




Background

56% of American Children have poor quality diets. Yet many dental providers feel only moderately trained to address diet counseling.

Unaddressed chronic poor nutrition results in:

-  Nutritional Deficiencies
-  Underweight
-  Insufficient Cognitive Development

Nutritional Counseling

1. Nutrition Assessment and Dietary History
2. Risk Stratification (Caries Risk Assessment)
3. Age Specific Anticipatory Guidance
4. Behavioral Intervention and Goal Setting
5. Environmental and Social Determinates





Key Question:

Are current dental school and residency programs adequately preparing providers for real-world nutritional counseling?

Study Objectives

1. Evaluate perceived nutrition education quality
2. Assess comfort and frequencies of nutritional counseling practices
3. Identify gaps between education and implementation gaps

Methods

Study Design	Participants	Sample	Survey
 Cross sectional, anonymous online survey	 Pediatric Dental Providers	 Invitations: 8,286 Completed surveys: = 282	 28-item instrument

Results



Training

Dental School: 3.0 / 5
Residency: 3.4 / 5
Formal nutrition education rated as only moderate

Provider Comfort

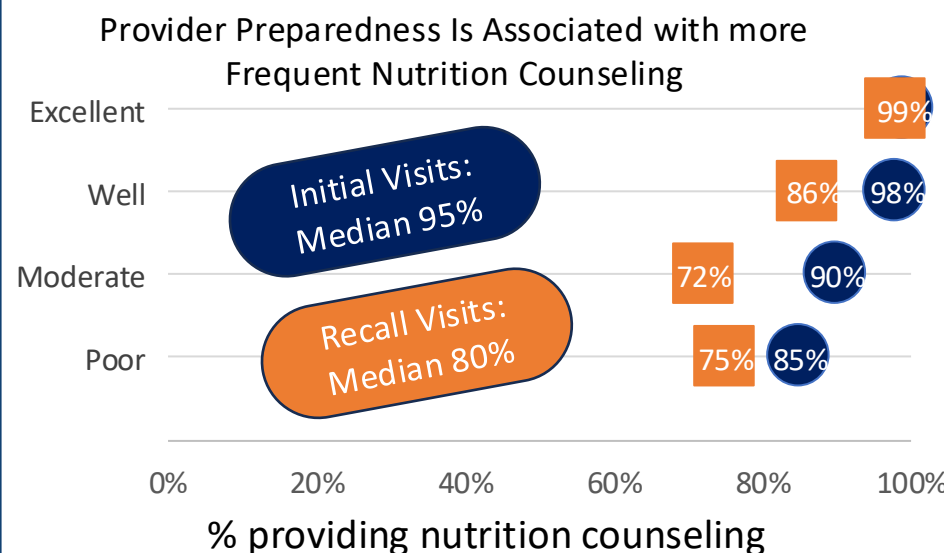
96%
Report comfort discussing nutrition

Clinical Practice Gaps

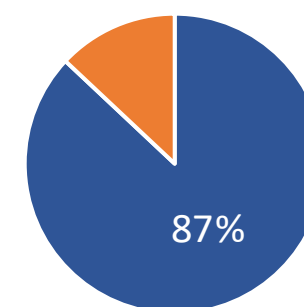
32.7% use screening tools
42.3% provide resources
45.8% find guidelines sufficient
Key preventive tools underutilized

Desired Solutions

Patient-friendly materials
Clinically integrated training
Interprofessional collaboration
64% want more CE
Clear opportunities for curriculum reform



Most Providers Recognize the Role of Diet in Pediatric Oral health



87% of respondents Agree/Strongly Agree with the statement "diet has a significant impact on oral health outcomes in children."

Conclusion

Providers are comfortable, but underprepared
Training preparedness predicts counseling behavior
Lack of tools, not motivation, limits implementation

WHAT PROVIDERS WANT

Preferred curriculum improvements:

-  Patient-friendly handouts
-  Collaboration with nutrition/dietetics faculty
-  More dedicated nutrition coursework
-  Integration into case-based learning

Overwhelming majority want more continuing education, regardless of prior training quality

About the Author

Phillip Ashkar is a second-year Pediatric Dental Resident at the University of Florida. Phillip received a Doctorate in Dental Medicine and certificate in Dental Public Health from the University of Pittsburgh and a Masters of Science in Nutritional Sciences from the University of Connecticut.

Email: Phillipashkar@ufl.edu

