

Sugar gums

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Diabetic patients are at significant risk of developing periodontal disease. This project focused on the population of Menindee in Far West NSW, a remote community with medical and dental services provided through regular outreach clinics. A clinical Review of patients' medical history indicated high HbA1c levels in diabetic patients. A multidisciplinary approach was taken to reduce HbA1c levels in patients with levels greater than 7, by providing oral health education, dental treatment, educational posters and distributing home care packages. Results achieved included a reduction in HbA1c in 66% of patients, with a significant reduction of 0.5 or more in 22% of participants. More efficient use of workforce and reduced public dental waitlists were also achieved. Periodontal disease is a chronic inflammatory disease, which results in the loss of supporting structures of the teeth, through the formation of pathological pockets around the diseased teeth. Periodontal disease is responsible for a substantial proportion of tooth loss in adults. Periodontitis is recognised as the sixth complication of diabetes (Harold Loe 1993).

Generally, maintenance of diabetic patients HbA1c levels is a good indication of the stability of the disease. Diabetic patients are referred to a number of Specialists but are not routinely referred for oral health checks. Referral to oral health services provides an opportunity to maintain glycated haemoglobin levels, decrease acute exacerbations of the Diabetes, and maintain patient's teeth for longer. Improvements in oral health and the maintenance of a patient's own dentition enables better nutrition and the better mastication of food.

This project was established to encourage people with Diabetes to make healthy choices, by educating individuals' on the importance of oral health and the impact it has on blood sugar levels, specifically targeting high risks groups such as the elderly, Aboriginal people and people with chronic disease. Aboriginal people are 3–4 times more likely to have diabetes (Diabetes Australia 2013) and 1.3 times more likely to have periodontal disease (Roberts-Thomson KF 2007), this project aims at closing those gaps.

The project supports individuals, families and communities to make healthy lifestyle choices, by targeting the public health priorities of both Diabetes and oral health, by improving outcomes for risk groups and by decreasing the risk of acute diabetic episodes. An added bonus is the positive impact it has on public dental waitlists.