

Seniors face barriers to critical dental care

August 27 2014, by Sharyn Alden



Research has shown that poor oral health can have a negative impact on seniors' overall health and well-being, but for many, there are significant barriers to visiting a dentist, finds a new report in the American Journal of Health Behavior.

Lead study author Theresa Montini, Ph.D., assistant medical professor at the Sophie Davis School of Biomedical Education at the City College of New York and her colleagues provided oral dental exams to 184 older adult volunteers. The average age of the study volunteers was 75 years old.

The researchers found that 89 percent of the participants, who frequented eight senior centers in New York City, needed some form of



dental treatment with an average of two cavities per person. Six weeks following their initial dental exams, 52 percent had sought <u>dental</u> treatment but 48 percent had not been able to access dental services. Seniors who had not received follow-up treatment had significantly fewer teeth and were more likely to have been referred for new dentures or to repair old ones.

Three months after their initial dental exam, those who didn't get subsequent <u>dental care</u> cited three primary barriers—60 percent noted financial issues, 31 percent said transportation was a problem and 20 percent needed someone to help make the appointment and find a dentist.

The authors note that their findings have several implications for policymakers, such as considering adding dental benefits to Medicare coverage and/or expanding Medicaid dental coverage.

Matt Salo, executive director of the National Association of Medicaid Direction agrees, noting the study clearly identifies unmet needs of older Americans who would benefit from more reliable, accessible and affordable dental care.

"The primary barrier to accessing dental care for older adults appears to be a complete lack of attention—a lack of any kind of benefit from the Medicare program," he said. "Not all seniors are eligible for Medicaid and obviously Medicaid benefits vary, but this wouldn't be an issue if Medicare provided basic [dental] benefits for the population it serves."

Salo noted that one important barrier that isn't addressed is having an adequate and responsive dental workforce.

"We have found that dentists don't always make accommodations for the unique challenges of the populations that Medicaid and Medicare serve,"



he said. "Not only are there not enough dentists, there aren't enough dentists willing to work with low-income or challenging populations. Medicaid has struggled for decades to get dentists to participate, and the problems go much deeper than payment rates."

Provided by Health Behavior News Service

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