兒童牙科學 Pediatric dentistry

# ● 兒童行為處理

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2003/9/22 Hung-Huey Tsai

### 學習目標

- a. Students will be able to diagnose and treatment plan pediatric dental patients.
- b. Students will become proficient in the comprehensive treatment of a wide variety of pediatric dental patients.

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## 參考資料

- 1.Dentistry for the child and adolescent (Ralph E. McDonald)
- 2.Pediatric dentistry Infancy Through Adolescent (Pinkham)

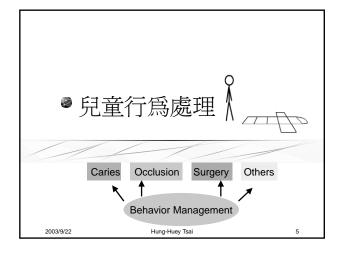
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## **Summary**

Produce a student who is confident and competent in all aspects of clinical pediatric dentistry, including state-of-the-art techniques of patient management and preventive, restorative, interceptive orthodontic, emergency care, practice management and communication skills.

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## Pedodontic Treatment Triangle

- A major difference between the treatment of children and adults is the relationship.
- One-to-one relationshipDentist-patient

relationship

- One -to-two relationship
   Dentist-pediatric patient, and parents or guardians
- The child is at the apex

of the triangle



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## **Developmental Milestones**

- Two-year-old
- Three-year-old
- Four-year-old
- Five-year-old
- Six- to twelve-year-olds

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# Two-year-old

- Vocabulary 12 ~ 1000
  - Early sentence formation
- Precooperative stage
- Like to see and touch
- Very attached to parent
  - Separating this young child from the parent is extremely difficult
  - Fear of strangers is most intense between 2 and 3 years of age
- Solitary play
- Becoming interested in self-help skills

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#### Three-year-old

- Less egocentric
- Very active imagination
  - Likes stories
- The child has a great desire to talk
- The dental personnel can begin to use the positive approach with the child

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## Four-year-old

- The child listens with interest to explanations
- A great talker
- Fear of strangers is lessened
- Participates in small social groups
- One fear that may become rather general is that of bodily injury. Sight of blood following a tooth extraction may produce a response disproportionate to the degree of pain.

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## Five-year-old

- Group activities, consolidation
- Community experience
- Little fear of being separated from the parents
- Relinquishing comfort objects, such as blanket, thumb
- Proud of their possessions

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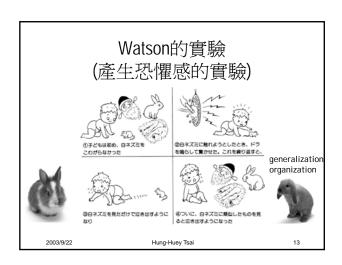
#### Six- to Twelve-year Olds

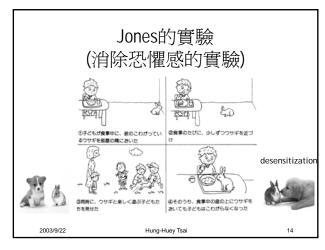
- Outside world
- Independent
- Society
- Resolve fears
- Tolerate unpleasant situations
- Cope with stress

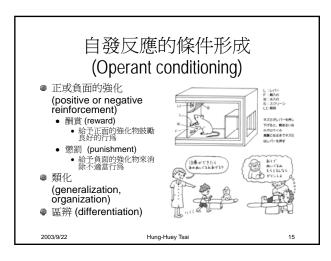
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## (一)增強現有的良好行爲

- 良好的行爲必須給予酬賞
  - 正面的強化作用
    - ●利用"期待被肯定→發揮能力"的原理
    - 願意照成人的要求去做事
    - 有足夠的理由去做,從中得到成就感與樂趣
    - 在每一次正確的行爲表現之後立即給予獎賞
    - 一個行為如能立即獲得強化物,則該行為發生的可能性會增加
    - 行爲的強化是在強化物出現之後產生的
    - 成功被強調,過去的失敗不再受指責

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### Outline for Behavior - Shaping

