

Study examines the link between mental health and oral health

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A study examining the mental health-oral health association cross-sectionally and longitudinally was presented at the 52nd Annual Meeting & Exhibition of the AADOCR, held in conjunction with the 47th



Annual Meeting of the CADR. The AADOCR/CADR Annual Meeting & Exhibition took place at the Oregon Convention Center in Portland on March 15-18, 2023.

The study, led by Alex Kalaigian of the University of California, San Francisco School of Dentistry, acquired self-reported data from the Population Assessment of Tobacco and Health (PATH) Study. The Global Appraisal Individual Needs-Short Screener (GAIN-SS) measured mental health symptoms according to three disorder categorizations: internalizing, externalizing, and substance use.

Six oral health conditions were evaluated: self-rated oral health, bleeding gums, loose teeth, tooth loss, gum disease, and bone loss. A <u>cross-sectional analysis</u> within PATH Wave 4 (2016-2018, N=30,753) compared survey-weighted prevalence of six oral health outcomes according to severity of mental health problems. Prospectively, PATH Wave 5 (2018-2019) oral health outcomes were assessed according to Wave 4 mental health problems (N=26,177). Survey-weighted logistic regression models controlled for confounders (age, sex, tobacco use, etc.) with imputation for missing values.

Cross-sectionally, all six adverse oral health outcomes demonstrated a statistically significant greater prevalence over increasing severity of mental health problems. For example, the adjusted odds of bone loss around teeth were 1.79-times greater [95%CI 1.30-2.46] at high versus none/low categories of internalizing problems.

Longitudinally, associations with externalizing and substance use problems largely dissipated, but multiple associations with internalizing problems persisted. For example, the adjusted odds of bleeding gums were 1.40-times greater [95%CI 1.22-1.62] at high versus none/low categories of internalizing problems.



The study concluded that providers should expect higher levels of oral disease among patients with adverse mental health conditions. Independent of externalizing and <u>substance use</u> problems, symptoms of internalizing problems are a plausible risk factor of future adverse oral health. These results may inform both medical and dental communities in diagnosing and providing treatment to individuals suffering from mental illness.

More information: Conference: www.aadocr.org/

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