



Oral Health

Good oral health is vital to general health and well-being. Poor oral health can lower self-esteem, cause pain and sleep deprivation, and affect the ability to chew and digest food properly.¹

Periodontal (gum) disease has been linked to various health problems including cardiovascular disease and preterm births.²

One important risk factor for poor oral health is low socioeconomic status. Bacterial infection, consumption of foods high in sugar and individual susceptibility all contribute to the development of dental caries (cavities).³ All of these factors are influenced by socioeconomic status. In the United States, the prevalence of reporting poorer oral health has been shown to be significantly higher at each lower level of education and poverty-income ratio, even after adjustment for education, income, ethnicity, age, sex, dental insurance and smoking.⁴

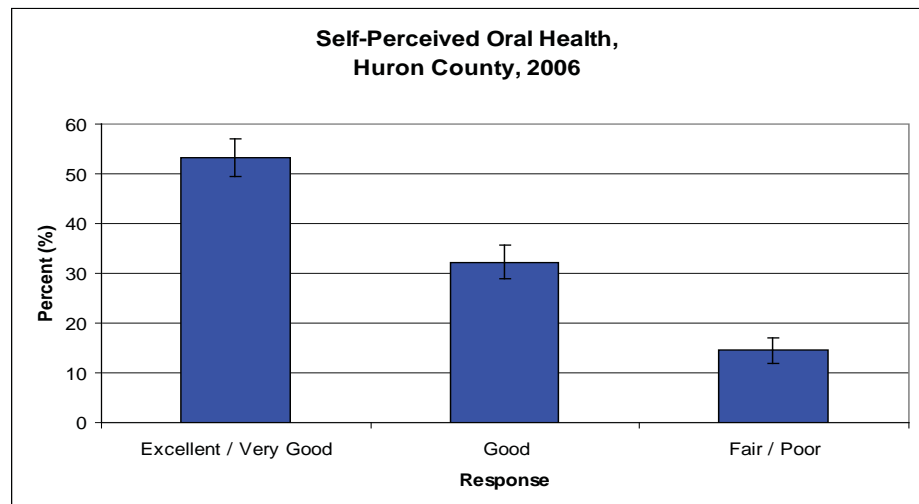
In this section, self-reported oral health status, along with prevalence of dental check-ups, dental insurance, and frequency of teeth brushing will be reported. In addition, the oral health of children in Huron County will be described briefly.

Figure 1. Self-perceived oral health of Huron County adults aged 18 years and older, 2006. Error bars represent 95% confidence intervals. Source: Rapid Risk Factor Surveillance System (RRFSS), January-December 2006, n=712.

Self-Perceived Oral Health

When asked to rate their dental health compared to people their age, 53.2% (95% CI 49.5-56.9) of Huron County adults aged 18 years and older reported that their dental health was excellent or very good in 2006 (**Figure 1**). Approximately one in seven adults (14.5%, 95% CI 11.9-17.1) reported that their dental health was fair or poor. Reported excellent or very good dental health of Huron County adults increased significantly with both increasing education level and income level (data not shown).

In addition to self-perceived oral health, adults were asked questions about the health of their natural teeth – both the quantity of natural teeth remaining and causes of loss. Almost half of adults (49.3%, 95% CI 45.6-53.0) reported that they had all of their natural teeth, while 7.9% (95% CI 5.9-9.9) reported that they had none (**Figure 2**). Of all adults who reported that they had most, some or a few of their natural teeth, 61.9% (95% CI 56.5-67.3) have had at least one tooth removed because of tooth decay or gum disease.



