



The Platform for Better Oral Health in Europe - Report of a New Initiative

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Public health practitioners are required to apply their competencies at a range of levels from governmental to small community groups. A recurring theme at BASCD conferences has been the need to influence policy at the highest level if improvements to oral health and better treatment of oral ill-health are to occur. This paper presents a clear example of such dental public health action at a European level. This report outlines the reasons why it is necessary to try to improve oral health within Europe, in general, and the European Union in particular. It goes on to describe how the newly formed Platform for Better Oral Health in Europe is trying to work at a macro level, and bring interested associations, groups and individuals together. Collectively they can then alert European institutions and national governments to oral health problems and promote policies to improve the current situation. It describes the current problems, their resource implications, the objectives of the Platform, its actions so far and its plans for the immediate future. It suggests that, if the problems are to be addressed, it will be necessary for all interested parties to work together at a European level to raise oral health issues higher on the EU agenda.

Key words: *Health promotion, European Union, International cooperation*

What is it?

The Platform for Better Oral Health in Europe is a framework for voluntary cooperation on the promotion of oral health in Europe. Ultimately, it is hoped that all supporting organisations and individuals that support the vision of the Platform will become members and work together to achieve its objectives. Its founder members are the: Association for Dental Education in Europe (ADEE); The Council of European Chief Dental Officers (CECDO); The European Association of Dental Public Health (EADPH).

Sponsorship for the Platform has been provided by Wrigley Oral Healthcare Programs and GlaxoSmithKline Consumer Healthcare. Members of the Platform have met either face-to-face in Brussels or Luxembourg or via telephone conferences. The Secretariat and lobbying advice for the Platform is provided by the Brussels office of Hill+Knowlton Strategies (www.hkstrategies.com).

The Platform's mission statement is: *To promote oral health and the cost effective prevention of oral diseases in Europe. Putting citizen health at the core of their endeavours, the Platform's participants want to join forces in order to build up the European Union (EU) policy momentum on oral health created by the Call to Action on Better Oral Health for Europe, which was handed over to Health Commissioner Dalli by Members of the European Parliament (MEPs) Cristian Buşoi and Thomas Ulmer on 12 September 2010, to move oral health higher on the EU agenda, to strengthen the evidence-based case for EU action and to address the major challenge of oral health inequalities and other social challenges, while positively profiling the role of prevention by routine oral hygiene practices, including the use of fluoride containing toothpaste and mouthwashes, inter-dental cleaning, sugar-free chewing gum and regular dental check-ups.*

Why is it needed?

The answer to this question should be well known to readers of Community Dental Health. In brief it is because although over the last 30 years, there has been a major improvement in the prevalence of dental caries in children and young adults who live in Western Europe and a decline in the percentage of people with no natural teeth, caries remains a problem for many groups of people in eastern Europe and for those from socio-economically deprived groups in all EU member states (Petersen *et al.*, 2005). The cost of maintaining a functional dentition, especially for adults in the second half of their lives who frequently have heavily restored teeth, is rising (Department of Health, 2009). Due to the limitations of periodontal epidemiology (Leroy *et al.*, 2010) it is far from clear whether or not the periodontal health of the European population is improving or not. However, it is clear that the number of diabetics is rising and, that more people are retaining their teeth into their old age. These groups are at greater risk of periodontal breakdown. There appears to have been no improvement in the prevalence of oral cancer (Stewart and Kleihuis, 2003) or, in some Eastern European countries, its early detection.

Resource Implications of Poor Oral Health

Currently, the population of the EU is approximately 500 million and there are over one million members of the oral health care workforce in the EU (CECDO, 2011). In 2000, it was estimated that the cost of payments for oral healthcare and of oral care products such as toothbrushes and paste cost over €54 billion per year in the EU (Widström and Eaton, 2004). This figure must have increased

in the last 12 years. It has been suggested that oral disease is the fourth most expensive disease to treat in most industrialised countries (European Communities, 2007). Much is spent on expensive items of treatment which are frequently the consequence of preventable disease. In the long run, effective prevention and a subsequent improvement in oral health of the population of Europe should save money. In the current economic situation this is attractive to everyone, including the policy makers at European and national level, who are keen to improve the health of the population and, if possible, save money.

The Platform is equally keen to raise awareness of the human costs due to the social burdens of poor oral health and the interaction of systemic diseases and conditions including diabetes, heart and circulatory diseases and the effects of polypharmacy with oral health and vice-versa. The common risk factors for chronic diseases, including chronic oral diseases, have been recognised for some years (Sheiham and Watt, 2000).

