

KEY MESSAGES

Medical GP assessment of need for dental care

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Policy context

With the ageing of the Australian population there is a growing challenge to maintain health into older age and meet the health needs of this expanding sector of the population. Oral health is considered fundamental to overall general health and well-being. Oral diseases are common in Australia and impact on people's lives. Our ageing population is tending to keep their teeth into older age leading to problems such as tooth wear, tooth fracture, root caries and pulpal infections. Older people also face access issues relating to receiving adequate dental care. Good oral health and adequate dental care are important to facilitate healthy ageing, and can contribute to better general health which can alleviate strain on the health system. Annual Health Assessments by general practitioners for people 75 years and older are important for early intervention and monitoring of chronic health conditions. They offer a potential route for referral to public dental care. Eligible patients accessing public dental care with the South Australian Dental Service are waitlisted for a period of months to years. Our study followed oral and general health outcomes for patients referred to public dental care from Health Assessments. Patients referred immediately were compared with those waitlisted.

Key messages

- > Patients undertaking Health Assessments had worse oral health and oral health-related quality of life than the national population of that age.
- > Common risk factors identified for poor oral and general health were low socioeconomic status, comorbidity of chronic conditions and high nutritional risk. This highlighted opportunities for prevention of oral disease in primary care settings.
- > General practice assessment of the need for dental care and referral to public dental care improved the self-rated oral health of patients and their oral health-related quality of life over one year. No measurable impact on general health and quality of life was detected.
- > No measurable difference in health outcomes was detected between patients referred to clinics immediately and those referred after 3 months waitlisting.
- > The integration of oral health assessment and referral into Health Assessments is recommended. Encouragement and incentive should be provided to general practices to do so.
- > Further research is needed to identify the barriers and enablers that facilitate older people's access to regular public dental treatment.

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