



Third Grade Oral Health Screening Survey

2017-2018

Introduction

Oral health is critical to overall health and well-being. Dental disease prevention efforts are important for maintaining good oral health in children. If dental disease is left untreated, the pain, discomfort and potential infection can lead to problems in eating, speaking, and learning.¹

The Texas Department of State Health Services (DSHS) Oral Health Program (OHP) conducts a school-based Basic Screening Survey (BSS) every five years to collect oral health data in a way that is consistent with national standards. This consistency enables comparisons of Texas oral health data to national goals or other states that may also use the BSS.

This data brief reports the results of the oral health screening survey of Texas third grade schoolchildren, conducted during the 2017-2018 school year.

Methods

DSHS conducted an open-mouth oral health screening survey of third grade schoolchildren during the 2017-2018 school years. A randomized sample of 140 public elementary schools was selected to yield data for Texas and each of its 8 public health regions. Approximately 4,630 schoolchildren were screened.

With consent from parents, schoolchildren were screened by a trained team of dental hygienists and dentists. Four indicators of oral health were measured: history of tooth decay (cavities, fillings, crowns or teeth missing due to dental disease), untreated tooth decay, the presence of dental sealants, and early and urgent treatment needs.

The consent form asked parents questions about getting dental care for their child, such as how recently their child had been to a dentist and if they had dental insurance.

Other data collected on each child were race, ethnicity, and enrollment in the Free and Reduced Lunch Program (as an estimate of family income).



Children were classified by whether they lived in a border/rural, border/urban, non-border/rural, or non-border/urban county. These data were collected so disparities in oral health status and access to dental care across different geographic locations across Texas could be studied.

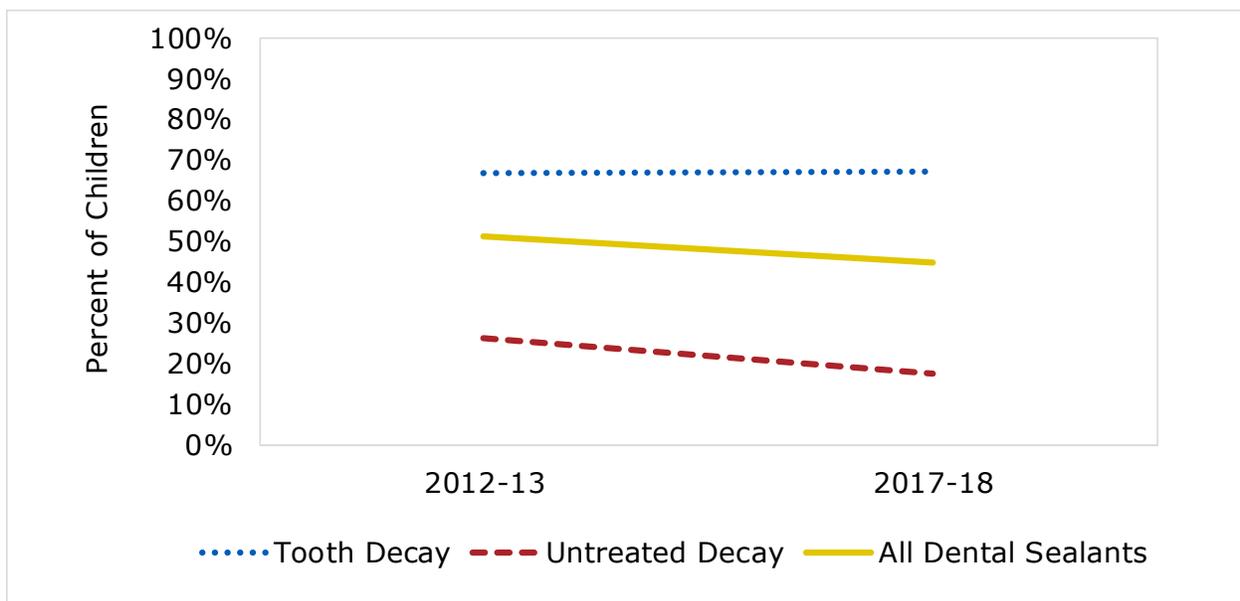
For more information, please contact the Texas Oral Health Surveillance Program at (512) 776-7323 or visit our website at dshs.texas.gov/dental

Results

This section compares the results of the 2017-2018 screening survey to findings from the previous survey and compares recent results to national targets.

Figure 1 shows how the results of the 2017-2018 survey compare to those from similar surveys conducted by the Texas Department of State Health Services since 2012. The percentage of children with a history of tooth decay remains relatively consistent across the two survey time periods. However, the percentage of children with untreated cavities and dental sealants decreases significantly from 2012-2013 to 2017-2018.

Figure 1: Oral Health Indicators for Texas Third Grade Schoolchildren, 2012-2018



Differences in untreated decay and sealant prevalence continue to be statistically significant from 2012-2013 to 2017-2018.



Table 1 compares the results of this survey with the National Healthy People 2020 Objectives. The percentage of third grade schoolchildren in Texas with untreated cavities is better than the national target, as are the percentage of children with dental sealants and who have visited a dentist in the previous year. Texas has yet to meet the national target for the percentage of children with a history of tooth decay.

Table 1: Comparison of 2017-2018 Texas Survey Results to National Targets for 2020²

	2017-18 Survey	National Targets	Target Met?
Percent of children with history of tooth decay	67.1	49.0	No
Percent of children with untreated cavities	17.5	25.9	Yes
Percent of children with one or more dental sealants	41.4	28.1	Yes
Percent of children who visited the dentist within the past year	75.1	49.0	Yes

Overall Findings

Even though tooth decay is preventable, 67 percent of Texas schoolchildren had a history of tooth decay in their primary (baby teeth) or permanent teeth. This means they either had a filling or crown, cavity that had not yet been treated, or tooth that had been extracted (pulled) due to decay. Additionally, 17.5 percent had untreated tooth decay.

14.2 percent and 3.1 percent of third grade children in Texas, respectively, had early and urgent treatment needs. Early treatment needs indicate untreated decay, but no pain or infection, requiring a dental visit within several weeks. Urgent treatment needs indicate the need for care within 24-48 hours because of signs or symptoms that include pain, infection, or swelling in the mouth or teeth.

Additionally, 45 percent of Texas schoolchildren had dental sealants. 41.4 percent had a dental sealant on at least one permanent (adult) molar. A dental sealant prevents the most common type of tooth decay seen in children today – decay on the biting surfaces of the back teeth.



References

1. World Health Organization. World Oral Health Report 2003. Published 2003. https://www.who.int/oral_health/publications/world-oral-health-report-2003/en/ Accessed Jul 2018.
2. Healthy People 2020. US Department of Health and Human Services. <https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health>. Accessed 7/6/18.