

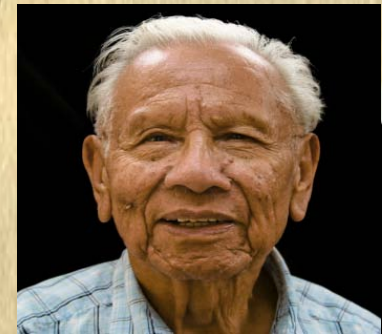


The Commonwealth's High-Risk Senior Population Results from a 2009 Statewide Oral Health Assessment

Office of Oral Health Massachusetts Department of Public Health



INTRODUCTION

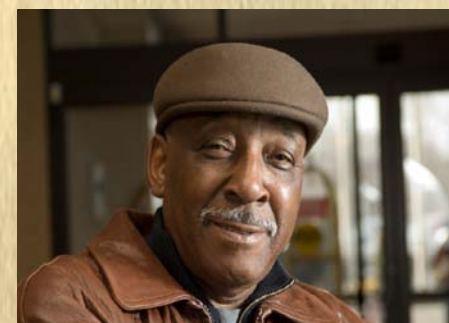


Annually, about 45,000 Massachusetts residents live in long-term care facilities and about 25,000 ambulatory seniors participate in the state's funded meal programs. In 2009, these two population groups participated in a statewide oral health assessment of Massachusetts residents age 60 and older by the Massachusetts Department of Public Health's Office of Oral Health. The assessment confirmed that **there are significant unmet oral health needs among seniors in the Commonwealth.**

Edentulism (tooth loss) is no longer the norm as adults age. The survey reported that 81% of ambulatory seniors living in Massachusetts communities and 65% of seniors living in long-term care facilities had some natural teeth. Since scientific evidence supports a relationship between oral health and cardiovascular disease, diabetes and bacterial pneumonia; seniors need greater access to regular oral health care.



METHODS



The Basic Screening Survey (BSS), a nationally recognized methodology developed by the Association of State and Territorial Dental Directors (ASTDD) was used to assess the oral health status of two high-risk senior population groups – those residing in long-term care facilities and those utilizing congregate meal sites. The BSS is cross sectional and descriptive.

A list of all long-term care facilities in Massachusetts was stratified by rural/non-rural status and a probability sample of 21 long-term care facilities and 21 meal sites were selected.

The oral health assessments were conducted by dental hygienists from the Massachusetts Department of Public Health who were trained and calibrated to use the BSS methodology. Each participant provided consent.

In November 2009, the Department developed and distributed a 21-item electronic survey to the nursing directors of all 443 state licensed long-term care facilities to better understand oral health practices within these facilities; in addition to the nursing directors' knowledge, attitudes and beliefs in regard to oral health.