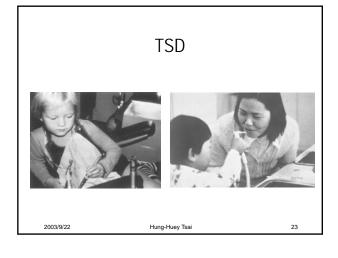
- Make all explanations at a child's level of understanding
- Use successive approximationsTell show do (TSD)
- State the general goal or task to the child at the outset
- Explain the necessity for the procedure
- Divide the explanation for the procedure
- Disregard minor inappropriate behavior

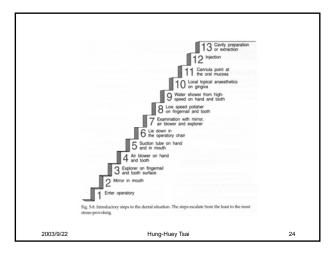
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#### **TSD**

- The dentist tells the child what is going to be done in words the child can understand.
- The dentist demonstrates to the child exactly how the procedure will be conducted.
- The practitioner performs the procedure exactly as it was described and demonstrated.

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## Communicating With Children

- Communication with children
  - Verbal, nonverbal
- Verbal communication is best initiated for younger children with complimentary (稱讚) comments, followed by questions that elicit an answer other than yes or no.
- The child can only listen to one person at a time
- Problem ownership
- Voice control

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Retraining

- Result of a previous dental visit or the effect of improper parental or peer orientation
- If the original stimulus and the new one are very similar, then the response will be similar
  - Stimulus generalization
- The dental team has to demonstrate a difference

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## C. 兒童的好榜樣 (modeling)

- ●被學習的人稱爲模範(model)
- ●模仿的原則
  - 讓兒童觀察有聲望的人做些好的行爲
  - 教導兒童表現新的行爲
  - 設法製造有益的模式,讓兒童成爲有思考的、 理性的、以及獨立自主的人
- 一個成人的職責就是成爲兒童的模樣, 並且幫助兒童發現更好的行爲模式

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## Preappointment Behavior Modification (modeling)

- Audiovisual
  - Films
  - Videotapes
  - Preappointment mailings
- Live models



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## (三)終止不適當的行爲

- 兒童學習不合理行爲的 原因
- 讓兒童深入体驗其行爲
- C) 削除酬賞
- 當行爲進步時就終止厭 惡的情境
- 兒童發脾氣的時候
  - 感到疲倦
  - 遭受到挫折



## **Aversive Conditioning**

- Hand over mouth exercise (HOME)
- Physical restraint

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#### **HOME**

- It has been used to reestablish communication with the child who has become hysterical or defiant
- It is not employed with children under 3 years of age, frightened children, and handicapped children.
- It is contraindicated whenever the dentist is emotionally involved in the situation.
- The parent should be consulted.
- Once the desired behavior is elicited, reward conditioning procedures are immediately resumed.

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#### **HOME**

The dentist's hand is placed over the child's mouth to muffle the noise. The dentist's face is brought close to the child and talk is directed into the child's ear. The dentist can say, "if you want me to take my hand away, you must stop screaming and listen to me. After a few seconds, this is <u>repeated</u>, and with the statement, "are you ready for me to remove my hand?" Almost invariably there is a nodding of the head. With a final word of caution to be quiet, the hand is removed.

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#### **HOME**



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#### **Physical Restraint**





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## Behavior Management of Pediatric **Dental Patient**

- Informative approaches, Information strategies
  Preappointment letter
  Familiarization appointments
  Modeling
- Behavioral approaches
  - Tell-show-do Desensitization

  - Desensitization
    Distraction
    Voice control
    Positive reinforcement
    Facial expression
    Nonverbal communication
    Hand-over-mouth
    Time out
    Reward

- Physical restraint

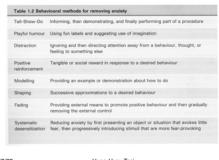
  - Handicapped children Young children Physically resisting children Premedicated children
- Conscious sedation

  - Mouth
     Chloral hydrate
     Meperidine
     Hydroxyzine
     Intramuscular
  - Subcutaneous
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- General anesthesia

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## Behavior Management of Pediatric **Dental Patient**



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