



# NYC Vital Signs

## Oral Health in New York City

Major risk factors for oral disease include frequent consumption of sugary snacks and drinks as well as tobacco and alcohol use.<sup>1,2</sup> Studies have found a link between periodontitis (advanced gum disease) and diabetes complications, as well as low birth weight and premature births.<sup>3</sup> Babies can acquire cavity-causing bacteria from family and caretakers by sharing utensils and foods.<sup>2</sup> Young children are also at increased risk for caries (tooth decay) due to frequent non-water beverage consumption in baby bottles and sippy cups.<sup>2</sup>

Proper oral hygiene including regular brushing, flossing and use of mouthwash, as well as dental care

throughout life, can help prevent caries, gum disease and tooth loss. New York City water is fluoridated, making drinking tap water a safe and effective way to prevent and control dental caries.<sup>4</sup>

Many New Yorkers do not receive proper oral health care. More than one third (38%) of third grade children have untreated caries and 25% of adults ages 65 and older have had all their permanent teeth extracted.<sup>5,6</sup>

This *Vital Signs* provides a portrait of preventive oral health care use in New York City. Recommendations to reduce risk for oral health problems and improve oral health care access appear on page four.

### How often should New Yorkers visit the dentist?

**Children:** The American Academy of Pediatrics (AAP) and the American Academy of Pediatric Dentistry (AAPD) recommend the first clinical oral examination when the first tooth comes in and no later than 12 months of age. From the first visit through adolescence, dental visits should occur at least twice a year.

**Adults:** The Centers for Disease Control and Prevention (CDC) and the American Dental Association (ADA) recommend regular dental visits with the patient's dentist determining how often visits are needed.

## Many New Yorkers at increased risk for oral health problems have not visited the dentist in the past year

### Percent of adult New Yorkers at increased risk for oral health problems due to behavioral or medical risk factors

Risk factor	%	% with no dental visit in past year
One or more sugary drinks per day	36	41
Current smoker	17	43
Binge* or heavy† drinker	17	36
Diabetes	9	33
One or more of the above	59	40
Pregnancy <sup>^</sup>	na	47

\* Binge drinker defined as drinking five or more drinks on one occasion during the past 30 days.

† Heavy drinker defined as, on average in the past 30 days, having more than two drinks per day for men and more than one drink per day for women.

<sup>^</sup> Women age 13 to 55 who gave birth within the last 13 months.

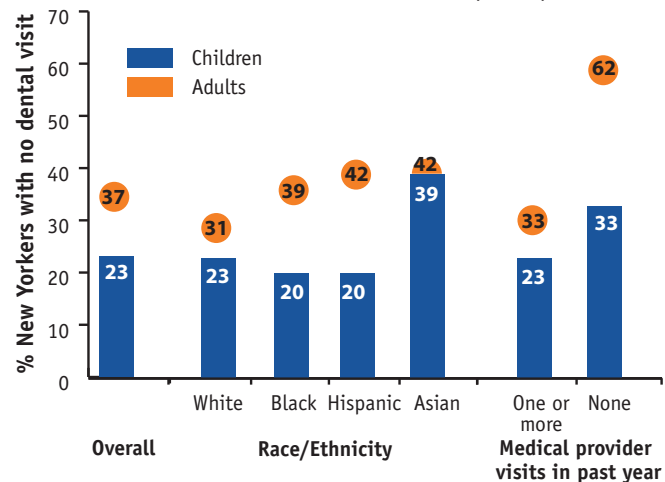
Source: NYC CHS, 2007; NYC PRAMS, 2009

- More than 3.4 million adults (59%) have one or more risk factors for oral health problems. About one in three (36%) adults and almost half (44%) of children ages six to 12 are at increased risk for oral health problems because they consume one or more sugary drinks per day.
- More than one in three (40%) adults with one or more risk factors have not visited the dentist in the past year.
- Dental care is safe and effective during pregnancy.<sup>7</sup> But almost half (47%) of women who recently gave birth did not have a dental visit in the past year and about one in five (18%) have never had their teeth cleaned.<sup>^</sup>
- Women who recently gave birth and who had late or no prenatal care were more likely not to have had a cleaning in the past year than those who received prenatal care during their first trimester (60% vs. 51%).

## One in four children and one in three adults did not have a preventive dental visit in the past year

- In New York City, about one in four (23%) children and more than one in three (37%) adults\* have not had a preventive dental visit in the past year.
- Among children, Asians (39%) were more likely to have no preventive dental visit in the past year than were other racial/ethnic groups (20-23%).
- Among adults, Asians (42%), Hispanics (42%) and blacks (39%) were more likely to have no dental visit in the past year than whites (31%).
- Adults who did not see a medical provider were almost twice as likely to have no dental visit in the past year as adults who did see a medical provider (62% vs. 33%).

