

# Behaviour Guidance in Paediatric Dental Patients: Foundational Articles and Recommendations

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## Background

There have been numerous behavioural guidance methods mentioned in the dental literature including: desensitization methods (tell-show-do, distraction, using child's imagination, humour, and using euphemisms); positive reinforcement and praise; communicative techniques (ask-tell-ask);

aversive techniques (voice control, hand-over mouth, protective stabilization); and pharmacological techniques (e.g., nitrous oxide-oxygen inhalation, sedation, general anaesthesia). Behaviour guidance techniques will differ in acceptability among countries, patient groups and dentists.

## IAPD Recommendations

**1.** When choosing the behaviour guidance techniques, the medical, dental and social history and cognitive level need to be considered.

Consensus-based statement › Global agreement 100%

**2.** To monitor and document child behaviour or anxiety over time, it is advisable to use a scale (e.g., the Frankl, Houpt or Venham behaviour scales)

Consensus-based statement › Global agreement 91%

**3.** Additional informed consent may be necessary for behaviour management techniques that may be considered aversive.

Consensus-based statement › Global agreement 88%

**4.** Behaviour management must be performed by adequately qualified dental providers with each country's or state's regulations followed.

Consensus-based statement › Global agreement 88%

**5.** In some cases, and if the dental needs allow, delaying the treatment or minimally invasive approaches can be an alternative to immediate treatment requiring aversive techniques, sedation and/or general anaesthesia.

Consensus-based statement › Global agreement 92%

**6.** The most acceptable behaviour management techniques for parents include: tell-show-do, positive reinforcement, distraction, and nitrous oxide/oxygen inhalation.

Consensus-based statement › Global agreement 84%

**7.** Patient protective stabilization may be indicated for a patient who: requires immediate diagnosis/urgent care; requires limited treatment and cannot cooperate; has uncontrolled movements due to age, has emotional or cognitive-developmental issues; or is necessary for the safety of the patient, staff, dentist, or parent.

Consensus-based statement › Global agreement 79%

**8.** Indications for sedation or general anaesthesia include: pre-cooperative and fearful patients for whom non-pharmacological behaviour guidance techniques are likely to be unsuccessful; patients who cannot cooperate due to physical, medical or special needs; and patients with extensive dental treatment needs or treatment of dental trauma.

Consensus-based statement › Global agreement 96%