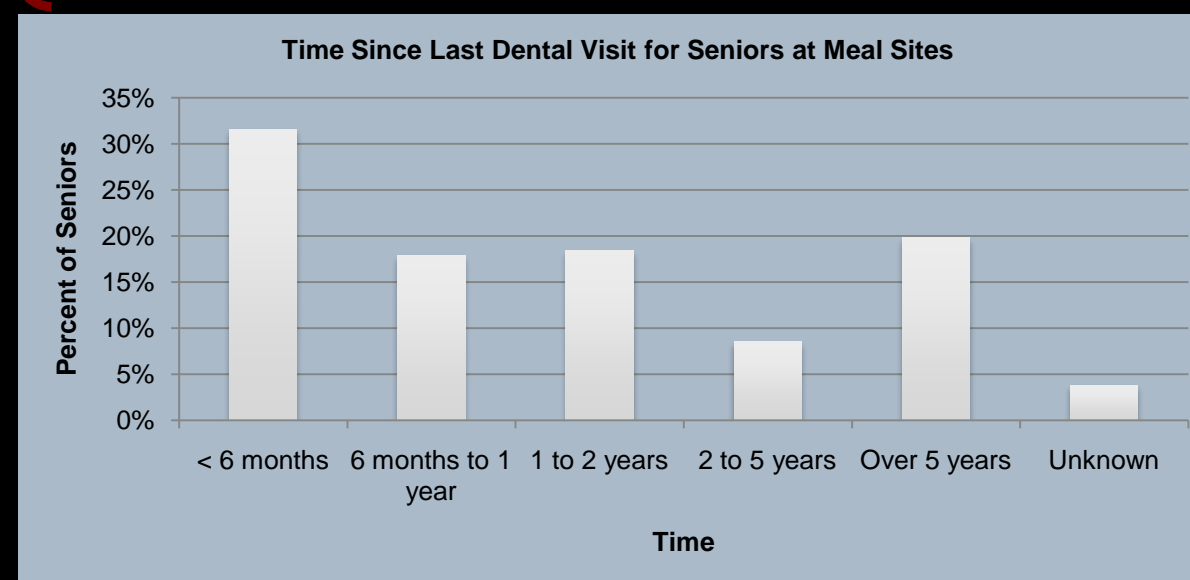


RESULTS

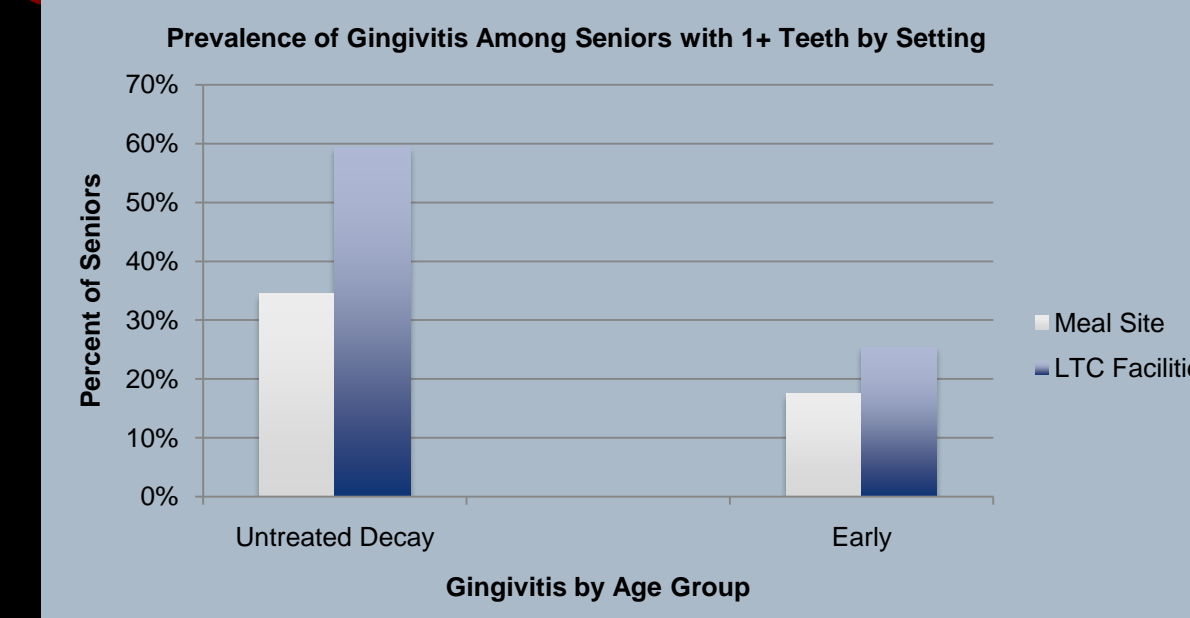


There are significant unmet oral health needs among seniors in Massachusetts.