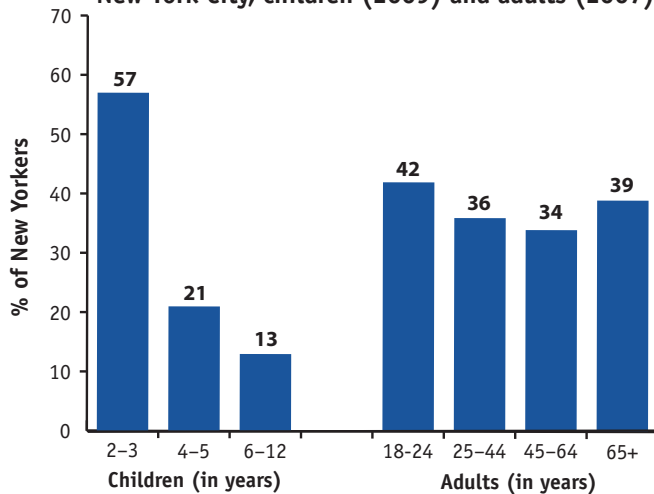
Prevalence of no preventive dental visit in the past year, New York City, children ages two to 12 (2009) and adults ages 18 and older (2007)\*



\*Among adults, data shown refer to no dental visit of any kind.  
Source: NYC CCHS, 2009; NYC CHS, 2007, age adjusted.

## Very young children were more likely to have no preventive dental visit

No preventive dental visit in the past year, New York City, children (2009) and adults (2007)



Source: NYC CCHS, 2009; NYC CHS, 2007

- Children ages two to three (57%) were more than four times more likely than were children ages six to 12 (13%) and almost three times more likely than were children ages four to five (21%) to have no preventive dental visit in the past year.
- Adults, ages 18 to 24 (42%) were more likely than those ages 25 to 44 (36%) and 45 to 64 (34%) to have no dental visit in the past year.
- Uninsured adults (56%) and children (37%) were more likely to have no dental visit than were adults and children with Medicaid\* or another type of insurance coverage.

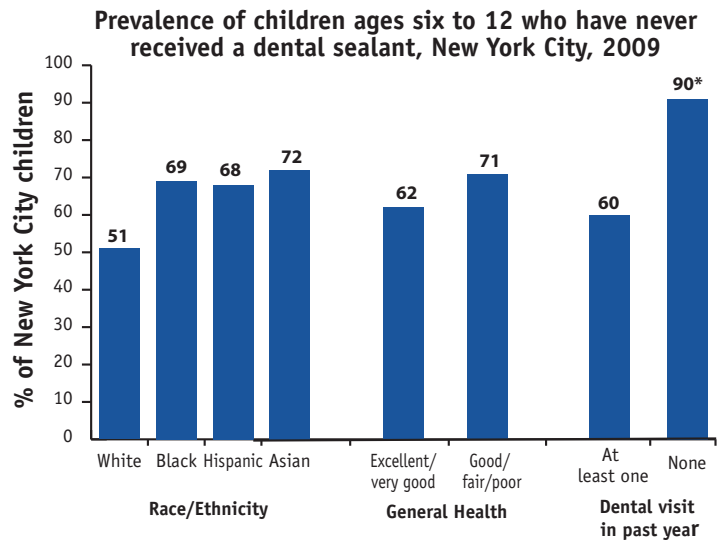
\* In New York State, Medicaid provides dental coverage for treatment, diagnostic and preventive dental care for children and adults. For children, the Medicaid category includes Child Health Plus.

Data in this report are from four sources: (1) The New York City Community Health Survey (NYC CHS) is an annual telephone health survey of approximately 10,000 adults ages 18 and older conducted by the Health Department. Data presented are from 2007, weighted to the 2000 adult NYC population and are age-adjusted to the U.S. 2000 Standard Population except for age-specific estimates. For full survey details, visit: [nyc.gov/health/survey](http://nyc.gov/health/survey). (2) The New York City Child Community Health Survey (NYC CCHS) is a population-based telephone survey that was conducted in 2009 by the Health Department with support from Children's Health Fund. A parent, guardian or other knowledgeable adult (referred to as "parent") was interviewed about the health of one child in the household for a sample of 3,002 children. Data were weighted to the NYC population of children from birth to 12 years using the 2006-2008 American Community Survey. (3) The New York City Pregnancy Risk Assessment Monitoring System (NYC PRAMS) is an ongoing population-based paper survey of new mothers in New York City designed to monitor maternal experiences and behaviors before, during and after pregnancy. Each month, approximately 180 NYC residents who have recently given birth are randomly selected from registered birth certificates. Data presented are from births in 2009 and weighted to the New York City population giving birth in 2009. (4) New York State Public Access Cancer Epidemiology Data (NYSPACED) are regional level data from the New York State Cancer Registry, collected, processed and made available by the New York State Department of Health. Cancer is a reportable disease; all cases are reported to the New York State Department of Health. Data presented are from 2004 to 2008 and age-adjusted to the U.S. 2000 Standard Population.

