

Perceived vs Actual Oral Health Status of Maltese School Children

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#PHSymposium17

Data Collection

- Stratified random sampling, all types of schools, Malta and Gozo
- n= 603 **12** year olds part of National Oral Health Survey
- n=367 **8** year olds part of COSI survey
- All children included in the study were given:
 - a full mouth examination
 - a questionnaire sent home to parents (**8 year olds - 74.1%** response rate) or administered to the child (**12 year olds – 99.3%** response rate)

Data Assessment

- Perceived Health of teeth assessed by a Likert scale with 6 categories ranging from Excellent to Very Poor
- Actual Health for decay assessed by DMFT (decayed, missing, filled permanent teeth) and subdivided into categories to match the perceived health Likert scale.

Data Assessment

- Perceived Health of gums assessed by a Likert scale with 6 categories ranging from Excellent to Very Poor
- Actual Health for periodontal health assessed by scoring:
 - presence of plaque and calculus in 8 year olds
 - presence of plaque, calculus, bleeding or inflamed gingivae on 6 predetermined tooth surfaces in 12 year olds

The resulting data was then subdivided into categories to match the perceived health Likert scale

Data Analysis

- Data analysed using SPSS by Dr Neville Calleja, Department of Health Information and Research

Dental Caries

8 year olds

DMFT 1

lesions affecting both enamel and dentine

DMFT 0.21

lesions affecting dentine only (requiring Rx)

53.4%

caries free when considering both enamel and dentine lesions

57.5%

caries free when considering dentine lesions only

Dental Caries

12 year olds

DMFT 2.3

lesions affecting both enamel and dentine

DMFT 0.74

lesions affecting dentine only (requiring Rx)

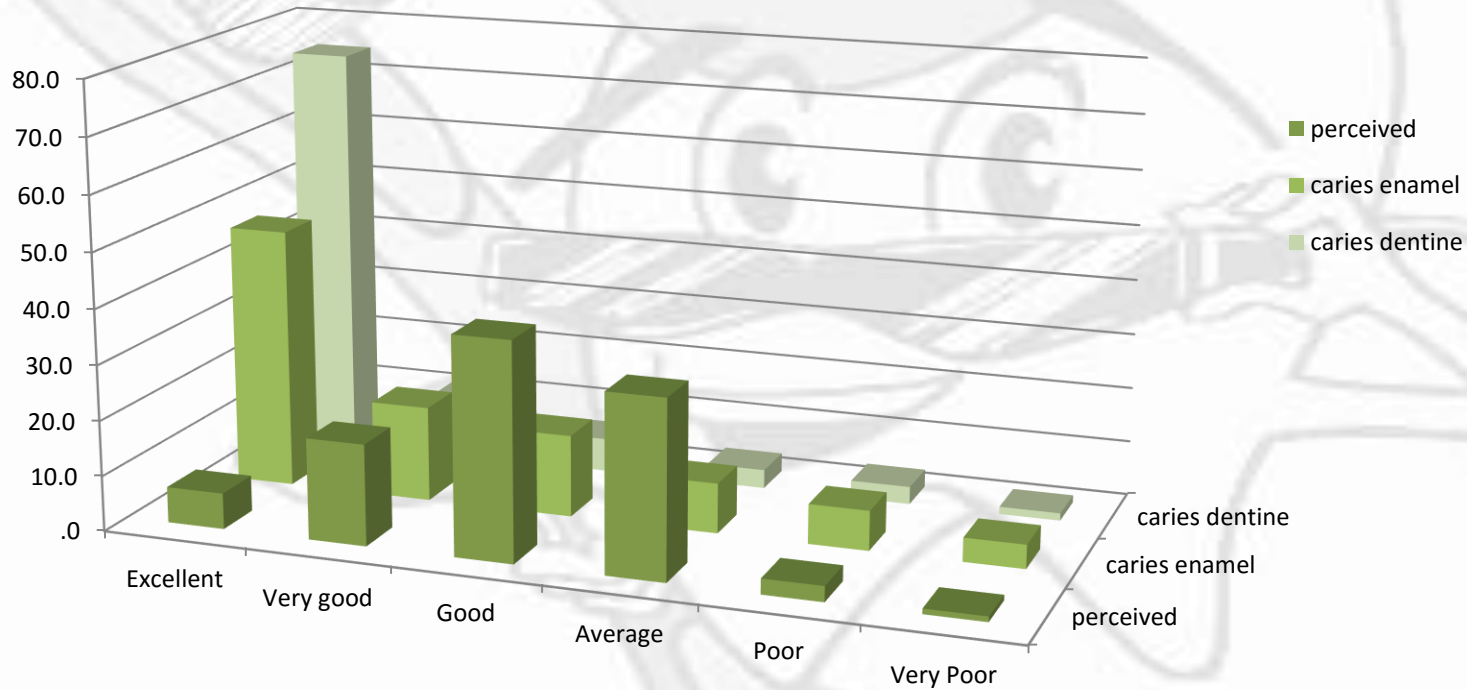
34.5%

caries free when considering both enamel and dentine lesions

67.8%

caries free when considering dentine lesions only

Perceived vs Actual Dental Health



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Perceived vs Actual Dental Health

- Perceived health of teeth and both caries in enamel and caries in dentine are highly correlated **p value of .000**

