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7th Jan 2009

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DENTAL HEALTH OF OLDER AUSTRALIANS REQUIRES URGENT ACTION

THE FACTS

- Poor dental health, especially periodontal disease, can lead to a range of medical conditions including coronary heart disease, stroke, peripheral vascular disease and pancreatic cancer.
- The indirect cost of poor dental health associated with these four medical conditions alone is estimated at \$412 million per annum (2005/06 prices).¹
- The incidence of periodontal disease is nearly twice as prevalent in older Australians at about 54 per cent, compared to young Australians, at about 25 per cent

There is a significant oral health deficit in the dentate elderly population which has the potential to impact on many aspects of medical care and psychological well-being. Loss of teeth, unrestored carious teeth, dental abscess formation and overt periodontal infection, coupled with poor nutrition and discomfort, may be devastating, compound psychosocial problems and impact on both quality of life and family dynamics. As appearance, function and comfort suffers, so may the person's self-esteem and confidence. **

** From the 'Project Rationale' section of a joint grant application lodged by the Sir Joseph Montefiore Home, Randwick and the University of Newcastle to NSW Health.

LACK OF DENTAL CARE IN RESIDENTIAL AGED CARE CENTRES

ABC television's *Lateline* program ([Click to view](#)) recently highlighted the plight of residents in aged care centres. Dr Clive Rogers provided graphic evidence of the prevalence of periodontal disease highlighting the need for urgent attention by government to rectify the problem. (URL: http://mpegmedia.abc.net.au/lateline/av/podcast/20081204-late-teeth_video4.wmv)

Under the *Aged Care Act*, nursing home operators have a legal obligation to provide proper oral and dental health to residents. They are required to:

- Meet specific standards on oral and dental care (Outcome 2.15)
- Refer residents to appropriate health specialists in accordance with the residents' needs and preferences, including dentists. (Outcome 2.6)
- Demonstrate that residents' oral and dental health is maintained through documentation;

¹ Econtech Pty Ltd, ECONOMIC ANALYSIS OF DENTAL HEALTH FOR OLDER AUSTRALIANS - FINAL REPORT
COTA Over 50s and the Australian Dental Industry Association, September 2007

- Consult with residents and their representatives about the effectiveness of the oral and dental care they are receiving.

On 4 December 2008, the Minister for Ageing (Hon Justine Elliot) stated that the Australian Government is examining the current oral and dental health standards as part of the Review of Accreditation Standards. If nursing homes fail to comply, they face tough compliance action including sanctions. COTA Over 50s endorses the government's actions, but believes that urgent, practical action should be taken to overcome existing impediments to providing oral health care in residential facilities.

COTA OVER 50S' RECOMMENDATIONS

IMMEDIATE SOLUTION

Dental hygienists and therapists are a key provider of dental care for older Australians. The services that can be provided by hygienists and therapists are defined by their Scope of Practice, which is regulated through their State Dental Boards. The ability to deliver their full range of care differs from state to state. Restrictions may apply because of the way their professional relationships to dentists are structured. For example, restrictive supervision regimes may apply to hygienists, and therapists may only work with patients within a certain age range.

A wider scope of practice would allow therapists and hygienists to treat older Australians in different settings, such as community centres, residential care or even private homes. It is vital that dental hygienists and therapists are able to visit residential aged care centres to provide periodontal care to residents.

The Council of Australian Governments has agreed to try and diminish the inconsistencies in Scope of Practice through National Registration. There should be a national registration of hygienists. We understand all jurisdictions will be required to have exactly the same Scope of Practice for each dental health professional. COTA Over 50s is concerned that if the Scope of Practice for Hygienists and Therapists is set at the level in the most restrictive jurisdiction many older Australians, and those in residential aged care, will be deprived of essential dental care.

LONGER TERM PROVISION

COTA Over 50 has invested considerable resources to examine the problems and costs associated with periodontal disease in residents of aged care centres and older Australians.

In September 2007, in collaboration with the Australian Dental Industry Association, COTA Over 50s released a report by respected economic modeler Econtech: *Economic Analysis of Dental health for Older Australians*

(URL: www.cotaover50s.org.au/e107_files/COTA_documents/publications/reports/economic_analysis_dental_health.pdf)

This report noted that periodontal (gum) disease is linked to a range of serious health conditions, including coronary heart diseases, stroke, peripheral vascular disease and pancreatic cancer. Elderly Australians show double the rates of periodontal disease of younger people. The report concluded that the Government could save \$42 million a year on costs associated with dental-related ill-health in the elderly if it extended the dental entitlements of the Department of Veterans Affairs Gold Card holders to all Aged Pension Card holders over sixty five years of age.

(URL www.cotaover50s.org.au/e107_files/COTA_documents/publications/media_releases/cota_adia_press_release.pdf)

SUMMARY COMMENTS

For older Australians, dental health is a fundamental element of well-being. Sadly, many are suffering unnecessary pain and deteriorating oral health not only because of a shortage of dentists but because of unhelpful professional arrangements about how dental hygienists and therapists can offer oral health services. Beyond the immediate distress and discomfort there are substantial disease outcomes and costs flowing from poor oral health.

There are not sufficient data about the existing Medicare dental rebate scheme to enable an easy judgment of its effectiveness. Clearly people who are chronically ill and have associated dental disease should have ready and regular access to treatment. So too should pensioners, and there are far too many of them on dental waiting lists. Some of them have been waiting for ten years. It will be a serious blow to pensioners if the government's proposed Dental Health Program is suspended.

WHERE TO FROM HERE?

Dr Peter Foltyn, Consultant Dentist at St Vincent's Hospital, Sydney, has led a team of dentists committed to improving oral and dental health in the elderly. Through non-government organisation funding this group of dentists has managed to secure sufficient startup capital to build a fully functional dental clinic at the Sir Joseph Montefiore Home in Randwick. The Dental Clinic is in the process of engaging a full-time dental hygienist to assist the dentists in providing routine dental care; however, the dental hygienist's main role will be in providing in-house oral health and dental education for the staff, residents, families and carers. Regular ward rounds will be conducted by the hygienist and any adverse oral conditions brought to the attention of the dentists. The Dental Clinic will also work closely with administration to encourage comprehensive oral health assessments for prospective residents. It is hoped to show, through aged care research, that it is possible to maintain an acceptable level of oral health in aged care residents and demonstrate that proactive oral health and dental management has a significant health benefit for the elderly and will improve quality of life. The groundbreaking project is an excellent model for the way in which oral health is managed for older Australians.

Concurrently Dr Clive Rodgers has developed a training course on oral health for carers. The course has been accredited in West Australia through TAFE. It is hoped that the course will gain approval in NSW and be delivered as a trial through Randwick TAFE

FURTHER REFERENCES

http://www.cotaover50s.org.au/e107_images/generic/letter_to_editor.jpg (Dr John Fricker's letter to Editor of ADA).

http://www.cotaover50s.org.au/e107_files/COTA_documents/publications/media_releases/national_dental_health_proposal.pdf (letter to Senator Bob McMullen)

For further information contact Dr Geoffrey Bird; 0409 705 951
This document is available on: www.cotaover50s.org.au – refer "Dental".