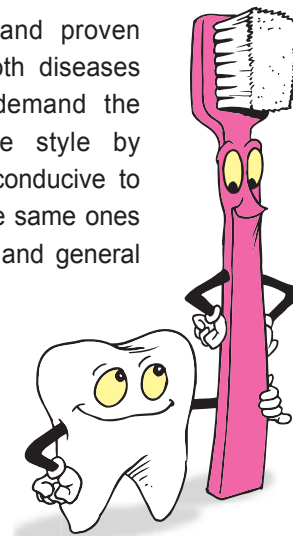
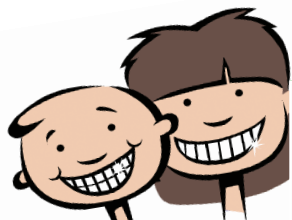



A population-wide oral health survey for Hong Kong was conducted in 2001, to ascertain the population's oral health status and relevant oral health related behaviour. The survey methodology followed the basic principles recommended by the World Health Organization of using index ages and age groups to represent the Hong Kong population.

The main focus of this report was on the two most common, yet much overlooked dental diseases, i.e. tooth decay (*dental caries*) and gum disease (*periodontal disease*), affecting the people of Hong Kong. These common problems are considered important public health concerns because almost everyone in our community is affected by either or both of these two diseases. Yet, these conditions are perceived by many as relatively mild compared to other health problems. However, when one does experience pain, discomfort and/or tooth loss, the affected people will no doubt be left with various degrees of impaired functions, which may have an impact on people's quality of life.

Safe, effective and proven preventive measures are available for both diseases mentioned. However, these measures demand the adoption of certain behaviour and life style by individuals. The behaviour and life style conducive to healthy teeth and gums are in fact, also the same ones needed to better one's overall oral health and general health.





	Oral health indicators	5-year old children	12-year old students	35 to 44-year old adults	65 to 74-year old non-institutionalized older persons (NOP)	Institutionalized older persons aged 65+ (IOP)
Tooth decay	Mean number of teeth with history of decay	2.3	0.8	7.4	17.6	24.5
	% of people had teeth with history of decay	51.0	37.8	97.5	99.4	99.8
	Mean number of teeth with untreated decay	2.1	0.1	0.7	1.3	2.6
	% of people had teeth with untreated decay	49.4	6.9	32.0	52.9	55.2
Gum disease	% of people with bleeding gums		35.0	3.4	1.7	0
	% of people with calculus		59.5	49.9	43.0	49.8
	% of people with gum pockets			46.0	55.3	49.9
Tooth loss	% of people with no teeth (total tooth loss)			0	8.6	27.2
	% of people with ≥ 20 teeth			99.2	49.7	24.1
Root surface decay	Mean number of teeth with untreated root decay			<0.05	0.3	0.4
	% of people with untreated root decay			3.4	21.5	22.7

From a global perspective, the oral health of the Hong Kong population was found to be in the same ranking if not better than most developed countries in the world. The level of tooth decay among the 12-year old students was actually among the world's lowest. The oral health status of Hong Kong's adult population, in terms of tooth decay level (DMFT) and gum condition, had the same ranking if not better, than the counterparts from most developed countries in the world. In fact, among the countries in geographical proximity and comparable economic development to Hong Kong, Hong Kong's adults boasted a 0% in terms of total tooth loss.

Although the oral health of the Hong Kong population showed improvement over the years, the survey findings showed that **both tooth decay and gum disease are still imminent threats**, as evidenced by the following :

- the level of tooth decay and gum disease had continued to increase with age
- the risk in the development of gum disease already noticeable at age 12
- the emerging presence of root surface decay among adults and older persons
- the presence of calculus and gum pockets were commonly found

To reduce the undesirable consequence of tooth loss, it is essential to prevent the onset of new diseases, and to prevent deterioration of existing diseases. **Prevention is the key to better oral health.**