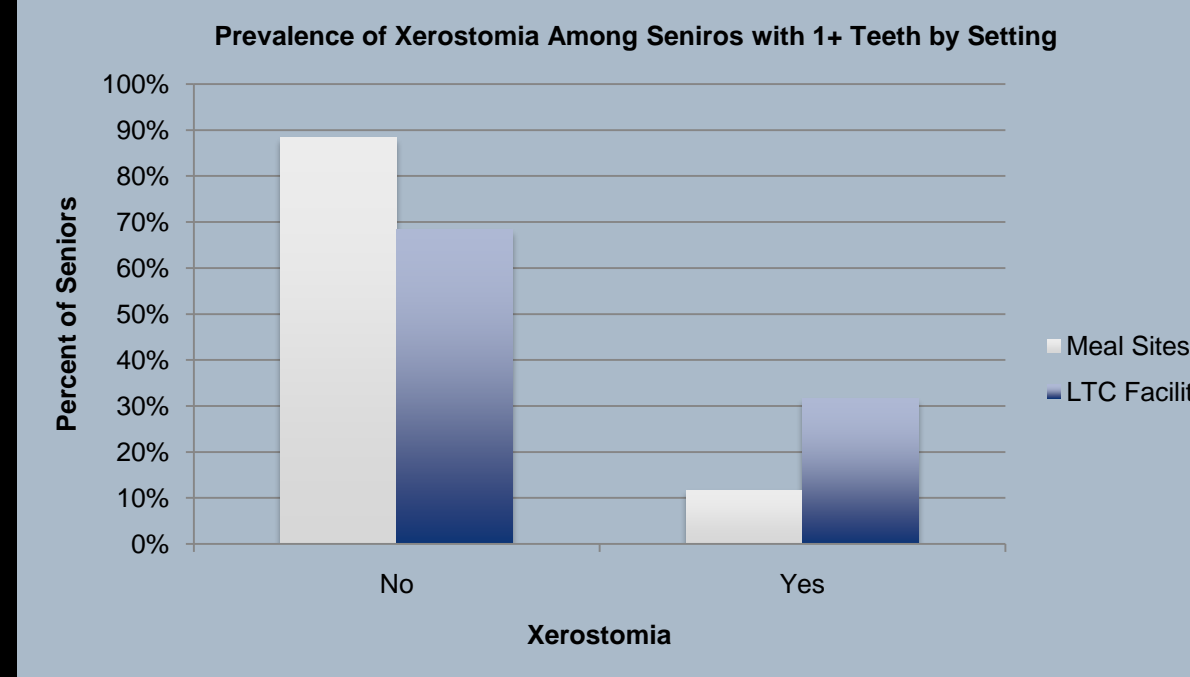
Approximately 20% of seniors in the community have not seen a dentist in over 5 years



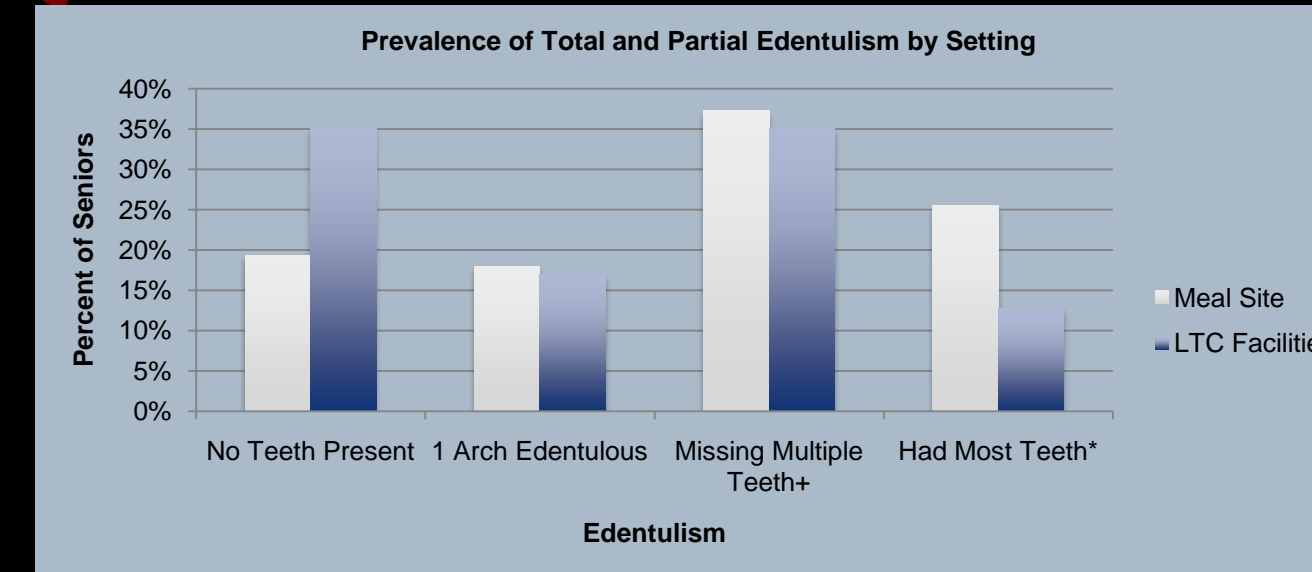
35% of seniors screened at meal sites with at least one mandibular anterior tooth had gingivitis.



