9

Editorial

Advancing the scientific basis of oral health education

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One of the greatest barriers to encouraging and enabling individuals to take greater control over their own health is confusing and sometimes conflicting health messages, occasionally in the media but sometimes from professional sources and advisors. The problem for dental health education had become apparent by the 1970s and was approached in the UK by the Health Education Council who organized a seminar in 1971 to consider the scientific evidence supporting dental health education messages. A further review of the evidence was being planned in 1976 when it was learned that the British Association for the Study of Community Dentistry was also developing a similar approach. This led to a joint initiative aimed at establishing a scientific basis for dental health education to help standardise the advice given to the public and to ensure that such advice was scientifically sound. The initiative took the form of a seminar at which a group of dental scientists actively engaged in research presented position papers on the cause and prevention of periodontal disease and caries to a group of leading experts and authorities in preventive dentistry. These position papers and the discussion that followed were then edited into a final document by Michael Lennon, the present editor of this journal. In 1976 the document was published by the Health Education Council with the title - The Scientific Basis of Dental Health Education, a policy document. It was a slim document with a green cover. Following an introduction by Philip Holloway from the University of Manchester, the second section of the document covered the cause and prevention of periodontal diseases while the third section covered the cause and prevention of dental caries. The summary provided three simple messages - insist on fluoridation, restrict sugar-containing foods and drinks to meal times and clean the teeth and gums thoroughly every day with a fluoride toothpaste. The whole text occupied only 12 pages.

The strength of the original document was that it came from an independent and authoritative source and was based on the proceedings of a consensus meeting of a group of the leading dental experts of the day. As the value of the document became apparent the Heath Education Council commissioned a second edition for which the present author agreed to take responsibility and it appeared in 1982. The document progressed through two further editions until 2004 when BDJ Books took

over the role as publisher, and Catherine Stillman-Lowe joined as co-author, bringing her outstanding expertise in health promotion to enhance the fifth edition of the book now called *The Scientific Basis of Oral Health Education*. The sixth edition appeared on 2009 and it has become the most popular of BDJ Books titles.

Since its inception in 1976, the document has grown to become one of the most widely used and accepted sources of information on oral health, both in the UK and abroad. The scientific evidence on the causes and prevention of oral disease is constantly evolving and new seventh edition published in December 2014 updates the evidence base for the range of topics previously covered (Levine and Stillman-Lowe, 2014). While primarily written for a UK readership, the use of previous editions in many other countries is recognised in this edition by inclusion of information, evidence and opinion from international sources. To the four key messages given in the summary section, a fifth has been added on smoking cessation to highlight the importance of smoking as a risk factor for oral disease. The section on behavioural change, central to the prevention of the main oral diseases, has been expanded. Prominence has been given to the concept of common risk factors that link oral disease with other non-communicable diseases and the importance of this concept in promoting good oral health. The chapter on periodontal disease has been extensively revised with the help of Professors Iain Chapple from the University of Birmingham and Phillip Preshaw from the University of Newcastle and now includes a section on the association with obesity and diabetes, which together with smoking, are now recognised as important risk factors. The prevention of oral cancer, with its poor survival rate remains a priority for dental professionals and the oral cancer chapter has been updated and extended to include a section on the link between the human papilloma virus and oropharyngeal cancer. Finally the reference list has been updated and extended to reflect the latest scientific evidence and opinion. Over the years a range of distinguished colleagues have assisted me as members of an expert advisory panel and the book is a testament to their commitment, however a special debt of gratitude is owed to Professor Aubrey Sheiham of University College London, who was a member of the expert group for the 1976 consensus meeting and ever since has continued to be a resolute supporter and valued advisor for the book. In addition to the new seventh edition a valuable document has now appeared from Public Health England - Delivering better oral health; an evidence-based toolkit for prevention (PHE, 2014). While the latter provides a prescriptive guide for the primary care team, the former provides the scientific basis that underpins that advice, together with evidence on a wider range of topics. These two documents are complimentary and consistent in the information they provide. It is hoped that together they will facilitate the delivery of preventive care to individual patients and at a public health level provide advice to a range of individuals and bodies involved in health education and promotion.

As before, it is hoped that this new edition will be used both in the UK and abroad by dental schools, dental postgraduate deans and directors to help standardise undergraduate and postgraduate teaching and by dental care professionals, whose role within the dental team has developed significantly since 1976. Those involved in general healthcare, such as medical practitioners, school nurses, health visitors, midwives, dieticians and pharmacists also have a vital role to play in oral health promotion, and it is hoped that this publication will be of value to them. Oral health promotion staff in the Salaried Dental Service frequently provide training for people who can influence health in the wider community, such as teachers, child carers and peer educators and they can safely rely on the messages in this book as the basis for their programmes. Finally, it must be recognised that oral health education material is provided by a wide range of agencies, including government and professional bodies, charities, and commercial organisations in the form of both patient education material and for product promotion, much of which is of the highest standard. This too should conform to agreed expert opinion and it is hoped that this publication will be of assistance to these bodies.

Above all, this document is offered in the sincere belief that oral health education is one of our most important responsibilities and must be approached with the same dedication and professional quality standards that are applied to the operative treatment of disease. Only by offering the public consistent and soundly based advice can we hope that health education messages achieve their intended function of enabling individuals to control and improve their own health, as part of a comprehensive programme of national and local public health initiatives designed to tackle the determinants of poor health.

References

Levine, R.S. and Stillman-Lowe, C. (2014): *The Scientific Basis of Oral Health Education, 7th edn.* London: BDJ Books. Public Health England (2014): *Delivering better oral health; an evidence-based toolkit for prevention,* 3rd edn. London: PHE

