



AMERICA IN TRANSITION

- Economic/Social Changes
 - Higher standard of living
 - More universal education
 - Improved housing
 - Medicaid
 - Urbanization
 - Unionization

AMERICA IN TRANSITION

- Oral Health Specific Changes
 - Water fluoridation
 - 1950s & 1960s
 - Fluoride toothpaste
 - 1960s
 - Other topical fluorides







CHILDREN AT HIGH-RISK OF DECAY

- Low-income
- Low parental education
- Racial/ethnic minorities
- Recent immigrants

HOW ORAL HEALTH IS MONITORED

- IHS coordinates periodic oral health surveys
 - Use standardized screening protocols similar to state/national surveys
 "Basic Screening Survey" protocols
 - Clinics are randomly selected to participate
 - All Portland Area clinics are encouraged to participate
 - Clinic specific data can be used for program planning, program evaluation, advocacy, and grant writing

HOW ORAL HEALTH IS MONITORED

- Survey populations to date
 - Children community based samples
 - Adolescents and adults clinic based sample
- Having community based samples is very important because the oral health of clinic users may be different from the community as a whole
- Survey timeline



OVERALL SUMMARY

- Regardless of age, AI/ANs have more dental disease and less access to care than other populations in the United States
 - Dental caries is a significant health problem for AI/ANs
 - Periodontal disease is a significant health problem for AI/AN adults
 - Many AI/ANs are not getting the dental care they need
 - Portland Area has less untreated decay than IHS overall
- Early prevention, before the age of two, is essential to reduce the prevalence of dental caries in AI/AN children
- Dental sealants are an essential preventive strategy but the appropriate children and teeth need to be targeted



POTENTIAL REASONS FOR HIGH DISEASE RATES Al/AN children ... Erupt earlier than other populations Acquire oral bacteria earlier than other populations Have a higher prevalence of developmental enamel defects Social inequities ... Disparities in power and wealth, often accompanied by discrimination, social exclusion, poverty and low wages, lack of affordable housing, exposure to hazards and community social decay Percent living in poverty: 28% for Al/ANs, 16% for the U.S. Overall Oglala Lakota County, SD: 53% live in poverty







- General U.S. population: 42% had dental visit in past year
- Population served by IHS/tribes: 29% had dental visit in 2015















CARIES PATTERNS & DENTAL SEALANTS

- Focus additional efforts on sealing permanent molars
- Question to consider ...
 - Is it cost effect to seal premolars?