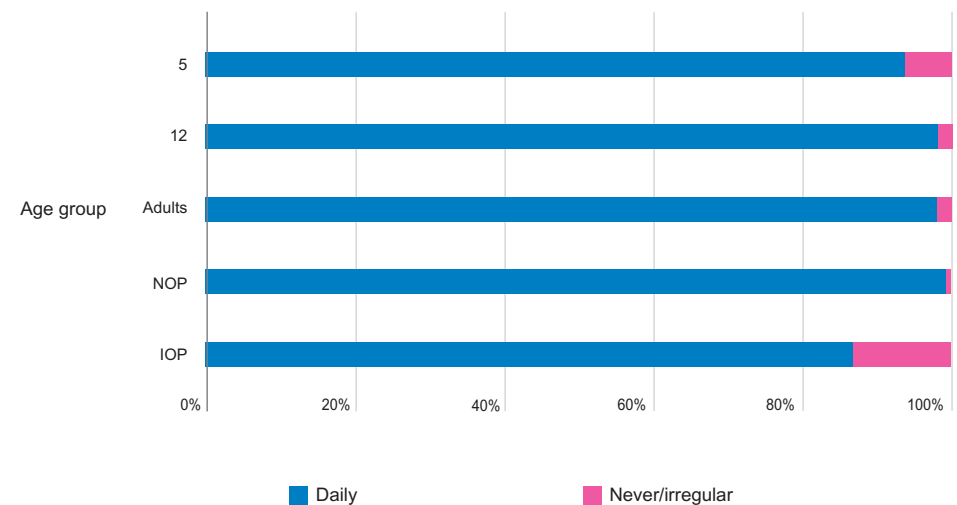
Life-style conducive to optimal oral health

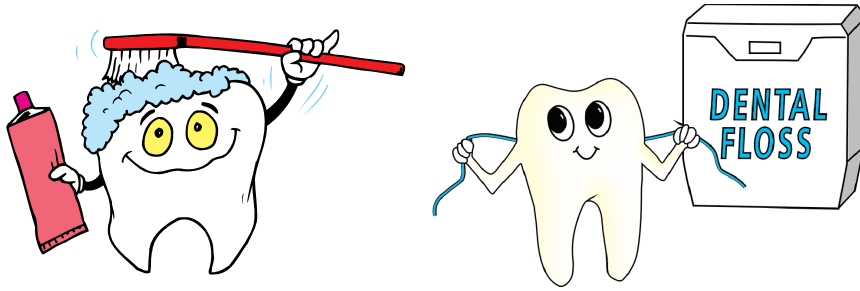
- Perform teeth cleaning preferably twice everyday, by proper toothbrushing with fluoride-containing toothpaste and by appropriate interdental cleaning.
- Make use of oral health care services, by seeking regular dental checkup for prevention, early detection and management of oral health problems.
- Adopt a good dietary habit by reducing snacking frequency, especially sugar-containing snacks, and by seeking medical advice for special dietary requirement, one which also complements oral health needs.
- Refrain from smoking, or quit smoking if you are a smoker, and reduce the consumption of alcohol.



The purpose of proper teeth cleaning is to remove the dental plaque daily, and prevent its build up for it to cause damage to the teeth and gums. Mechanical cleaning is the only effective means to remove dental plaque. For toothbrushing to be effective in young children, parental assistance has to be provided. Only a small number of parents regularly helped their 5-year old children when they brushed their teeth. Toothbrushing, if properly performed, is effective for removing dental plaque on most tooth surfaces except the tight areas between adjacent teeth (interdental). Hence, toothbrushing is best complemented with proper interdental cleaning.

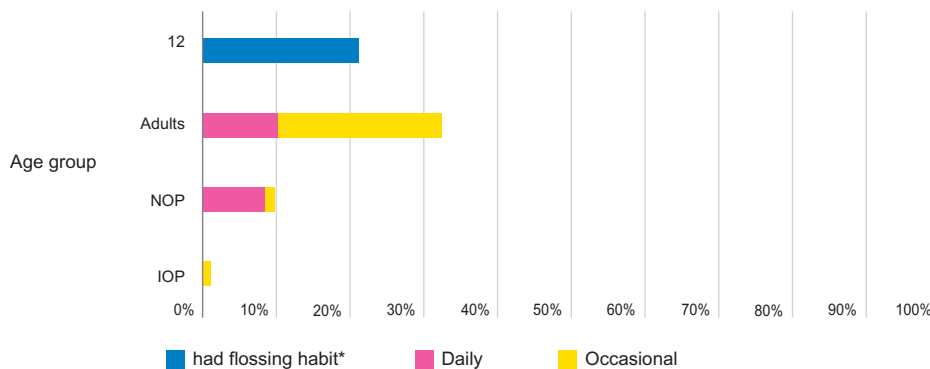
Reported toothbrushing habit of all age groups





