic and surgical assistance, in the conditions specified by the Law of the minimum medical assistance guaranteed by the state.

Dental assistance may be provided against payment, on patients' or relatives' request in case materials or medicines are used from other sources. The benefits are used to upgrade technical and material supplies and to provide incentives to dental staff.

In dental offices, where pediatric assistance is not separated (e.g. in village dental surgeries), the organizational structure will be preserved in order to assist the children free, considering the number of subjects in the area.

Emergency dental assistance (acute pain, inflammatory processes, trauma) is free of charge and compulsory in all state and private dental establishments.

Children's dental assistance in hospitals is offered within the limits of the minimum allocated sums. Different services can be provided against payment on parents' or relatives' request.

Cosmetic surgery is provided against payment, according to the approved list of prices.

Private dental establishments provide dental emergency assistance free (for acutely threatening health conditions), to 10% of the children coming from socially vulnerable families.

Pediatric dental institutions and educational establishments bear the responsibility of treating the children in schools and kindergartens and other organized groups and of applying the National Oral Health Program all over the Republic.

Specialised dental assistance is provided in state administered hospital departments, free of charge for the first 3 or 5 days and for charge the days after.

Dental assistance providing layer surgery is offered against payment, according to the approved list of prices.

Orthodontic assistance, for both children and adults is provided in state institutions against payment.

Orthodontic assistance could be provided also in private institutions, after authorization is granted.

The implementation of the dental assistance reform involves the accomplishment of the Oral Health and Preventive Dentistry Program.

Epidemiological data from across the country provide information on the evergrowing increase in dental diseases' morbidity.

In order to halt the decline it is necessary that:

- this situation must be publicly recognized and dental diseases must be part of health priorities (their prevalence is known as being 95%);
- dental diseases are to be looked upon as nontransmittable infectious diseases of national significance;
- the developing and the implementation of the preventive dental program ought to constitute a national priority and the state should contribute to accomplishing the measures included in the program;
- therapy offered to young children, school children and students should pursue the concept of the Oral Health Program of the Republic of Moldavia.

The paths of accomplishing the program are:

- setting up or maintaining in operation of dental office, dental hygiene corners in educational and teaching institutions;
- recycling of dentists along issues of preventive dentistry - 60 hours;
- increasing the number of dental team members in order to prevent oral diseases in communities: setting up the position of dental hygienist;

- providing dental assistance and accomplishing preventive measures, mainly to children from villages lacking dentists;
- reserving special hours for providing preventive measures in education establishments, in order to facilitate the dentist's work;
- maintaining the same dentists in the same departments for the same sector, for at least 5 years, in order to improve preventive work and to ensure stable results;
- regularly and minutely controlling the quality of preventive work in educational establishments; each educator or dentist must have personal responsibility for his own work; granting awards to specialists with good results in dental diseases prevention in children;
- annual reports will contain data concerning medical institutions with preventive work (prevalence and intensity of dental caries and periodontal diseases, dental fluorosis prevalence, children oral hygiene indices in children);
- involving gynecologists, pediatricians and medical nurses in the preventive program;
- real and concrete collaboration between members of the dental team and educators, parents, other persons who could influence community's sanogenic attitude;
- securing the production of plaque revealer tablets;
securing the production of specific products for topical and general fluoridations;
- mentioning of and awarding prizes to those children with special activity and cooperation with the dentist in order to stimulate oral hygiene and interest in preventive dentistry; providing dental assistance against payment to children who disregard oral hygiene and do not visit the dentist regularly.

- an analysis of the needs for dental assistance in poor communities; - - specific measures in order to attain a favorable cost-effective ratio;
- cooperation with international financial organizations.

Cooperation with other fields, which could influence population's oral health status, is requested in order to enforce coherent dental assistance policy.

References

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Dental assistance needs the achievement of a coherent central and local policy that stipulates:

- a detailed analysis of the population's needs for dental assistance;