FDI expert conference: Oral health for ageing populations

By DTI

LUCERNE, Switzerland: From 3 to 5 May, the FDI World Dental Federation held a three-day conference on Oral Health for Ageing Populations (OHAP) in Lucerne. The invite-only conference focused on the theme of “Life-long oral health: A fundamental human right”. A total of 20 experts from around the globe, including the World Health Organization (WHO), gathered to discuss strategies to address the growing burden of oral disease and prevent tooth loss in elderly populations.

After the World Congress in March 2015, themed “Dental care and oral health for healthy longevity in an ageing society”, which was held by WHO and the Japan Dental Association in Tokyo in Japan, the OHAP initiative was launched by the FDI in collaboration with GC International, the global branch of dental products manufacturer GC, in order to ensure oral health challenges are addressed in broader disease policies for ageing populations.

At the meeting, FDI President Dr Patrick Hescot stated, “It is a great achievement that populations are living longer thanks to advances made in the fields of medicine, technology, public health and policy. But it is our role as dentists to ensure that people not only live longer lives but healthier ones too, free of oral disease, which plays a fundamental role in securing a person’s overall health and wellbeing. Oral health is often a neglected area of healthy ageing, which is why this conference is so important to try and reset the balance.”

Dr Beat Wäckerle, President of the Swiss Dental Association and local conference host added, “Avoiding tooth loss is crucial for healthy ageing. Yet, the complete loss of natural teeth is highly prevalent among older people all over the world, with severe dental caries and advanced periodontal disease being the major causes. We must take urgent action and put preventative strategies in place.”

Although tooth loss is declining in many high-income countries, and older people are increasingly preserving their teeth in a functional condition, the latest figures from WHO indicate that the prevalence of oral disease is increasing in low- and middle-income countries. Most oral diseases and conditions require professional dental care; however, owing to limited availability or inaccessibility, the use of oral health services is markedly low among older people.

GC Chairman Makoto Nakao highlighted, “In countries like Japan, 30 per cent of the population are already over 60 years old, it is now low- and middle-income countries that are experiencing the biggest change and GC is committed to working with FDI and through its network of more than 200 national dental associations to address this issue on a global level and affect positive change for the millions of people suffering unnecessarily from oral disease, when they could be enjoying active healthy ageing.”

Outcomes from the recent meeting in Lucerne will be presented at the FDI Annual World Dental Congress, which will take place in Poznan in Poland from 7 to 10 September. In addition, strategies on combating oral disease in ageing populations will be launched at the event.

According to the Global Burden of Disease Study, oral disease affects 5.0 billion people worldwide and untreated dental caries affects almost half of the world’s population (4.4 per cent), making it the most prevalent of all the 291 conditions investigated in the study.

Poor dental health can affect both psychological and physiological health, leading to a significantly reduced quality of life. In addition to functional problems, poor oral health and dental problems can result in inflammation of the gingivae and a poor-quality monosodium diet, all of which increase the risk of malnutrition. The FDI stressed that this problem will only worsen if urgent action is not taken. WHO estimates that the proportion of the world’s population over the age of 60 will nearly double from 12 to 22 per cent between 2015 and 2050.

NEW Interdental brushes with WaveCut™ bristle technology for better cleaning

- +8% Quality product
- +13% Control during use

Find your size

+971 4 8871050
jordub@emirates.net.ae
www.jordan.no

For more information
www.jordan.no

For more information
www.jordan.no
jordub@emirates.net.ae
+971 4 8871050

From left: Dr Hiroshi Ogawa (WHO), Dr Patrick Hescot (FDI), Dr Beat Wäckerle (Swiss Dental Association), Makoto Nakao (GC). (Photograph: Cláudia Lonta/FDI)

Twenty experts from around the globe attended the conference in Lucerne.

Jordan scores significantly higher than leading competitor brush¹ for control during brushing and overall quality²

1 Tested against TePe, Market leader in Sweden
2 Perceptor, Sweden, 2014, tested on 104 consumers, Age 40+

Find your size

XL S M L XL

From left: Dr Hiroshi Ogawa (WHO), Dr Patrick Hescot (FDI), Dr Beat Wäckerle (Swiss Dental Association), Makoto Nakao (GC). (Photograph: Cláudia Lonta/FDI)
Daily cleaning between your teeth matters

By Jordan

Effective removal of interproximal plaque is not achieved by a toothbrush alone. Dentists recommend that you floss daily, but very few people do this on a regular basis. Interdental brushes can be an attractive alternative to flossing and are a proven effective tool for reducing interproximal plaque. There are a number of different factors that need to be considered when choosing the right interdental brush, for example size, shape, the user’s manual dexterity and motivational level.

The smallest size is best for those users who have healthy gums and small interproximal spaces. This is generally a good alternative for first time users. Daily use of an interdental brush gives results, especially in comparison to simply brushing.

