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Tegwyn Brickhouse

Virginia Commonwealth University, thbrickhouse@vcu.edu

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VCU L. Douglas Wilder School of Government and Public Affairs

Center for Public Policy

Translational Research Fellows Issue Brief

Oral Health Impacts Educational Success

Overview/Issue: Children with poor oral health experience significant pain, which can:

- affect their eating habits and growth,
- make them more likely to get sick and miss school,
- undermine their ability to concentrate in school.

If we want children to succeed in school, we need to understand how learning and oral health are linked. Untreated tooth decay can lead to pain and infection, missed school days, and problems with eating and speaking, making it costly for families and state and local governments.

Key Facts

- Tooth decay is the most common chronic childhood disease.^[1]
- **In Virginia, nearly half of all children have experienced tooth decay by the time they reach third grade.**
- Dental sealants applied in school-based programs reduce tooth decay by as much as 60 percent.^[2]
- Children with poor oral health status were nearly 4 times more likely than counterparts with good oral health to miss school as a result of dental pain. (Absences caused by pain were associated with poorer school performance, though absences for routine care were not).^[3]
- In both North Carolina and California studies, lower oral health increased the likelihood of poor academic performance by more than 50%.^{[4], [5]}
- Emergency room (ER) visits for preventable dental conditions cost \$1.6 billion in 2012, and the cost of a tooth extraction can increase nearly 10 times when performed in an emergency room instead of a dental office.^[6]

Policy Recommendations:

1. Mandate a dental exam prior to kindergarten enrollment.
2. Report exam results to school-based health services.
3. Support school-centered, cross-sector collaborative programs that deliver integrated oral health and primary care services.



Dr. Tegwyn Brickhouse
D.D.S., Ph.D., Associate Professor, Director Oral Health Research Core, VCU School of Dentistry at VCU.

thbrickhouse@vcu.edu
804-827-2699

Research interests: Oral health disparities, Pediatric oral health performance measures; Utilization of dental services in public programs; Oral Health integration.

TOOTH DECAY

Tooth decay is the most common chronic disease among children.



More than half of all children 6-8 have experienced tooth decay¹

Tooth decay disproportionately impacts children from low-income families.

(Views are those of individual faculty member and not lobbying positions of VCU as a public university.)

**L. Douglas Wilder School of Government and Public Affairs
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Box 843089 - 921 West Franklin St., Richmond, VA 23284 - (804) 827-2603 - oppo@vcu.edu

4. Establish a tele-dentistry program providing exams, cleanings, fluoride, and sealants.

Oral Health: More than just personal responsibility

Improving children's oral health status may be a vehicle to enhancing their educational success.

Growing evidence links oral disease to overall health and quality of life.^[3]

Prevention, brushing and flossing are not enough. Regular dental visits, optimal fluoride levels in the water, water intake, and access to new breakthrough treatments like fluoride varnish and sealants, are critical to good oral health.



Without actions to prevent dental problems, children with poor oral health may be more susceptible to all kinds of disease, such as infection, poor speech, diminished growth, and complications with chronic diseases in adulthood.

Conclusions/Implications:

Invest in integration of dental services into school-based health and wellness programs for children and families at high-risk schools – this has the potential to improve children's education success and lower overall health care costs by moving dental treatment out of emergency rooms and reducing opioid use for untreated dental infections.

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