It is also recognised that there are major inequalities in general and oral health across the EU and within Member States which are related to structural and wider determinants that influence health and socio-economic status, age and gender and that they have not yet been adequately addressed. The problem is how to help these groups to help themselves to prevent disease through adopting a healthier life-style and being able to seek early help when they develop symptoms. In this context, it is noticeable how a far lower percentage of the population attends a dentist in socio-economically less well developed countries or where there is little or no publically funded dentistry than in those which provide publically subsidised oral health care. An example is the apparent difference between Catalonia (the wealthiest part of Spain) where there is virtually no public funding for oral health care and Belarus, which is less wealthy but where there is still significant public funding for oral health care. In Catalonia in 2006, it was reported that only 35% of the population had visited a dentist (Casals *et al.*, 2007). Whereas in Belarus in 2007 the reported figure for a visit to a dentist was 60% (Tserakhava *et al.*, 2011). In general, such comparisons are difficult because many of the data for oral health in the different EU Member States are either estimates or are collected using different methodologies. As such they cannot be reliably compared or used as a sound basis for policy making.

Objectives of the Platform for Better Oral Health in Europe

Against this background, the objectives of the Platform are:

- To promote oral health and the prevention of oral diseases as one of the fundamental actions for European citizens to stay healthy and benefit from a better quality of life.
- Provide sound advice and recommendations to policymakers for action with regard to EU oral health policy developments.
- Develop the knowledge base and strengthen the evidence-base case for EU action on oral health.

- Address the major oral health challenges of children and adolescents, of an increasing elderly population and of populations with special needs in Europe.
- To work towards the mainstreaming of oral health policies across other EU policies and expand the scope of oral health policy to related issues.

To try to achieve these objectives, the Platform advocates the development of more prominent oral health initiatives and policies at European level, the inclusion of oral health on the agenda of the next Presidencies of the Council of the European Union and Council recommendations to support the strengthening of national oral health policies across Europe. As far as oral health and prevention are concerned, the Platform seeks to agree and define good practices and other appropriate actions to be taken at an EU level. In addition it will develop and disseminate common health promotion materials across Member States, based on a consensus from the major stakeholders and their endorsement by the European institutions. In summary, the Platform's policy is to promote improved oral health amongst all the citizens of the Europe, in so doing it may well promote the concepts of Dental Public Health.

Further tasks will be to raise awareness of the disease burden and the size of oral healthcare costs and to seek improvements in the areas of: oral health data gathering and research, access to oral care, particularly by those who most need it, and to support the advancement of high standards of dental education in Europe.

Actions so Far

During 2011, members of the Platform met with senior officials of the European Commission responsible for public health and research. All stated that it was the first time that anyone had come to talk to them about oral health and that they were surprised to learn of the extent of oral health problems, the size of the EU oral healthcare workforce and the cost of oral healthcare. They also all expressed a willingness to work with the Platform.

A website (www.oralhealthplatform.eu) has been established. Several MEPs including Dr Cristian Buşoi from Romania and Dr Thomas Ulmer from Germany are very supportive of the Platform and have published a report on its activities in the Parliament Magazine (2011), a leading EU political news and information magazine. Support from MEPs, as well as from EC officials, is seen as key to the realisation of the Platform's objectives.

The Platform was created to respond to the *Call to Action for Better Oral Health in Europe* (2010) from several MEPs, which stated:

In order to make progress and reduce the burden and cost of oral diseases across the EU, we call on the European Commission to draw up a specific EU Action Plan on Oral Health that will define the EU's role in promoting dental public health and:

- *to make oral health a priority under the Community Health Action Programmes to help exchange best practice in oral health prevention, to improve data collection, and to reduce the detrimental effects of common risk factors on dental health.*

- to address existing oral health inequalities as part of the implementation of the Strategy for Reducing Health Inequalities in Europe.
- to provide funding under the Research Framework Programmes in order to investigate the future use of innovative approaches in dental prevention and develop effective strategies for a better inclusion of socially and economically disadvantaged populations in dental care.

In response, Commissioner Dalli said that he supported further advocacy efforts to achieve better oral health for Europeans (personal communication).

In 2012, the Platform will continue working to raise awareness of the importance of oral health policies among the Members of the European Parliament and the European Commission, as well as representatives of Ministries of Health across Europe. The Platform is also preparing to celebrate the World Oral Health Day 2012 by holding a conference in Brussels, 5 September 2012, gathering policymakers and specialists across Europe, to facilitate better understanding of these issues by the general public and to foster synergies for action.

Conclusions

From meetings with EC senior officials it is clear that, to date, there have been no concerted efforts at an EU level to bring the problems relevant to dental public health to the attention of the European institutions or to give policymakers an understanding of how and why oral health is an integral part of general health. It seems clear that because of the small size of individual European associations and groups with an interest in improving oral health, they would act more efficiently together. In so doing they can pool their knowledge and resources to try to achieve policy decisions at a European level which will benefit the oral health of the population of Europe.

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