Children are not getting dental check-ups early enough, global survey shows

By DTI

GENEVA, Switzerland: Maintaining a healthy mouth is crucial to keeping it functioning correctly and to maintaining general health and well-being. Ahead of World Oral Health Day, celebrated annually on 20 March to raise global awareness of the prevention and control of oral disease, the FDI World Dental Federation asked parents around the globe how they cared for their children’s oral health growing up. Their responses suggested room for improvement.

The survey, carried out online in ten countries and completed by 11,552 adults in total, found that only 13 per cent of parents with children aged 18 and under had taken their child to the dentist before their first birthday—the recommended age for the first dental visit. Most parents first had taken their child to the dentist when he or she was between 1 and 3 years old (24 per cent) or between 4 and 6 years old (22 per cent). Alarmingly, 20 per cent of parents reported never having taken their child for a dental check-up.

“It’s worrying to learn that most children are not getting a dental check-up at the recommended age,” said FDI President Dr Kathryn Kell. “Good oral health habits start early. Parents should visit the dentist after their child’s first tooth starts erupting as a preventive measure to avoid risk of developing early childhood caries. Oral disease can impact every aspect of life and is associated with many general health conditions. This World Oral Health Day, we want people to make the connection between their oral health and general health and understand the impact that one has on the other. Knowing how to protect your mouth and body at all ages contributes to a better quality of life.”

Half of the parents who had taken their child to the dentist identified the reason as being a regular dental check-up. However, while this was the most frequent reason in the UK (82 per cent), Sweden (77 per cent), Argentina (65 per cent), France (63 per cent), the US (63 per cent), Australia (56 per cent) and China (54 per cent), the most reported response for having gone to the dentist in Egypt, the answer in the UK (82 per cent), Sweden (77 per cent), Argentina (65 per cent), France (63 per cent), the US (63 per cent), Australia (56 per cent) and China (54 per cent), the most reported response for having gone to the dentist in Egypt, the
Philippines and Morocco was pain or discomfort in their child’s mouth (56 per cent, 43 per cent and 38 per cent, respectively).

More than 43 per cent of the parents said that they personally ensured that their child’s teeth were brushed before bedtime to avoid oral disease—a key message promoted by the FDI. The survey also found that 40 per cent of parents supervised their child’s toothbrushing twice a day and 38 per cent of them said they limited sugary foods and drinks in their child’s diet to prevent oral disease. Only 36 per cent reported personally having cleaned their child’s teeth from as soon as the first tooth erupted, and just 8 per cent mentioned having encouraged their child to wear a mouthguard when playing sport.

The FDI recommends practising good oral care, avoiding risk factors such as an unhealthy diet—particularly one high in sugar—and having regular dental check-ups to protect oral health and general health at all ages. Parents should start cleaning their child’s teeth before bedtime with the eruption of the first tooth, supervise toothbrushing twice a day with a small amount of fluoride toothpaste, and schedule regular dental check-ups, starting no later than the first birthday.

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“The oral environment becomes more hostile with age”

An interview with Prof. Hien Ngo

Professor Hien Ngo has extensive experience in private practice, research and education. Over the last 30 years, he has been active as an international speaker on cariology, minimal intervention and restorative dentistry. At present, his focus in research revolves around the clinical management of caries, especially in elderly and medically compromised patients and the interactions between glass ionomers and the oral environment. Dental Tribune Asia Pacific had the opportunity to speak to him prior to his presentation at IDEM 2018 in Singapore about the concept of “life-long oral health” and the major demographic change in ASEAN countries.

Dental Tribune Asia Pacific: The term “life-long oral health” was used by the FDI World Dental Federation in one of its policy statements. What does it mean?

Prof. Hien Ngo: Previously, edentulous among older individuals was accepted as a norm. However, with recent advances in preventive and restorative dentistry, the FDI stated, “The goal of reaching old age with a full set of teeth is feasible if preventive measures and oral healthcare are accessible throughout life.”

The key term here is “throughout life” because a good oral health foundation in childhood is the key determinant of oral health at a later stage in life.

Life-long Oral Health was the title of a policy statement that was adopted by the FDI General Assembly in August 2017. It identified the four pillars supporting life-long oral health as oral health promotion, risk assessment, disease prevention and early diagnosis and intervention at all stages of life. These four pillars will form the framework for discussing clinical cases during the Silver Wave symposium at IDEM.

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over 60 will more than double in the next 50 years. By 2050, 2 out of 10 people in the region will be aged over 60. However, the pace of change is much faster in Singapore than in neighbouring countries. It is predicted that by 2050, 4 out of 10 Singaporeans will be over 60 while this ratio will be 2 out of 10 in Indonesia and approximately 3 out of 10 in Thailand and Vietnam.

What are the consequences of this demographic change for oral health professionals?

If you are working in the private sector, it means that a higher portion of your clientele base will be older individuals and most of them will be dentate. As they belong to the baby boomer generation and were born between 1946 and 1964, they grew up during a period of rising living standards after economic prosperity, so their expectations are different from previous generations.

Ageing is universal and there is no exception among ASEAN countries.”

The Australian Institute of Health and Welfare proposed a broad classification for this group: active and capable, limited activity and capability and very limited activity and capability. For the last two groups, you may need to modify your practice to allow accessibility, or there is the option of referring them to specialised public institutions and specialists.

For clinicians, the care pathways for elderly patients are more complex, as damage to their dentition is accumulative, so its manifestation is much more severe later in life. The oral environment also becomes more hostile with age. Root caries, which are rare in younger individuals, are common in the older patients.

When these conditions are coupled with either severe health or mental illness, then referral to a specialist in geriatric dentistry could be required. Gerodontology is now a recognised dental specialty; however, specialists in this field are still not common in ASEAN countries. The engagement of international bodies such as the FDI and WHO on the concept of lifelong oral health will encourage healthy discussions and policy developments to ensure that preventive measures and oral healthcare are accessible.

What is happening in this field during the IDEM conference in Singapore?

Singapore recognised the importance of this major demographic change and has made large investments to ensure that lifelong oral health is delivered to its population.

With the Silver Wave Symposium at IDEM 2018 on Saturday 14 April, there will be a full day dedicated to managing the ageing population and patients. Six international speakers and clinicians will be brought together to discuss the management of oral health issues, of the ageing population, and of older individuals. The day will start with discussions on the changes that were made in the public health and education institutions, then move on to clinical issues. The day will be clinically oriented and discussions will be patient focused. The symposium will be supported by The Silver Wave booklet, which will be distributed during IDEM.