Studies show that most of us (up to 90%) will experience some form of mild gum disease (gingivitis). Early symptoms of gum disease can be detected by inflamed gum tissue. This is caused by the bacteria in dental plaque. If the bacteria is not brushed away, it may form tartar and can eventually result in a cavity. As many as 30% of cavities are between our teeth. Statistics show that the population is aging and growing, and many of these people are keeping their own teeth. The good news is that gingivitis is reversible and preventable with daily brushing and cleaning between your teeth.

A tooth has five surfaces that you need to clean thoroughly in order to get the best cleaning results. An international study showed that brushing with an interdental brush removes more plaque than brushing with a toothbrush alone. The study showed a positive significant difference using an interdental brush with respect to plaque scores, bleeding scores and probing pocket depth. The majority of the studies also showed a positive significant difference in the plaque index scores when using an interdental brush compared to using dental floss.

Motivation is a key element in succeeding with making interproximal cleaning part of the daily ‘brushing’ session. Studies have found that the ease of use of a product does affect one’s motivation. The majority of the test study individuals preferred using interdental brushes to floss. They found them simpler to handle, using only one hand, and felt that interdental brushes were more time efficient.

The advice is to look for an interdental brush that has a sturdy but compact handle so that the users get a good and comfortable grip. Shorter handles give the user more control as the position of the thumb/ﬁnger grip is closer to the point of contact. A non-slip grip also helps controlled movement. It is important that the user is able to navigate easily in the mouth, reaching the back molars. We found the highest usage of interdental brushes among consumers between the ages of 40-49. 6 out of 10 of these use interdental brushes on average 3-7 times a week.

References
1. Statistics, Norway 2011
4. ADA.org
5. Statistics, Norway 2011
6. See footnote 2

Kerr PREVENTION

Kerrnic®
The one step Prophy Paste

PATENTED PERLITE TECHNOLOGY
Featuring integrated abrasion variability

ALL IN ONE
Universal prophy paste guarantees outstanding results

TIME SAVING
From cleaning to polishing in one step

SCIENTIFICALLY PROVEN
Maximum cleaning & polishing with low abrasion of enamel and dentine

Cleanic®
Berry Burst with fluoride
A NEW tantalizing taste for an outstanding prophy result

prevention.KerrDental.eu
Swiss dental company Curaden is one of the few businesses in the industry that adopt a holistic approach to dentistry. The company combines high-quality products, pioneering training systems and prophylaxis concepts for long-term oral health. In this interview, CEO Ueli Breitschmid talks about new ways and knowledge in dentistry and optimal preventive care as key to good oral health.

Dental Tribune: Mr Breitschmid, Curaden aims to offer more than just dental care products. You advocate comprehensive training in the field of dental prevention. Why is this issue so important?

Ueli Breitschmid: Curaden is the only company that, in addition to manufacturing its own products, provides patients with the necessary knowledge and skills, in cooperation with trained instructors, to take control of their oral health themselves. We have developed our knowledge and products with the aim of keeping dental customers healthy in their lifetime.

Our corporate philosophy combines the innovative CURAPROX products, our dental education system iTOP and the practical Prevention-One plan. Our goal is to reduce the prevalence of gingivitis, periodontitis and tooth loss. Therefore, we support comprehensive soft-tissue prophylaxis. Finally, we support the most common cause of poor oral health: we support prophylaxis to this end with our great interdental toothbrushes, our iTOP seminars and other services.

In any oral health discussion, it is always important to look at the combination of a high-quality product and the trained application thereof. The product alone without a trained user changes little or nothing. Therefore, 80 per cent of people in developed countries have gingival diseases; between 80 and 90 per cent of people in developing countries have gingival diseases. In time, dentists will measure blood pressure and take saliva samples or blood samples. It will be easier for them to treat their patients.

A world famous example of achieving control and continued motivation is Martina Hingis. Hingis, who was once tennis's youngest-ever number one champion, is our new global ambassador promoting a new level in oral healthcare. Over the next three years, the 35-year-old Swiss will be making some major appearances for our brands. And I would also like to mention KUSQ, one of the largest dental practices in Germany. Over the last 20 years, the dentist and his staff can benefit from the comprehensive solutions of our iTOP training. The entire office staff, including the dental professionals, who pass on their new knowledge and skills daily, can then treat their patients.

So you envision dentists and doctors working more closely?

Dentistry and medicine will certainly continue to move closer together, as the interaction between the oral tissue and other organs is now better understood. Slowly but surely, dentists will be recognised for their role in medicine. They are the gatekeepers of health, because the mouth represents the basis of almost all chronic diseases. In time, dentists will measure blood pressure and take saliva samples or blood samples. It will become possible to decrease the prevalence of chronic diseases, including cancer, Alzheimer's disease, cardiovascular disease and diabetes, through better oral health. At the same time, medicine of the future will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine. At the same time, medicine will be oral medicine.