

Oral Health Intervention Improves Quality of Life in Children

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Objectives: To test the validity of a Pediatric Oral-specific Quality of Life (POQoL) questionnaire, we examined responsiveness to intervention in children with early childhood caries (ECC) versus children who were caries free (CF).

Methods: Parents of children attending hospital dental clinics in Washington D.C. and Ohio (N=105, CF=86, ECC=19) completed a 13-item questionnaire in English before a baseline dental appointment and again at six months recall. The questionnaire addressed pain, appearance, physical function (difficulty eating and sleeping), role function (missing school, difficulty paying attention to schoolwork or homework), social function (not wanting to play with friends, smile or talk), and emotional function (feeling angry, upset or worried).

Results: The average age of children was 3.4 years of age in the CF group and 3.8 years of age in the ECC group. At six months, on a scale from 1 to 5 (1=poor, to 5=excellent), the mean parent report of oral health for the CF group decreased (from 3.54 to 3.35, $t=1.74$, $p=0.08$) while ECC reported improvements from 1.00 to 2.68 ($t=-4.59$, $p<0.001$). Differences between groups at 6-months were n.s. Frequencies of dental pain decreased in the ECC group (from 44% to 10%, $P=0.03$), and by six months, there were no significant differences between the ECC and CF groups. For the other questions, responses showed non-significant trends toward oral health improvement for the ECC group at six-month follow-up compared to baseline.

Conclusions: Children with ECC receiving oral health interventions show improvement over time with respect to oral health, oral pain, and perhaps social and psychological well-being.

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