



Motivational Factors for the Non-Compliant Patient

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ABSTRACT

OBJECTIVE: To discuss how to find the best motivational factor for your patients.

BACKGROUND: A 34 year old Caucasian male presented to the dental hygiene clinic for a "cleaning." Significant findings in the medical history include current treatment of HIV. Residual sealants, impacted third molars and multiple active lesions are found upon clinical examination.

ASSESSMENT: Patient presents with generalized mild, plaque induced, marginal, papillary gingivitis as evidenced by pale pink, bulbous, spongy gingiva with slight BOP. Localized moderate to severe plaque induced gingivitis on lingual mandibular tissue as evidenced by red, rolled, inflamed papilla with easy BOP on the mandible. Generalized 4-6 mm CAL due to inflammation and pseudo-pocketing. Generalized healthy periodontium as evidenced radiographically by 1-2 mm measurements from the CEJ to crest of alveolar bone. The patient's caries risk was high due to clinically visible active lesions. The primary contributing factor to the gingival inflammation was the amount of calculus deposits from 18 years free of dental visits.

DENTAL HYGIENE CARE PLAN: Patient was to receive a prophylaxis and fluoride varnish. Patient received extensive oral hygiene education including aids for xerostomia, modification of brushing technique, c shaped flossing.

EVALUATION: Oral health indicators showed improvement of the health of the patients tissue after removal of deposits.

CONCLUSION: Finding the right motivating strategies for your patient will determine how successful their treatment outcomes will be in achieving optimal oral health.

INTRAORAL PHOTOGRAPHS



SIGNIFICANCE OF THE CASE

- Patient has not received any dental care in 18 years due to a mix of dental fear and lack of interest towards oral health.
- Plaque Score: 60%, 48%, 36%, 30%
- This patient is currently taking medications that cause xerostomia.

TREATMENT CONSIDERATIONS

Motivational Interviewing

Designed to influence lifestyle change instead of simply giving patients the facts about dental health.

Encourages patients to verbally express a desire to change and allows the clinicians to explore and perceive the patient's intrinsic motivation for change.

Principles of MI

1. Establish Rapport
2. Exploring Ambivalence
3. Listening with reflection
4. Assessing Readiness
5. Accepting Resistance/Reinforcing Positive Choices
6. Allow Patient Autonomy in Decision-Making

REFERENCES

Wagner CC, Ingersoll KS. Beyond cognition: broadening the emotional base of motivational interviewing. *J Psychotherapy Integ.* 2008;18:191-205.

Fruedenthal, J. (2010). How to Encourage Change. *Dimensions of Dental Hygiene*, 60-65.

MEDICAL HISTORY

- 34 year old male with HIV/AIDS
- Xerostomia
- Medications: Reyataz, Norvir, Truvada,

EVALUATION

The patient presented to the hygiene clinic because he had not been to the dentist in 18 years. Throughout the treatment visits, the patient seemed apathetic to learning the techniques and information to better his oral health. During oral hygiene instruction, the patient tended to try to rush through it. Relevant information was presented, steps, and products that can be used to improve his oral condition. Since the last visit the patient has not returned to complete treatment. The patient did not show engagement in conversations possibly due to the lack of motivational interviewing. The next visit should focus on assessing the patient and asking more open ended questions leading to why he would want to change his oral health. Exploring and planning for challenges that may arise in the time of treatment will also increase the likelihood that the patient will adhere to appointments. Being an involved clinician outside of the appointments will demonstrate compassion towards patients and their oral health. During the future appointments, different motivational strategies will be implemented because motivational interviewing is an integral tool to health professionals so that patients are involved in the optimizing of their oral health. There must be a direct correlation of effort between the patient and clinician to achieve this.

CONCLUSION

Finding the right motivating strategies for your patient will determine how successful their treatment outcomes will be in achieving optimal oral health.