Periodontal Health

8 year olds

Mean of **1.2** teeth were scored for presence of plaque

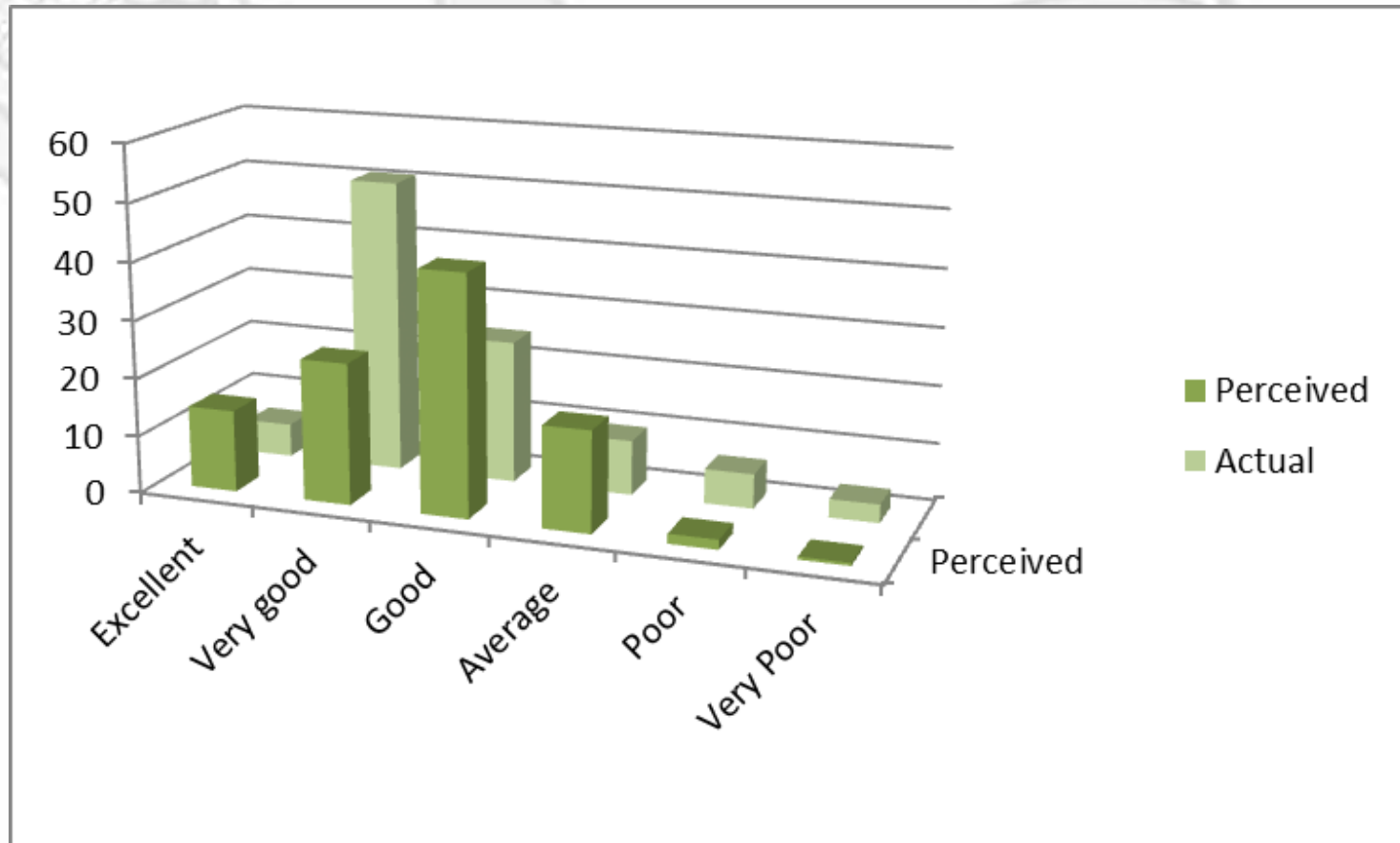
Mean of **0.25** teeth were scored for calculus

Overall mean of **1.45** teeth scored for these early markers for periodontal disease

12 year olds

Mean of **15 out of 48** surfaces examined scored for plaque, calculus, bleeding or inflamed gingivae

Perceived vs Actual Periodontal Health



Perceived vs Actual Periodontal Health

A large, faint cartoon illustration of a tooth character with a face, arms, and legs. The character is holding a dental mirror in its right hand and a toothbrush in its left hand. The character has a friendly expression with large eyes and a slight smile.

- Perceived health of gums and actual periodontal health are highly correlated –
p value of .014

Perceived vs Actual Periodontal Health

Further analysis for correlations gave:

p value of **0.002** for perceived health and level of education of father – significant correlation

p value of **0.088** for actual health and level of education of father – no significant correlation, but could possibly be correlated if the study had more power with a larger sample size.

Limitations

74.1% response rate in questionnaires for 8 year olds

Questionnaire filled in by parents – possible bias issues

Narrow age range – further analysis of other age groups that are part of the National Oral Health Survey should give a wider view

Conclusion

Very significant correlation between perceived and actual oral health in these two age groups.

Further investigation required as to:

Whether service use reflects this pattern

Whether perception and actual oral health are also correlated in older age groups in the population

**Thank you for your attention.
Enjoy your active networking break!**