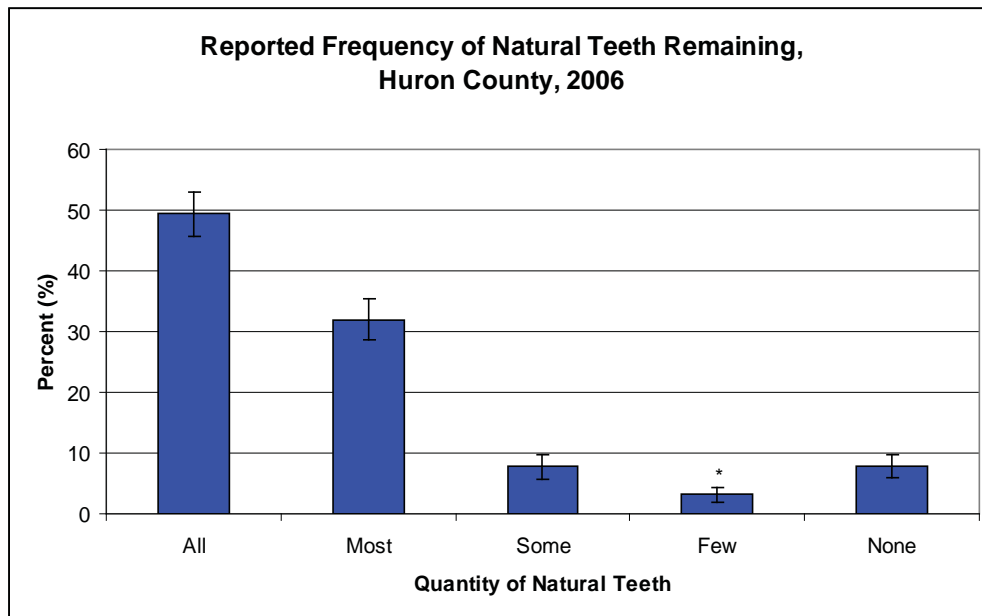


Figure 2. The reported frequency of natural teeth remaining in Huron County adults aged 18 years and older, 2006. * indicates that this estimate should be interpreted with caution due to high sampling variability. Source: Rapid Risk Factor Surveillance System (RRFSS), January-December 2006, n=715.

Regular Dental Check-ups

Visiting the dentist regularly is a key step in maintaining healthy teeth and a healthy mouth. While the frequency of check-ups depends on individual oral health needs, the Canadian Dental Association recommends preventive check ups every six months.⁵

Just over 40% (40.6%, 95% CI 34.8-46.4) of Huron County residents aged 12 years and older reported that they usually visit the dentist more than once a year for dental check-ups in 2005 (n=553).⁶ A slightly lower percentage reported visiting the dentist just once a year for check-ups (34.4%, 95% CI 29.3-39.6). Only 6.1%* (95% CI 3.2-8.9) of respondents reported that they visit the dentist less than once a year for check-ups; however, 18.9% (95% CI 15.4-22.5) reported only visiting the dentist for emergency care. These percentages were similar to Ontario.

Dental Insurance

Barriers to regular dental check-ups include not having dental insurance to cover the costs of those visits or having insurance with low coverage of costs and services.

Only 52.5% (95% CI 46.9-58.1) of Huron County residents reported having dental insurance that

covers all or part of their dental expenses (n=576).⁶ By contrast, 64.8% (95% CI 64.1-65.5) of Ontarians reported having dental insurance, which is significantly higher.

Teeth Brushing

Regular and thorough brushing is important in preventing tooth decay and gum disease. It is recommended to brush after every meal and at the very least, once a day before bed, in order to remove the bacteria that promotes tooth decay and the plaque that can cause periodontal disease.⁷ As a general guideline, the Canadian Dental Association recommends brushing teeth twice a day with fluoride toothpaste. (source: http://www.cda-adc.ca/en/oral_health/cfyt/dental_care/prevention_plan.asp)

In 2005, Huron County residents were surveyed about their teeth cleaning habits. Overall, 71.0% (95% CI 65.9-76.0) of Huron County individuals aged 12 years and older reported that they brushed their teeth at least twice per day (**Figure 3**). This is significantly lower than the provincial percentage of 82.8% (95% CI 82.2-83.4). Women were more likely to brush their teeth at least twice a day compared to men (80.8%, 95% CI 74.6-87.1 versus 60.2%, 95% CI 51.8-68.7).