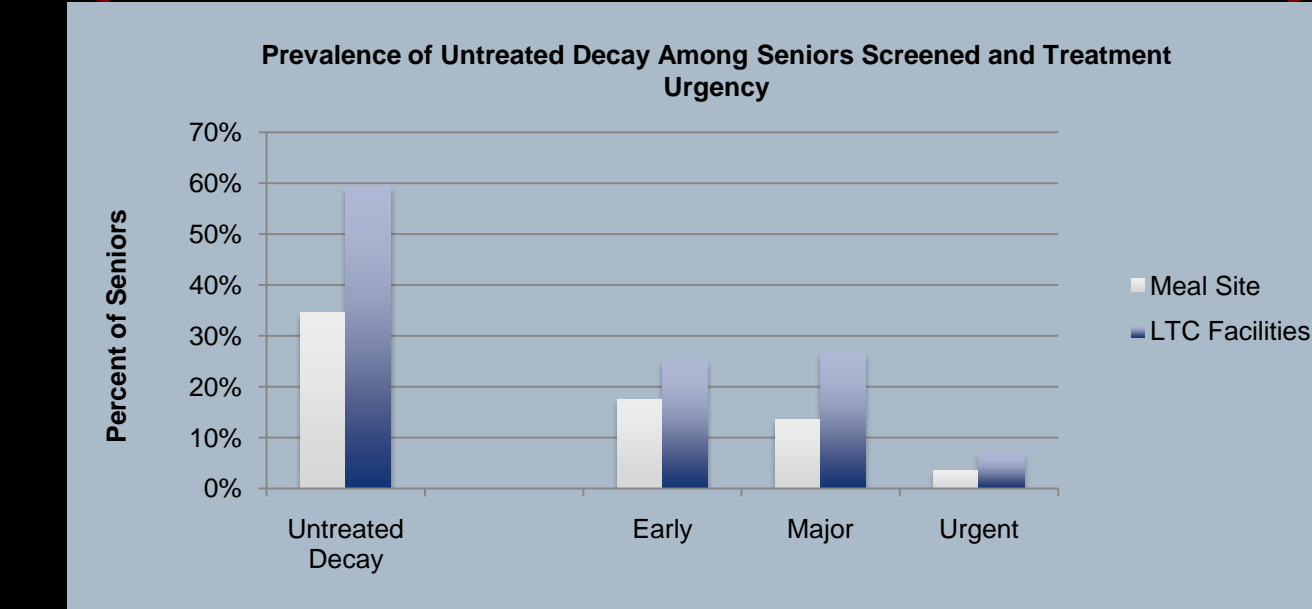
62% of the seniors screened in both population groups who had untreated decay also had xerostomia



