



The Guide to Community Preventive Services: Interventions to Promote Oral Health

Recommendations and findings regarding two interventions to promote oral health are provided in this fact sheet. They come from the *Guide to Community Preventive Services (Community Guide)* developed by the Task Force on Community Preventive Services (Task Force). With oversight from the Task Force, a team of experts led or supported by *Community Guide* scientists conducted a systematic review to evaluate scientific evidence and provide recommendations to policy makers on these interventions.

BACKGROUND INFORMATION

- Tooth decay and dental caries (cavities) are chronic conditions and becomes more prevalent with age.
- Children and adolescents living in poverty suffer tooth decay twice as much as their more affluent peers.¹
- Over half of children aged 5-9 have had at least one cavity or filling.²
- Blacks, non-Hispanics, and Mexican Americans aged 35-44 years with less than a high school education experience untreated tooth decay nearly three times that of adults with at least some college education.³
- Annually in the U.S., there are 34,000 cases of oral and pharyngeal cancers and 8,000 deaths result from oral and pharyngeal cancers.⁴
- Tobacco and alcohol use are major risk factors, and men are twice as likely to be diagnosed with oral cancer as women.⁵

SUMMARY OF TASK FORCE RECOMMENDATIONS AND FINDINGS

*Recommended Interventions Based on Strong Evidence**

Intervention	Number of Studies that Qualified for Review	Selected Results	Community Guide Resources
Community water fluoridation	21	Median decrease of 29.1% in tooth decay among children ages 4-17 years when compared with control groups (21 study arms)	www.thecommunityguide.org/oral/fluoridation.html
School-based sealant delivery programs	10	Median 60% decrease in cavities among children ages 6-17 (10 studies)	www.thecommunityguide.org/oral/schoolsealants.html

*The categories of “strong” and “sufficient” evidence reflect the Task Force’s degree of confidence that an intervention has beneficial effects. They do not directly relate to the expected magnitude of benefits. The categorization is based on several factors, such as: study design, number of studies, and consistency of the effect across studies.

*Interventions with Insufficient Evidence to Determine Effectiveness***



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Intervention	Number of Studies that Qualified for Review	Selected Results	Community Guide Resources
Statewide or community-wide sealant promotion	1	Limitations in study design and execution	www.thecommunityguide.org/oral/statewidesealants.html

**This finding does not mean that the intervention does not work. It means that when the review was conducted, there was not enough research available to determine whether or not the intervention works.

Online Resources

- The *Guide to Community Preventive Services*: www.thecommunityguide.org
- CDC, Division of Oral Health: www.cdc.gov/OralHealth/index.htm
- NIH: National Institute of Dental and Craniofacial Research: www.nidcr.nih.gov
- American Dental Association: www.ada.org

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¹ Centers for Disease Control Children's Oral Health http://www.cdc.gov/OralHealth/publications/factsheets/sgr2000_fs3.htm

² Ibid

³ CDC Oral Health Disparities http://www.cdc.gov/OralHealth/oral_health_disparities.htm

⁴ CDC *Community Guide* www.thecommunityguide.org

⁵ Ibid