

**Indiana Oral Health Coalition (IOHC) Minutes**  
**Annual Meeting**  
**Friday, September 13, 2019**  
**Hosted by the**  
**Indiana State Department of Health**

Mission: The IOHC is a collective voice of individuals, groups, organizations, and businesses working together to promote, protect and provide for the oral health of the residents of Indiana.

**PRESENT**

Leila Alter	Jessica Griffith	Gabriela Pena-Rodriguez
Steven Barefoot	Ben Harvey	Holli Seabury
Stephanie Eddy	Lori Lovett	Tonya Stewart
Candace Ervin	James Miller	Isaac Zeckel
Nicole Fairchild	Patty Morris	
Anita Gaillard	Karla Marin Muskus	

**WELCOME**

Dr. Leila Alter, Chair, began the meeting at 10:15 a.m. welcoming everyone.

Everyone was allowed to introduce themselves and the organization they represented.

**REVIEW MINUTES**

Dr. Alter asked if there were any corrections to the minutes from the last meeting; there were none. Dr. Alter asked for a motion and second to approve the minutes. A motion and second were offered and the Indiana Oral Health Coalition minutes from the June 7, 2019, meeting were approved as submitted by a unanimous voice vote.

**PRESENTATIONS**

**A. Vaping and Oral Health:** Anita Gaillard, MSPH, Director of Community Programs, Tobacco Prevention and Cessation Program, the Indiana State Dept. of Health

The good news is that, in the United States, regular (combustible) cigarettes have seen a decline in use since 2012. However, e-cigarettes have become very popular especially among our young people. Nearly one in five high school students and almost 1 in 12 middle schoolers say they use electronic cigarettes, or e-cigarettes, according to the 2018 Indiana Youth Tobacco Survey.

E-cigarettes are battery-powered devices that heats a liquid to produce an aerosol that users inhale. They usually contain nicotine and other harmful chemicals. Many people think e-cigarettes are harmless. The fact is that most e-cigarettes contain highly addictive nicotine, which isn't safe for young people's developing brains. One e-cigarette pod can contain the same amount of nicotine as an entire pack of cigarettes.

Ms. Gaillard reported data showing vaping among Indiana youth have increased in high school students by 387% and in middle school student's vaping has increased of 358% since 2012. While the rates of tobacco use have declined, the surge of youth using e-cigarettes has gone up at such an alarming pace that the U.S. Surgeon General is calling it an epidemic that "demands action to protect the lives of young people."

Gov. Eric Holcomb and the Indiana State Department of Health have launched a two million dollar campaign to reduce vaping among Indiana's youth. The plan was unveiled Aug. 29 at Fishers High School. The campaign has three areas of focus:

- Increase awareness of the risks associated with e-cigarettes. The plan includes an educational toolkit with data, resources and more for schools, parents and students.
- Help youth quit vaping with a youth-focused text-to-quit program
- Boost public awareness of vaping statewide through a campaign to focus both on prevention and cessation

We were encouraged to visit Vape-Free Indiana at <https://www.in.gov/isdh/tpc/2764.htm> for more information on what you can do to protect youth from the dangers of vaping. You'll find there a variety of resources, from the complete tobacco survey to local tobacco control coalitions, and from no-vaping signs to tips for talking to kids about e-cigarettes.

Within a week of the announcement of this campaign came the tragic news that a lung injury linked to vaping had taken the life of one of our fellow Hoosiers. This respiratory condition has impacted nearly 50 others in Indiana, and Centers for Disease Control and Prevention (CDC) reported that across 36 states and the U.S. Virgin Islands there have been more than 380 possible cases of lung illness and seven deaths associated with using e-cigarettes. This is a rapidly evolving situation, and we still have more questions than answers. While the investigation continues into the cause of this condition, the CDC has advised that everyone who uses e-cigarettes consider not vaping until we know more. The rise in vaping among our youth and the serious injury vaping may cause is not something we can ignore.

The federal investigation into the link between vaping and severe lung illnesses is ongoing and has not identified a cause, but all victims reported their use of e-cigarette products and some patients have reported using e-cigarettes containing cannabinoid products, such as THC. Health officials said it wasn't clear what type of vaping products the patient was using.

At every visit, ask your patients about tobacco use and advise them you can help them to quit by providing them with information about the Indiana Tobacco Quitline at 1-800-QUIT-NOW.

There was a group discussion.

**B. Silver Diamine Fluoride Indications:** Stephanie Eddy, RDH, BS, Indiana Preventive Care Consultant, Elevate Oral Care

Ms. Eddy gave an overview of the Silver Diamine Fluoride (SDF). SDF is an FDA-approved topical solution that can be clinically applied to prevent/treat cavities and to reduce tooth sensitivity. It is four times more effective than fluoride varnish. SDF is composed of silver, ammonia, and fluoride. SDF's ability to slow down or stop dental decay comes from two main ingredients. Silver's antibacterial properties have been known for centuries, and its low toxicity makes it ideal for use in humans. Fluoride significantly increases the rate at which tooth enamel can be remineralized by saliva, and at the same time increases the enamel's resistance to future degradation due to acids. Fluoride has antimicrobial properties as well.

The use of silver fluoride includes stopping tooth decay from progressing and keeping the affected teeth stable until a dentist determines if further action is necessary to preserve the health of the teeth. SDF helps harden the tooth structure softened by decay. Only Advantage Arrest is approved for use on children.