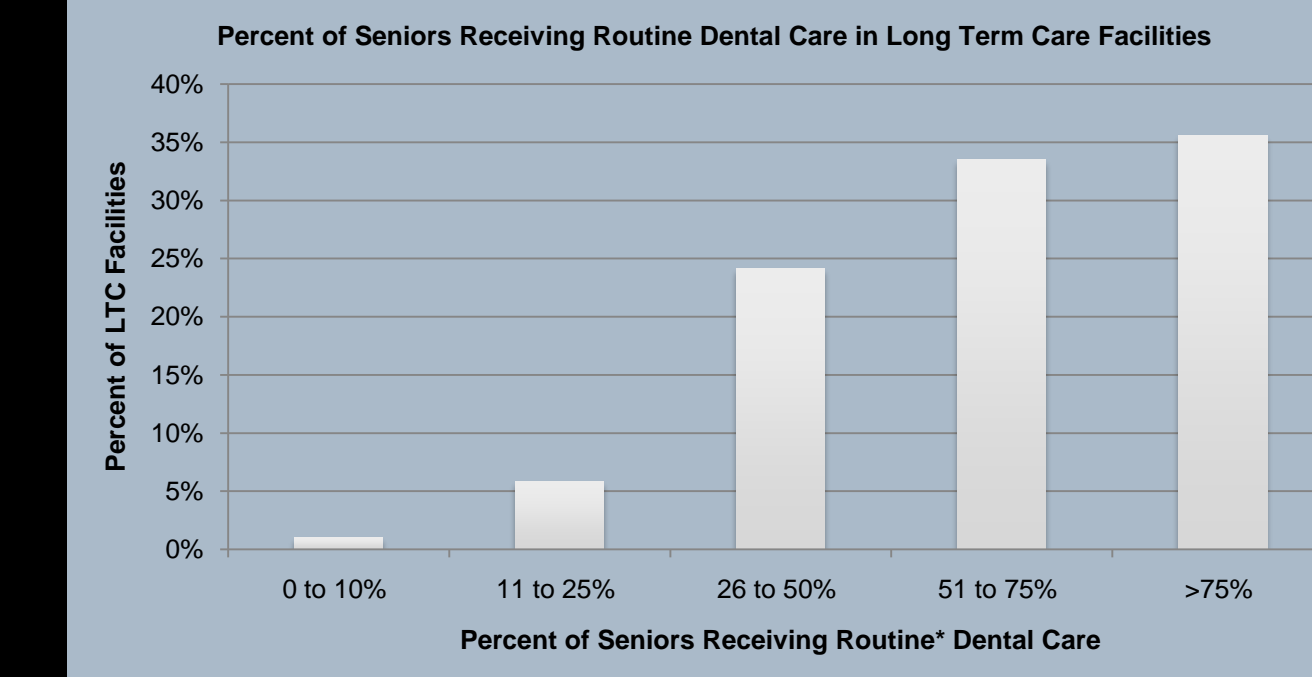
35% of seniors at long-term care facilities were completely edentulous, and 50% had no dentures.



59% of the seniors in long-term care facilities had untreated decay with 34% having major to urgent dental needs.



Barriers to dental care include lack of dental insurance, lack of access to dental professionals, and the cost of dental care.



CONCLUSION



Seniors have experienced many advances in health care, including access to life-saving treatments and an ever-expanding range of prescription drugs. They have also experienced advances in dentistry, including an emphasis on oral health education and promotion, advanced restorative procedures,

expanded access to private employer-paid dental insurance, and most importantly, access to community water fluoridation and topical fluoride in toothpaste.

In spite of these advances, seniors in Massachusetts experience unmet oral health needs. Even seniors with no natural teeth have oral health needs.

This survey confirmed that much work needs to be done in:

1. Increasing access to dental care and oral health education among seniors; and
2. Promoting oral health among providers in long-term care facilities and in community senior programs.



UNMET ORAL HEALTH NEEDS: IMPLICATIONS

Unmet oral health needs can have serious consequences to seniors' general health and well-being. Even seniors with no natural teeth require attention to oral health.

- Teeth are important for chewing food and proper nutrition; speaking; social interaction; employability; learning new skills; and appearance. Communication, rich nutritional choices and financial sustainability contribute to a seniors' quality/quantity of life.
- There is a relationship between oral disease status and chronic diseases, including diabetes, cardiovascular disease and bacterial pneumonia. 80% of seniors have at least one chronic disease and 50% have at least two.
- Tooth decay requires technically demanding, expensive and time consuming professional treatment; and if left untreated only gets worse. The majority of Medicare and Medicaid programs do not cover basic dental services for seniors.



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Reference: Massachusetts Department of Public Health Office of Oral Health. The Commonwealth's High-Risk Senior Population: Results and Recommendations from a 2009 Statewide Oral Health Assessment. Massachusetts Department of Public Health. Boston, MA, 2010. Available at: www.mass.gov/dph/oralhealth

