

COHG prioritisation outcomes and public contributions to decision-making

Cochrane Oral Health Group has undertaken an extensive prioritisation exercise to identify a core portfolio of the most clinically important titles to maintain.

COHG formed panels of international experts across 8 areas of dentistry to assist in identifying priority oral health reviews, and their decisions were informed by the findings of an online public consultation survey ([link](#)) that was conducted over an 18-day period (22 July-8 August 2014).

The survey was promoted (and repeatedly shared) via social media channels (Twitter, Facebook, Pinterest), The Cochrane Collaboration's Consumer Network ([CCNet](#)), The University of Manchester's globally-distributed [alumni](#), and The University of Dundee's weekly [bulletin](#).

The public were asked 2 specific questions: the first on their concerns, and the second to identify which questions what they wanted to know the answers to. Respondents provided free text responses which in many cases covered multiple concerns.

1. Tell us what your biggest oral health concerns are. These can be concerns that you have for yourself, or for any dependent people (children/elderly/disabled) that you care for.

Answered: 81 respondents

2. Tell us what the top 3 oral health questions are that you would like to know the answer to?

Answered: 81 respondents, totalling 223 queries

At the close of the initial 18-day period, a total of 81 participants had elected to respond to the open survey invitation, from across 5 continents (Africa, n=2; Americas, n=15; Asia, n=4; Europe, n=58; Oceania, n=2). 79% (64/81) of respondents were female, and there was a broad distribution of responses across age groups from 16-75 years old.

By continent	Country	No.	%
Africa (n=2)	Egypt	1	1.2%
	Nigeria	1	1.2%
Americas (n=15)	Canada	10	12.3%
	USA	4	4.9%
	Guatemala	1	1.2%
Asia (n=4)	India	1	1.2%
	Malaysia	1	1.2%
	Singapore	1	1.2%
	Taiwan	1	1.2%
Europe (n=58)	UK	52	64.2%
	Ireland	2	2.5%
	Netherlands	2	2.5%
	France	1	1.2%
	Germany	1	1.2%
Oceania (n=2)	Australia	2	2.5%
Totalling		81	

By age group	No.	%
5-15 years old	0	0.0%
16-25 years old	8	9.9%
26-35 years old	14	17.3%
36-45 years old	17	21.0%
46-55 years old	17	21.0%
56-65 years old	18	22.2%
66-75 years old	7	8.6%
76-85 years old	0	0.0%
86+ years old	0	0.0%
Totalling	81	

We also offered survey respondents an opportunity to leave their email address to be informed of the outcome of the public consultation: 56.8% (46/81) chose to leave their details.

Periodontology

The issue of aging/disease/disability was a dominant concern (27%; 22/81) for the public, closely followed by issues in maintaining gum health (25%; 20/81). Recurrent concerns included bleeding or receding gums, techniques and product use (particularly flossing), harms of whitening teeth, and sensitivity.

Oral Medicine

There were multiple mentions of Sjogren's syndrome, oral cancer (detection and treatment), mouth ulcers and dry mouth as being issues of concern to the public; however, given that it is estimated that around half of all oral medicine conditions are unseen by (or unknown to) the general public, the expert panel was wary of skewing the outcomes of the survey in relation to determining which priority oral medicine titles were to be maintained.

Operative and prosthodontic dentistry

Recurrent areas of concern from the public relating to the operative and prosthodontic dentistry specialty included issues related to aging/disease/disability (28%; 22/81 responses), caries (19%; 15/81), and restorations (16%; 13/81); and more specifically, a focus on prevention, types of (and advances in – e.g. injection-free) restorations, toxicity of amalgam, cosmetics (particularly the safety of whitening), and the use of implants and dentures.

Cleft lip and/or palate

There was no mention of cleft lip and/or palate as being a concern to the public; however, this was unsurprising given the relatively small number of survey respondents. There was a considerable focus on concerns over children's oral health, and that relating to pregnancy (24%; 19/81 responses).

Dental Public Health

The majority of the concerns reported from the public consultation survey related to the specialty of dental public health. These included issues regarding the access to/receipt of care (particularly, the provision of care to at risk groups: the elderly, disabled or diseased – 27%; 22/81 responses), advice about/delivery of fluoride, managing costs (15%; 12/81), and concerns about a basic lack of oral health awareness.

Oral and maxillofacial surgery

The greatest area of public concern relates to the issue of aging/disability/disease and receipt of care for these high risk groups (27%; 22/81 responses). Other issues relating to Oral and maxillofacial surgery include recurrent concerns over TMD/jaws (12%; 10/81), the diagnosis and treatment of oral cancer (9%; 7/81), the use of implants and extraction of wisdom teeth. Although some oral and maxillofacial surgery issues were highlighted by the survey, the expert panel noted that some issues won't have a public awareness and therefore wouldn't be reflected in the feedback.

Orthodontics

Public concerns relating to the field of orthodontics only accounted for 2.5% of the received responses (2/81 responses). These reflected concerns over affordability of private treatment costs, reduced availability of treatment through nationalised health services, whether treatment was necessary, and of the cosmetic impact to children who do not receive orthodontic treatment.

Paediatric dentistry

The level of public concern relating to paediatric dentistry specifically was relatively high (23.5%; 19/81 responses). Many concerned high sugar content in products marketed for children, lack of oral health awareness (particularly in socially deprived areas), tooth decay from bottle feeding, and the comparative effects of breastfeeding.

Outcomes

The resulting 93 priority titles to receive targeted support for production and maintenance are indicated in the graphic beneath:

