

ORAL HEALTH AND LIFE SKILLS IN SOCIETY

GUEST EDITORIAL

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The number of adults in NSW with their natural teeth is increasing; but, at the same time, so is the number of people with periodontal disease. Recent findings that pregnancy, diabetes and cardio-vascular disease may be associated with periodontal diseases represent the beginning of a new era in oral health awareness. As the number of elderly people in the community increases, the oral health of the general population becomes more important. Medication usage is expected to rise with this increase in the elderly population, and many medications have a direct or indirect effect on oral health. These topics were introduced in the March issue of the NSW Public Health Bulletin.

This issue—the second of four highlighting both the relationship between oral health and general health and the potential public health consequences of poor oral health—examines the contribution of oral diseases to general health at various stages in life.

While historically oral health has not been prominent within the health system, changes are afoot.¹ The NSW Department of Health has noted promising developments for the collection of oral health data.¹ This year the NSW Health Survey will focus on the health of children and older adults in NSW, and questions on oral health will be included. Such data will assist in the development of robust oral health policies.

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For too long, dentistry has sought to influence health planning by stressing that oral diseases, particularly caries and periodontal diseases, can have a major effect in a few systemic illnesses. It is time to review this approach and stress to those involved in planning for the health of the population that *all* systemic illnesses can have oral health manifestations, and that oral health itself may be directly involved in the causality of prevalent chronic conditions such as cardiovascular disease. Further, a healthy mouth contributes to the day-to-day lifestyle of all residents of NSW; therefore, we need to ensure that oral health becomes a recognised and familiar part of general health and well-being.

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Submission of articles

Articles, news and comments should be 1000 words or less in length and include a summary of the key points to be made in the first paragraph. References should be set out in the Vancouver style, described in the *New England Journal of Medicine*, 1997; 336: 309–315. Send submitted articles on paper and in electronic form, either on disc (Word for Windows is preferred), or by email. The article must be accompanied by a letter signed by all authors. Full instructions for authors are available on request from the editor.

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This issue of the *Bulletin* seeks to emphasise this by examining oral health at varying stages of our lives and its relationship with general health. For our infant population, the issue of child neglect will be illuminated by its relationship with rapid early-onset dental caries. Inappropriate nutrition and eating disorders are particular problems encountered by adolescents and young adults. The oral health implications of these disorders are potentially significant and contribute to morbidity. The adolescent who is already burdened by low self-esteem can find the damage caused to their teeth by their poor oral health a further handicap in coping with daily life. The importance of primary prevention, particularly that of reducing alcohol intake and smoking cessation—a risk factors for so many illnesses—is stressed.

The next issue in this series will continue to focus on the relationship between oral and general health by considering the oral health needs of the elderly, oral cancer, and the economic and workforce issues that affect poor oral health.

REFERENCES

1. Jorm L. Surveillance of child health in NSW: Status, gaps and developments. *NSW Public Health Bulletin* 1998; 9 (6 & 7): 73–75. ☒

The Public Health Bulletin wishes to acknowledge the work of the oral health editorial committee in producing this series on oral health. Members of the committee are:

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