

ORAL HEALTH NEVADA NEWSLETTER



Vision: Empowering All Nevadans to have the best oral health possible.

Summer 2016

Oral Health Nevada Inc. is a 501(c)3 not-for-profit charitable organization whose mission is to improve the oral health of all Nevadans - especially those who are the most vulnerable, by expanding access to affordable preventive and restorative services, promoting oral health education, and expanding communication and support through diverse partnerships.
www.oralhealthnevada.com

Children Consuming Sports Drinks Unnecessarily

A high proportion of 12-14 year olds are regularly consuming sports drinks socially, increasing their risk of obesity and tooth erosion, concludes a Cardiff University School of Dentistry survey. Published in the *British Dental Journal*, the survey looked at 160 children in four schools across South Wales and concluded that children are attracted to sports drinks because of their sweet taste, low price, and availability, with most parents and children not aware that sports drinks are not intended for consumption by children.

Half of the children surveyed claimed to drink sports drinks socially and most (80%) purchased them in local shops. The majority (90%) also claimed that taste was a factor and only 18% claimed to drink them because of the perceived performance enhancing effect. Price was one of the top three recorded reasons for purchase and, of particular concern, 26% of children also cited leisure centers as purchase sources.

Maria Morgan, senior lecturer in dental public health at Cardiff University, said: "The purpose of sports drinks is [sic] being misunderstood and this study clearly shows evidence of high school age children being attracted to these high sugar and low pH level drinks, leading to an increased risk of dental cavities, enamel erosion and obesity.

"Dental health professionals should be aware of the popularity of sports drinks with children when giving health education or advice or designing health promotion initiatives."

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A STATE OF DECAY

ARE OLDER AMERICANS COMING OF AGE WITHOUT ORAL HEALTHCARE?

Growing Population:

74M
older adults
by 2030¹

From 2008 to 2010:

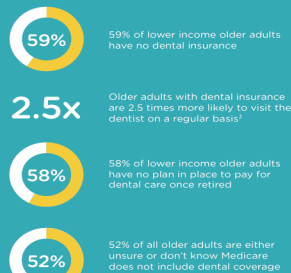
4M ER VISITS
involved a dental condition²

Hospital Treatments:

10x
more expensive than
routine care³

Maintaining good oral health as an older adult is a daily challenge, and one which may be out of their control to address because of barriers such as...

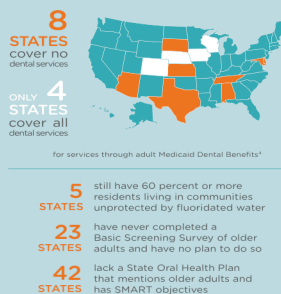
National: Lack of Coverage



National: Recommendations

- 1 Support policies that allow older adults to live healthy & independently, such as the Older Americans Act
- 2 Support policies that recognize caregivers, such as the RAISE Family Caregivers Act
- 3 Advocate for financially viable Medicare Dental Benefits

State: Inadequate Policies



State: Recommendations

- 1 Establish or reinstate dental benefits for older adults in Medicaid
- 2 Sustain or advocate for Community Water Fluoridation
- 3 Include specific objectives for older adults in State Oral Health Plans
- 4 Develop surveillance of older adults' oral health status through Basic Screening Surveys

Data and recommendations derived from Oral Health America's 2015 Policy Agenda. Full report available at www.oralhealthamerica.org.
1. US Census Bureau, (2010). Population Division, Table 9. Projections of the Population by Sex and Age for the United States, 2010 to 2030.
2. Atlanta, Georgia: Emory University, et al. (2010). Hospital-based Emergency Department Visits Involving Dental.

toothwisdom.org

On page 4, read more about "A State of Decay" and how Nevada is ranked in the US for policies and programs supporting the oral health of our older adults.

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Children Consuming Sports Drinks Unnecessarily

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The Faculty of Sport and Exercise Medicine (FSEM) is calling for tighter regulation around the price, availability and marketing of sports drinks to children, especially surrounding the school area, to safeguard general and dental health.

Dr. Paul D Jackson, President of the FSEM UK, said: "The proportion of children in this study who consume high carbohydrate drinks, which are designed for sport, in a recreational non-sporting context is of concern.

"Sports drinks are intended for athletes taking part in endurance and intense sporting events, they are also connected with tooth decay in athletes and should be used following the advice of dental and healthcare teams dedicated to looking after athletes. Water or milk is sufficient enough to hydrate active children, high sugar sports drinks are unnecessary for children and most adults."