While SDF treatment cannot repair the function or aesthetic of a decaying tooth, this non-invasive treatment will prevent further progression of the disease. While the ideal way to treat teeth with decay is by removing the decay and placing a restoration, this alternative treatment allows dentists to stop decay with non-invasive methods, particularly with young children that have baby teeth that would be uncooperative for restorative dental treatment.

It is very easy to apply. You apply it with a micro brush coating the lesions and letting it set from 60 seconds to three minutes. Encapsulate the tooth with a little fluoride varnish to keep it in place so it doesn't flow. It takes one to two weeks to harden completely. The fluoride will darken the decayed tooth area but it will not harm the healthy part of the teeth or gum. It will discolor caries (turns black) but will not discolor healthy tooth structure. Bring the patient back in two to four weeks for a second application and then reapply every six months. No post-procedural recommendations, however most dentists are using the above University of California- San Francisco protocol.

SDF has been used extensively outside the United States for many years for caries control. In clinical trials, SDF applied directly to the cavitated carious lesion outperformed fluoride varnish for the non-surgical arrest of caries in children and older adults. In addition, SDF demonstrated impressive caries prevention to adjoining teeth not receiving direct application of SDF. At least eight published reports of randomized clinical trials consistently demonstrated very high rates of caries arrest.

There was a group discussion.

## **OLD BUSINESS**

### **a. Indiana State Oral Health Director Report – Dr. James Miller**

Dr. Miller announced that there was no report today.

### **b. Brush Update – Nicole Fairchild**

Ms. Fairchild reported that *Brush!* has moved into Johnson county this year. *Brush!* is now in 82 Indiana counties. They were also able to expand the oral health project into the state of Illinois this year and hope to expand into Arkansas, as well.

### **c. ANOHC Update – Dr. Leila Alter**

The American Network of Oral Health Coalitions (ANOHC) is a network of 40 state health coalitions that advocate for 294 million Americans. Dr. Alter reported that all the emails she has received from ANOHC recently have been about funding or other state's efforts in expanding Medicaid to the adult population.

### **d. EnCred/Medicaid Update – Dr. Leila Alter**

EnCred development was permanently suspended in June 2019. OMPP is committed to developing a credentialing verification system and currently is researching both short and long-term solutions. The IAC Dental Rule update has not been published yet.

## **NEW BUSINESS**

### **• Vaccines administered by dentists**

In August there was a meeting for northeast Indiana public health/healthcare workers hosted by the Allen County Health Department which was also attended by the ISDH Immunization Division. At this meeting there was discussion about the current Hepatitis A outbreak and how to respond in a coordinated way to get the population immunized. After this meeting, there was continued discussion within the Neighborhood Health Clinic FQHC (Fort Wayne) which identified a potential vulnerable patient population that did not have a medical home but had an established dental home. The dental clinic will be implementing vaccination screening and referring patients in need of vaccinations to the medical side. However, there is concern that the patient will not wait for the vaccine to be given or will not come back for their medical appointment.

Dr. Alter contacted a member on the Indiana State Board of Dentistry and inquired whether the Board had an opinion on dentists administering vaccinations. This board member was going to further inquire if this would require legislative action or just a letter of opinion from the Medical Board, and suggest that this be an agenda item for the Board of Dentistry's October meeting.

Oregon has approved vaccinations administered by dentists. There was lengthy discussion especially on how to bill for this by the dental office. Dr. Alter reported the dental provider(s) should use CPT codes on a medical claim form. Medicaid allows dentists to use medical codes and the code set would need to be expanded.

Health Linc, IPHCA and the Indiana Immunization Coalition are implementing a pilot project in the Health Linc facilities to boost vaccination rates. They also see similar patient demographics like the Neighborhood Health Clinic where patients may have an established dental home but do not have a medical home.

A motion was offered that the IOHC support efforts allowing dentists to prescribe and administer vaccinations in a dental setting. This motion was seconded. The motion was approved by unanimous vote of the members present.

- **Special Olympics Arkansas dental provider education**

Dr. Alter reports that she often receives inquiries from providers for referrals for dentists that treat special needs patients, especially adults. The Indiana Society of Pediatric Dentistry (ISPD) has compiled a directory of dentists which can be found on their website, however there often patients have to travel to see a dentist. Dr. Seabury provided information on the partnership between Special Olympics Arkansas, Delta Dental Arkansas and the Delta Dental Foundation Arkansas. They developed an all-day training program for dental providers and hygienists on working with individuals with intellectual disabilities prior to providing screenings at the Special Olympics in Arkansas. There was discussion with the group about having the IOHC, with key partners duplicate this effort in Indiana. Currently, the IUSD dental students have been providing dental screenings at the Special Olympics Summer Games held in Terre Haute. Dr. Alter was going to reach out to Dr. Soto (IUSD) and Special Olympics regarding other Special Olympic events where the Special Olympics Arkansas dental provider education program could be potentially duplicated.

### **ANNOUNCEMENTS**

No announcements were made.

### **ADJOURN**

The meeting adjourned at 12:30 p.m.

### **Next IOHC Meeting**

December 13, 2019 @ 10:00 a.m. in 5T Conference Room, ISDH

### **Future IOHC Meetings**

March 13, 2020 @ 10:00 a.m. in 5T Conference Room, ISDH

June 5, 2020 @ 10:00 a.m. in 5T Conference Room, ISDH

September 11, 2020 @ 10:00 a.m. in 5T Conference Room, ISDH

December 11, 2020 @ 10:00 a.m. in 5T Conference Room, ISDH