# **Results**

Table 2. Clinical Outcomes

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| --- | --- | --- | --- | --- |
| **Study** | **Intervention type** | **Diagnostic Accuracy** | **Patient Outcomes** | **Satisfaction Rates** |
| Agarwal et al, 2023 | Videoconferencing for pediatric dentistry | Not reported in source | Not reported in source | 83.3% of children  not scared and preferred intraoral camera |
| Alavi et al, 2024 | Various  teledentistry interventions | High diagnostic accuracy reported | Improved access to care, timely diagnosis | Not reported in source |
| Avinash et al, 2023 | AI for periodontal disease diagnosis | 88% for gingivitis,  95% for alveolar bone loss | Not reported in source | Not reported in source |
| Beltrán et al, 2024 | Web platform/app  for elderly | Not reported in source | Improved access to  care | Above 75% satisfaction across all dimensions |
| Beltrán et al, 2024 | TEGO platform  for rural older adults | Not reported in source | Improved access to  care | High levels reported |
| Chatterjee et al, 2024 | Teledentistry consultations | Not reported in source | Comparable  changes in dental conditions | Lower satisfaction with diagnoses compared to  in-person (p < 0.001) |
| Dewel, 1971 | Teledentistry for orthodontics | Not reported in source | 35.6%  improvement in PAR scores | Not reported in source |
| Fernández et al, 2021 | Various teledentistry interventions | Not reported in source | Reductions in  plaque index, gingival index, and white spot lesions | Not reported in source |
| Flores-Hidalgo et al, 2023 | Teledentistry for oral pathology | Not reported in source | Faster diagnosis,  reduced travel | Not reported in source |
| Fung et al, 2023 | Real-time  teledentistry in aged care | Comparable to face-to-face examinations | Not reported in source | Reported as  user-friendly |
| Haron et al, 2017 | Mobile phone  imaging for oral cancer screening | Kappa values 0.64-1.00,  sensitivity >70%,  specificity 100% | Not reported in source | Not reported in source |
| Mariño et al. | Teledentistry in aged care | Reported as reliable | Not reported in source | High levels  reported |
| Talwar et al, 2023 | AI for oral cancer screening | F1-scores of 0.84  and 0.83 for different AI models | Not reported in source | Not reported in source |
| Mola et al, 2024 | Teledentistry for  pediatric diagnosis | Comparable to  in-person diagnosis | Not reported in source | Not reported in source |
| Nguyen et al, 2023 | Telehealth  platform for oral lesion diagnosis | Similar to  in-person visits (sensitivity 95%,  specificity 84%) | Increased compliance with referrals | Not reported in source |
| R PK, Tiwari N et al, 2024 | AI-based oral screening | 85% for caries,  97% for stains,  83% for calculus | Not reported in source | Not reported in source |
| Salzmann, 1967 | Teledentistry for  orthodontics | Not reported in source | 35.6%  improvement in PAR scores | Not reported in source |
| Tynan et al, 2018 | Teledentistry in  aged care | Not reported in source | Improved  implementation of oral health care plans | Not reported in source |
| Uhrin et al, 2023 | Teledentistry for  oral lesion diagnosis | High specificity (0.92) and  sensitivity (0.93) | Not reported in sourceNo mention found | Not reported in sourceNo mention found |
| Ward et al, 2022 | School-based  teledentistry | Not reported in source | Increased access to  services, 50% prevalence of dental caries identified | Not reported in source |
| Xiao et al., 2023 | mDentistry,  eHygiene model | Not reported in source | Not reported in source | Patients: mean  System Usability Scale (SUS) score 70.0; Dentists: mean SUS score 51.3; Hygienists: mean SUS score 57.1 |