Russ Ladwa, chair of the British Dental Association's Health and Science Committee, added: "The rise of sports drinks as just another soft drink option among children is a real cause for concern, and both parents and government must take note. They are laden with acids and sugars, and could be behind the decay problems we're now seeing among top footballers.

"Sports drinks are rarely a healthy choice, and marketing them to the general population, and young people in particular, is grossly irresponsible. Elite athletes might have reason to use them, but for almost everyone else they represent a real risk to both their oral and their general health."

The survey also concluded that there is particular confusion over the definition of a sports drink versus an energy drink. However, from a dental and wider health perspective, these two drinks have similar detrimental effects due to their high sugar content and low pH.

In supermarkets and shops, sports drinks are often sold alongside other sugar sweetened beverages. This is misleading children and parents by indicating that they are meant for use by everyone.

"Sports drinks are rarely a health choice, and marketing them to the general population, and young people in particular, is grossly irresponsible"

Article originally published online June 24, 2016: A survey of sports drinks consumption among adolescents, D. Broughton, R. M. Fairchild & M. Z. Morgan, *British Dental Journal*, doi:10.1038/sj.bdj.2016.449.

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What's a School-Based Oral Health Program?

Tooth decay is the most common chronic disease in childhood and yet, it is also 100% preventable. For many children and youth – especially those that are low income, uninsured or live in rural areas, visiting a dental professional does not occur regularly. Unfortunately, many see the dentist for pain and infections rather than for preventive care like check-ups, fluoride and dental sealants.

For many children, participating in oral health programs hosted by their school is the only way that they regularly receive dental care. School-based oral health programs offer services from dental screenings and education to preventive care (cleanings, fluoride and sealants) to treating tooth decay with fillings and extractions. Dental hygienists – the oral health professionals with expertise in preventing dental disease, manage many school-based oral health programs. If dental treatment is not offered in the school, the dental hygienist works with the school nurse and local dentists and community health centers to assist the child and their family find low cost dental care. Dental care is only provided if the parent/guardian provides written permission.

Poor oral health leads to low self-esteem and problems with growth and development, and poor school performance. In fact, more than 51 million school hours are lost each year due to dental related pain and treatment visits. This coming school year, check with your child's school nurse to see if they will be hosting a school-based oral health program during the academic year and ask for a permission slip.

What are dental sealants?

Sealants are a thin plastic material brushed on the pits and fissures of the chewing or biting surface of teeth to prevent tooth decay. Sealants may also stop the growth of tooth decay and prevent the need for expensive fillings.



FDA Rules on Regulation of E-Cigarettes – No Sales to Children and Youth

On May 5, 2016, the Food and Drug Administration (FDA) finalized a rule extending its authority to ALL tobacco products, including e-cigarettes, cigars, hookah tobacco and pipe tobacco. While cigarette smoking among youth has dropped, their use of other nicotine products like e-cigarettes has risen dramatically. More than 16% of high school students and 5.3% of middle school students used e-cigarettes in 2015.

The new rule also prohibits the sale of e-cigarettes, hookah tobacco and cigars to people under the age 18 years and requires age verification with photo identification. Previously there was no rule against the sale of e-cigarettes, hookah tobacco and cigar products to minors. It is hoped that these new rules will prevent misleading claims by tobacco manufacturers. It will also allow the FDA to evaluate product design, ingredients, and health risks.

For more information on the use of e-cigarettes among youth go to:
<https://www.tobaccofreekids.org/research/factsheets/pdf/0380.pdf>

~ A STATE OF DECAY ~ THE ORAL HEALTH OF OLDER AMERICANS

This spring, Oral Health America released “A State of Decay,” a follow-up to its 2013 report of the same name. The report examines what the nation as a whole and what each state are doing to secure oral health for our older adults (those 65 years and older). With research demonstrating the impact that poor oral health has on general health and well being, it’s important to address the needs of older adults. Data shows that many factors impact the oral health of this population including their access to community water fluoridation, finances and transportation to access regular dental care, and the lack of dental insurance. Also, few states have data on the oral health of older adults to support policies that would make positive changes in their accessing dental care.



The report ranked Nevada 38th out of the 50 states - in other words “poor.” Factors examined were edentulism (percent of older adults with no natural teeth), adult Medicaid dental benefits, water fluoridation, a state oral health plan that includes older adults, and oral health surveillance of older adults using the basic screening survey. The report also examined the consumption of fruits and vegetables as a gauge for the impact that poor oral health has on nutrition.

To read the full State of Decay 2016 Report go to: <http://toothwisdom.org/pages/a-state-of-decay>

**For more information about Oral Health Nevada, Inc. visit our website
www.OralHealthNevada.com**

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