



# WEST VIRGINIA OLDER ADULT/SENIOR ORAL HEALTH SURVEILLANCE 2012

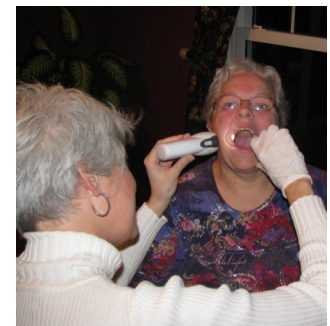
## Baseline Data Collection to Strengthen the Oral Health of West Virginia's Older Adult Population

MARSHALL UNIVERSITY & WV DEPARTMENT OF HEALTH AND HUMAN RESOURCES, BUREAU FOR  
PUBLIC HEALTH, OFFICE OF MATERNAL, CHILD & FAMILY HEALTH, ORAL HEALTH PROGRAM

West Virginia is estimated to have the third highest median age in the nation at 40.3%. The U.S. Census Bureau indicates that by the year 2025, individuals age sixty and older will represent more than 30% of the State's population. For older people, the State is ranked second in the nation with 15% of the population being age sixty-five and older. In addition to current senior West Virginians, the State has almost 600,000 baby boomers that are now beginning to celebrate their sixtieth birthday. Between 1990 and 2000, the number of people living in their community, age ninety and older, grew by 413%, or from 2,072 to 10,645 individuals, placing West Virginia on a trajectory to becoming one of the grayest entities in both the nation and world.<sup>1</sup>

The importance of oral health for older adults cannot be overstated. It is an essential part of healthy aging and disease prevention. Oral health awareness, education and access to services — especially for low-income seniors — is greatly needed. Seniors nationwide lack access to dental care. Most retirees no longer have dental insurance and Medicare does not offer a dental benefit. According to WV Senior Services, 34.3% of West Virginia's older adults live on less than \$15,000 annually, and 12.1% live at or below the federal poverty level. Choosing to pay for dental care out of pocket versus paying for medications may not be realistic. Without oral health care and treatment, adults and seniors are at risk for tooth decay, gum disease, denture problems, xerostomia (dry mouth) and oral cancer, as well as poor nutrition and chronic illnesses. Poor oral health has been linked to: diabetes, heart disease, stroke, pneumonia, cardiovascular disease, and Alzheimer's disease.<sup>2</sup>

In the fall of 2012, the Bureau for Public Health, Office of Maternal, Child and Family Health, Oral Health Program, conducted its very first oral health surveillance on this high risk population. The target population examined was those sometimes referred to as "well elderly", adults living independently and seeking services at a congregate meal site center. A random convenience sampling strata of the meal sites was used to assure a representative sample of the entire State. Trained, calibrated dental professionals conducted screenings at congregate meal sites in 15 counties.



### Demographics

400 Individuals Screened

Average Age 73  
66 % (262) Females  
98% (390) Caucasian

Age Range 50-95 years  
34% (138) Males  
2% (10) Non-White



## West Virginia's oral health survey provides essential information about the oral health of senior West Virginians

### Summary of Findings

Prevalence of untreated decay: **61 (27%)**

Prevalence of need for dental treatment (early/urgent): **83 (21%)**

Prevalence of completely edentulous (those without any natural teeth): **177 (44%)**

Those with some type of dental coverage: **18%** vs **96%** with some type of medical coverage

Those who have not visited a dentist in over 5 years: **158 (40%)**

Of those **40%** not visiting a dentist in over 5 years, **91%** had NO dental insurance

Of the **201 (50%)** reporting they have a dentist that they usually go to for care and advice, **145 (72%)** had been seen in the past 12 months and **25 (17%)** had a need for dental treatment

Of the **165 (41%)** that noted they had visited a dentist in the last 12 months, the main reason for the visit was:

- Check up, exam, cleaning: **91 (55%)**
- Pain, something bothering them, something was wrong: **42 (26%)**

Could not access care when needed over the past 12 months	33 (8)%	Reason that Previous Dental Care Could Not be Secured*	
		Could Not Afford It	n=43
Those utilizing an ER/Urgent Care for dental pain or issues over the past 12 months	3 (<1%)	No Insurance	n=38
Those having dental pain occasionally or very often over the last 12 months	41 (10)%	Other	n=52

\* Participants could select more than one option so percentages are not present



**MARSHALL UNIVERSITY**  
Center for Rural Health

**SCHOOL HEALTH**  
TECHNICAL  
ASSISTANCE  
CENTER



*Improving health, one smile at a time.*  
West Virginia Department of Health and Human Resources

**Special Acknowledgements:** Dr. Kathy Phipps, WV's Regional Area Agency on Aging, Local Congregate Meal Site Staff, and Seniors.

**For more information:** Additional state and national data, please visit <http://www.cdc.gov/oralhealth/index.htm> as data and information change frequently and is updated on a regular basis.

For further information, contact **Bobbi Jo Muto, BS, RDH** at 304.542.9592—[bjmuto.steele@marshall.edu](mailto:bjmuto.steele@marshall.edu)

**References:** 1. Office of the Surgeon General (US). (2003). *A national call to action to promote oral health*. Rockville MD  
2. WV Bureau of Senior Services (WV). (2011). *WV Bureau of Senior Services Annual Report 2011*, Charleston WV