Toothbrushing was the only oral health habit that was mostly practised, while interdental cleaning by flossing was not commonly practised. Effective teeth cleaning practices need to be reinforced. Dental plaque was commonly found among the 5 and 12-year olds. Accumulated dental plaque may calcify into a hardened deposit called calculus. Calculus was present in nearly 60% of the 12-year old students and nearly half of the adults and older persons groups. The rough surfaces of the calculus further promote dental plaque accumulation, thus hastening the progress of gum disease. Once formed, calculus deposit must be removed by professional teeth cleaning.

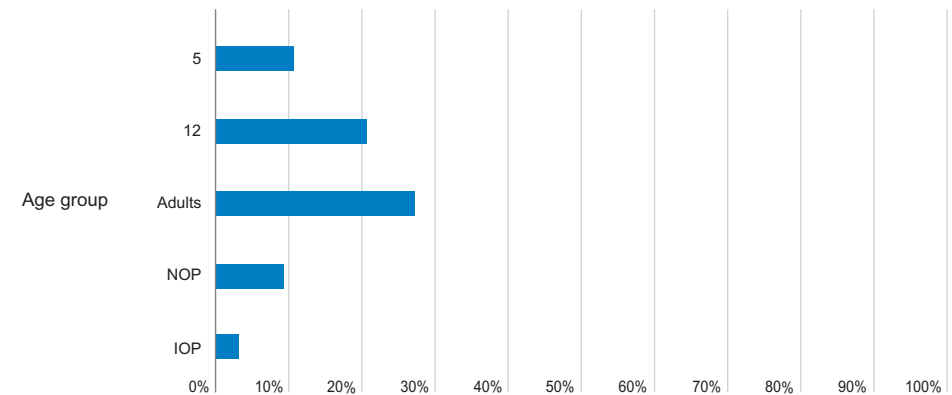
Reported flossing habit of all age groups@



@ Not applicable to 5-year old children
* frequency unknown

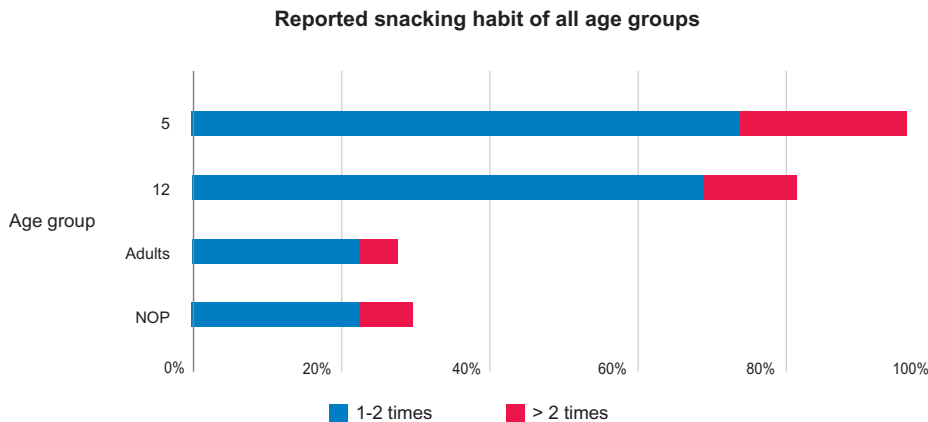
Regular dental checkup is not just about screening to detect the presence of disease. Its primary aim is to fortify the preventive aspects of care to prevent the onset of oral diseases. During regular dental checkup, family dentists can make appropriate personal advice on individual life-style and behaviour, give personal and individual instructions on the skill of teeth cleaning, and monitor the effectiveness of such home care behaviour, all in the name of improving oral health. Family dentists can also provide preventive treatment for tooth decay, such as fluoride application and fissure sealants.

