

Inequalities in dental health are most evident in young children

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Ann-Catrin Andre Kramer, doctor of dental medicine and a registered dental hygienist. Credit: Sahlgrenska Academy

Inequalities in dental health are most evident in 3 to 6-year-old children, according to a thesis at Sahlgrenska Academy. Preschoolers in socioeconomically disadvantaged families had a more than four times higher risk of tooth decay compared to age cohorts with better living conditions.

"We shouldn't forget that most kids have healthy teeth, but there is a minor group of children who we see at the dental clinic repeatedly, and who have a lot of cavities," says Ann-Catrin André Kramer, a doctor of dental medicine and a registered dental hygienist.



In the course of her thesis work she studied the <u>dental health</u> of 300,988 individuals aged 3 to 19 years in the Västra Götaland region. The analyses are based on data from the Swedish Public Dental Service and private dental care providers that treat children and young people in the region, as well as information from Statistics Sweden (SCB), including for instance information about household finances and education level.

The research confirms that from an international perspective, children and young people in Sweden generally have good dental health. However, despite the fact that the Swedish government has provided free dental care to children and young people for decades, large discrepancies in dental health do exist.

Children and adolescents living in rural areas had a lower risk of cavities than their age cohorts in larger towns and cities. There were also differences in caries experience among children of different genders.

"It was interesting that the girls had a lower risk of cavities than boys during adolescence, with a reverse pattern before adolescence when girls exhibited a higher risk for caries experience compared to boys. This trend had not been observed previously," notes Ann-Catrin André Kramer."The question is whether this pattern can be linked to behavior such as diet and oral hygiene habits, or if something biological is occurring in the body," she continues. "As yet, we have no answers, but the pattern is definitely there, and we really need to investigate it further."

Ten percent of 7 to 9-year-olds exhibited tooth decay in their permanent teeth, and two-thirds of older teenagers had cavities or fillings. The results of the thesis indicate that children in families with limited socioeconomic resources were most at risk of caries experience. This was especially true of preschool-aged children.



A smaller sub-study also tracked the dental health of young children during their preschool years. The findings showed that children who already had cavities when they were 3 years old had developed considerably more tooth decay by the time they turned 6, compared to children who were cavity-free at the start of the study. Only half of the children included in the study showed no signs of tooth decay in their primary teeth by the time they reached 6 years of age.

"This situation is very demanding for both patients and dentists, and we need to consider how we can reach the groups who are most in need of dental care. Perhaps we can further develop inter-professional efforts and work with other healthcare professionals and schools to remedy this problem. Children should be taught that brushing their teeth is every bit as important as washing their hands, which is something they learn to do at a young age," concludes Ann-Catrin André Kramer.

More information: On dental caries and socioeconomy in Swedish children and adolescents - clinical and register-based studies, hdl.handle.net/2077/54528

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