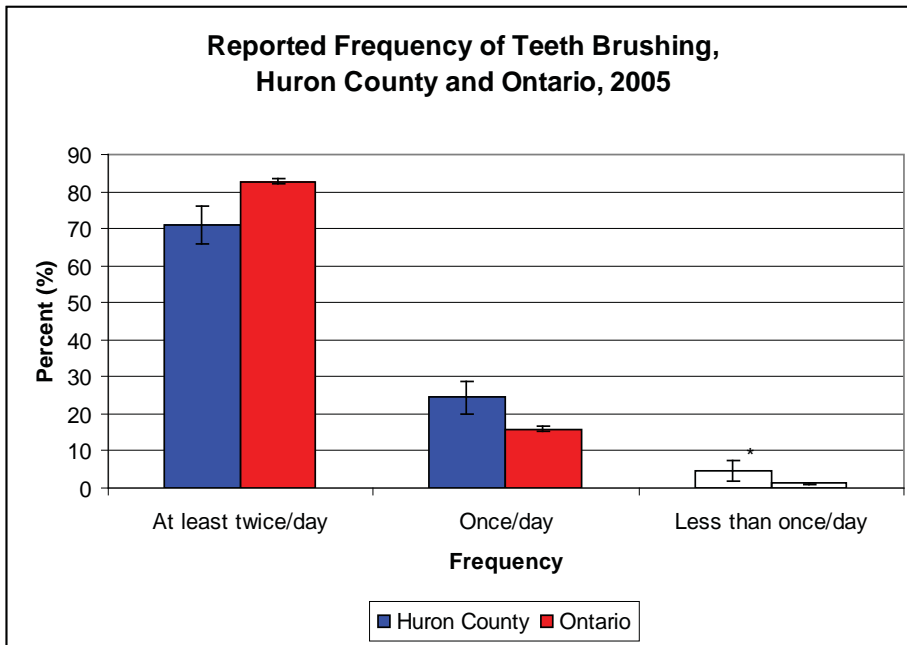


Figure 3. The reported frequency of teeth brushing in Huron County (n=489) and Ontario (n=35,030), 2005. * indicates that this estimate should be interpreted with caution due to high sampling variability. Source: Canadian Community Health Survey 3.1 (2005), Statistics Canada, Share File, Knowledge Management and Reporting Branch, Ontario MOHLTC.

Oral Health of Children in Huron

Dental decay, caused by a bacteria infection, is one of the most common diseases in childhood.⁸ Severe dental decay in children can result in pain, sleeping problems, trouble eating and behaviour problems.⁹ Most of these problems, however, can be eliminated following dental treatment. Screening is necessary to identify children who may be experiencing dental decay, along with other dental problems.

In Huron County, 3,656 kindergarten, Grade two, four, six and eight students were screened at the start of the 2006/7 school year as part of the Ontario Dental Health Indices Survey (DIS).¹⁰ A total of 3,420 primary teeth were visually identified to be decayed, lost or filled. In addition, a total of 1,497 secondary (permanent) teeth were visually identified to be decayed, lost or filled.

The ratio of these two values (known as the deft/DMFT index) is a general indicator of dental health status, with a deft/DMFT index equal to zero indicating that all children screened were caries-free at the time of survey. In general, the lower the index, the better the dental health of the population, with a deft/DMFT index of two or more considered high risk.¹¹ For Huron children screened, the deft/DMFT index was 1.35. Because each health unit uses different sampling strategies for the survey, this index is not comparable across health units.

A short dental survey was administered to Huron County parents who had a three year old child that participated in the Calling All Three Year Olds developmental screening program in 2006. Of 306 parents surveyed, 35% reported that their child had visited a dentist for a routine check-up, while 60% had not. The most common reason parents cited for not taking their child to the dentist was that the child was thought to be too young. Parents were also asked how often the child's teeth were brushed. The majority of children's teeth were brushed at least twice per day (60%); however, 32% of children's teeth were brushed just once per day. When asked about the health of the child's teeth, 6% of parents reported that the child had had a filling or a tooth removed.

Conclusion

Only half of Huron County adults rate their oral health as excellent or very good compared to others their age, with this percentage decreasing as education and income level decline. Over one third report visiting the dentist more than once per year; however, almost 20% report only visiting the dentist for emergency care. A barrier to regular dental check-ups may be lack of good dental coverage, as Huron County coverage rates are well below the provincial average. Given the impact of oral health on overall health, social barriers to accessing preventive dental services must be addressed in Huron County.

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