## Two thirds of New York City children ages six to 12 have never received a dental sealant

The American Academy of Pediatric Dentistry recommends sealants for any tooth, primary or permanent, that is at risk for caries in grooves or pits. Molars are generally at highest risk. Dental sealants block caries-causing bacteria and food particles. First molars come in around age six, which makes it a good time to begin sealant application.<sup>8,9</sup>

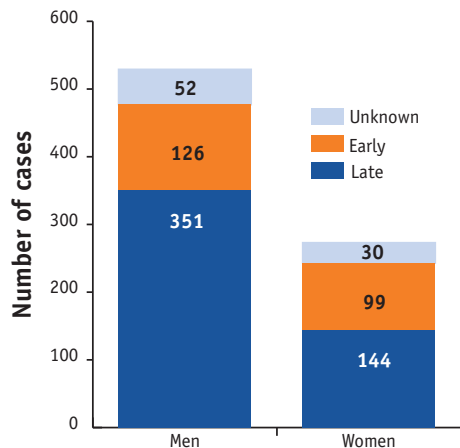
- Among children ages six to 12, 65% (438,000) have never received sealants.
- Compared with white children (51%), children of other race/ethnicity groups were more likely to never have sealants (68–72%).
- An estimated 352,000 (60%) children ages six to 12 who have seen the dentist for a preventive visit in the past year have never received sealants.



\* Due to small numbers, estimate should be interpreted with caution.  
Source: NYC CCHS, 2009

## Most oral and throat cancers are diagnosed late

Stage at diagnosis of oral and throat cancer, New York City, 2004-2008



- Oral cancer screenings by a dentist or medical provider can detect tumors early, when treatment is most successful.
- Each year about 800 New Yorkers are diagnosed with oral or throat cancer and 190 die from these conditions.\*
- Men had more than twice the rate of new oral and throat cancers as women (14 vs. 6 cases per 100,000 persons).
- Seventy percent of oral and throat tumors with a known stage were diagnosed late.† Late diagnosis was more common among men (74%) than among women (59%).

\* Statistics for oral cancer diagnoses and deaths were not available separate from throat cancer.  
† Late diagnosis is defined as cases that have spread outside the organ of origin.

Source: NYS PACED, 2010

### REFERENCES

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# Recommendations

## New Yorkers of all ages should reduce risks and obtain recommended dental care.

- Drink tap water instead of sugar sweetened beverages and cut down on sugary snacks.
- Parents should reduce or eliminate sugar sweetened beverages and juice in baby bottles and sippy cups, especially at night and between meals.
- Quit smoking. Talk to a doctor, call 311 or visit [nycquits.org](http://nycquits.org) for help.
- Limit alcohol use. Call 311 or LifeNet (1-800-543-3638) for help.
- Brush teeth twice daily with a toothpaste containing fluoride, clean between the teeth with dental floss and use mouth rinse. For general information from the ADA, visit: [ada.org/2624.aspx](http://ada.org/2624.aspx). For brushing recommendations for children, visit: [aapd.org/publications/brochures/babycare.asp](http://aapd.org/publications/brochures/babycare.asp).
- Have regular dental checkups and follow your provider's advice for oral health maintenance.
- Medicaid enrollees can locate a participating community dental clinic in their borough at: [nyc.gov/html/doh/html/hca/oralhealth.shtml](http://nyc.gov/html/doh/html/hca/oralhealth.shtml).
- Parents should discuss dental care, fluoride varnish and referral to a dentist for sealant application with their child's health care provider. For more information about fluoride varnish, visit: [nyc.gov/html/doh/downloads/pdf/hca/hca-ask-fluoride-varnish.pdf](http://nyc.gov/html/doh/downloads/pdf/hca/hca-ask-fluoride-varnish.pdf).
- Pregnant women should discuss dental care during pregnancy with their prenatal care provider.

## Primary care providers should integrate oral health into their medical practice.

- Educate patients about preventive oral health care including preventive dental visits.
- Refer patients to a dentist by age one and ask about each patient's most recent dental visit.
- Pediatricians should receive training to provide brief oral health screenings and application of fluoride varnish ([nyc.gov/html/doh/downloads/pdf/hca/hca-fluoride-varnish.pdf](http://nyc.gov/html/doh/downloads/pdf/hca/hca-fluoride-varnish.pdf)).

## Dentists should provide a full range of preventive services to their patients.

- Offer sealants and fluoride varnish to children as needed and oral cancer screenings to adults.
- Establish linkages with local medical providers and health plans to facilitate referrals to dentists.
- Expand capacity and comfort with treating young children through continuing education as needed.

## Health insurance plans should offer and promote dental benefits.

- Help enrollees choose a dentist when they enroll and assign a dentist to those who do not choose one.
- Promote consultation and referrals among network medical and dental providers.
- Explore incentives to increase the availability of dentists in underserved neighborhoods.