Reported habit of regular dental checkup of all age groups

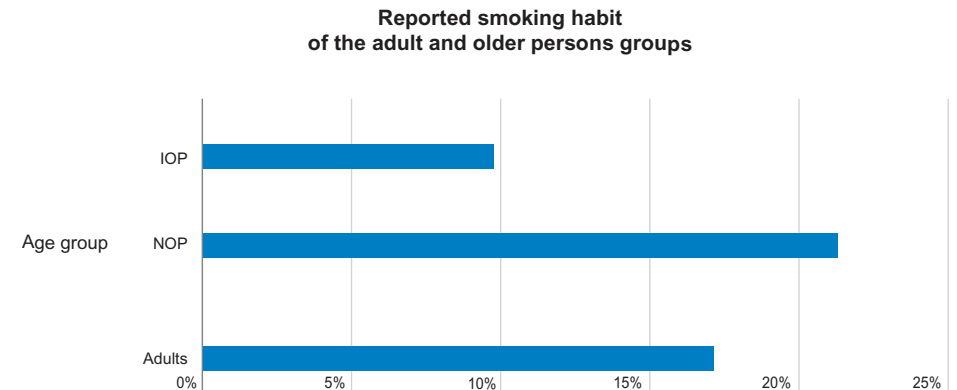


The habit of seeking regular dental checkup was not common in the population. Of all the groups surveyed, the adults had a relatively higher percentage who had the regular dental checkup habit. Still, almost three out of four adults did not seek regular dental checkup. Short of this prescribed habit, the opportunities for professionally applied prevention therapy, as well as early diagnosis and early intervention would not be possible.

The issue of diet is a complex one, with various considerations such as nutrition, content and frequency of food intake, which are important to both oral health and general health. In the context of oral health, the significant aspects of diet are the sugar content of food and the snacking frequency. Any food substances containing sugar, either artificially added or naturally occurring (such as lactose in milk and other sugar in fruits) can cause tooth decay. It is thus important to reduce the frequency of such food intake (including snacks, milk and fruits) as far as possible.

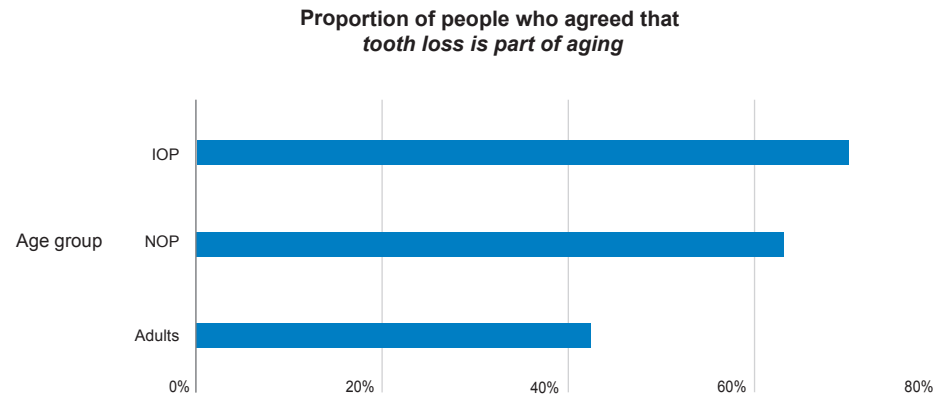


Smoking is associated with a higher risk of developing destructive gum disease and oral cancer. Smoking is also a contributory factor to bad breath, not to mention the unsightly extrinsic stains on tooth surfaces from tobacco. The avoidance of tobacco use is an important factor in promoting general health and oral health.



Frequent snacking and smoking are also risk factors. Of all age groups surveyed, snacking habit was more common among the 5 and 12-year olds. Smoking habit was reported by 17% of adults and 21% NOP.

Tooth loss was considered by many, especially the older persons, as a natural eventuality in life. To 41.2% adults, 62.7% NOP and 70% IOP, tooth loss was considered as a part of aging. The survey findings suggested that tooth loss found in older persons was most probably the result of lack of appropriate oral health care during their younger stages of life.



Tooth loss at old age is not a natural eventuality in life. Attaining optimal level of oral health starts at the individual level. It requires conscious efforts and self-reliance to adopt a life-style which is conducive to optimal oral health. **Better oral health is important to general health.**