



# ORAL HEALTH IN NEW HAMPSHIRE

## DATA BRIEF – JANUARY 2012

### ORAL HEALTH IN NEW HAMPSHIRE

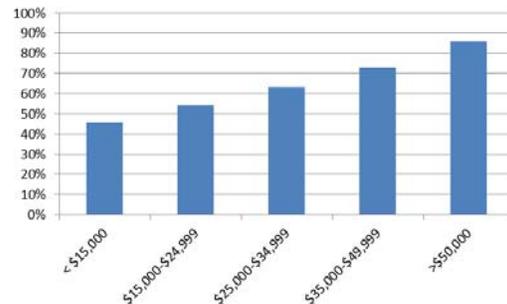
Oral health is a part of general health and is essential to a person’s well being. In recent years, there has been an increasing interest in oral health across the United States. The following is a summary of data gathered by the 2010 New Hampshire Behavioral Risk Factor Surveillance Survey (NH BRFSS) related to oral health. The BRFSS is a telephone survey of non-institutionalized adult New Hampshire residents.

Simultaneously, individuals reporting higher household income were more likely to have seen a dentist in the past year than those reporting lower incomes.

### DENTAL VISITS

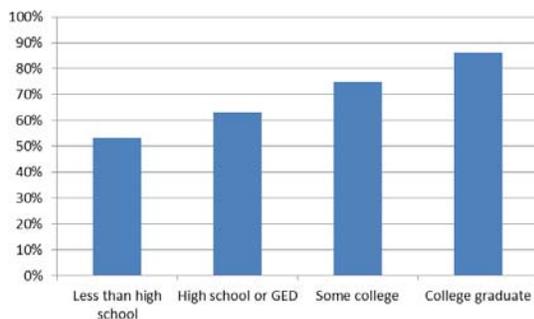
Obtaining dental care on a regular basis is necessary to receive preventive services as well as early treatment of dental disease. Data from the NH BRFSS indicated that 75.7% (95%CI: 74.1-77.3) of adults had visited the dentist during the past year. Among those visiting a dentist, 76.8% (95%CI: 75.1-78.5) had their teeth cleaned. Persons with more years of education were more likely to report a recent visit to a dentist than persons with less education.

### Adults reporting last visit to dentist or dental clinic within past 12 months, NH BRFSS, 2010



Percentages of those visiting a dentist or dental clinic within the past year in each county are shown in the table below.

### Adults reporting last visit to dentist or dental clinic within past 12 months, NH BRFSS, 2010

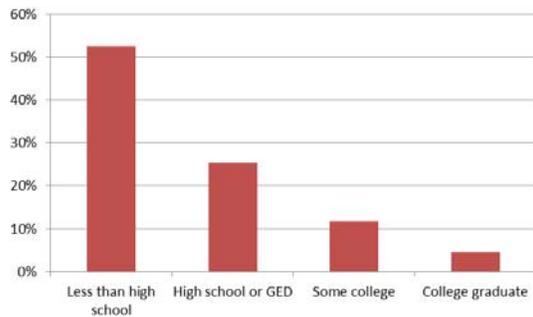


	Percentage	95% CI
Belknap	72.5	66.2-78.8
Carroll	67.8	61.3-74.4
Cheshire	69.8	63.2-76.5
Coos	65.2	58.8-71.6
Grafton	71.5	65.6-77.4
Hillsborough	78.4	75.5-81.3
Merrimack	77.7	72.2-83.3
Rockingham	80.4	77.2-83.7
Strafford	70.4	64.4-76.4
Sullivan	68.7	62.5-74.8
New Hampshire	75.7	74.1-77.3

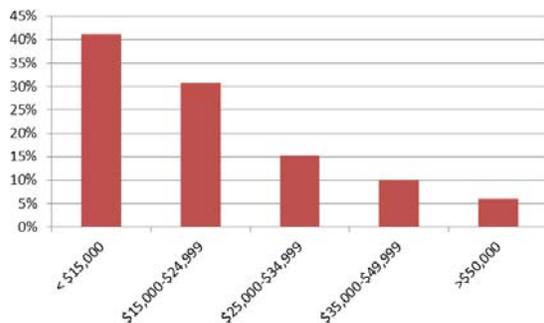
## TOOTH LOSS

Tooth loss, especially edentulism (the loss of all teeth), can reduce daily functioning and a person's self-image. Data from the 2010 BRFSS showed that 17.5% (95%CI: 15.5-19.5) of New Hampshire residents who were 65 years old or older were edentulous. Significant association was observed between tooth loss and both education and income.

### Adults 65 years old and older reporting complete tooth loss, by education, NH BRFSS, 2010



### Adults 65 years old and older reporting complete tooth loss, by income, NH BRFSS, 2010



Percentages of those 65 years old and older reporting complete tooth loss in New Hampshire counties are depicted in the following table.

	Percentage	95% CI
Belknap	17.3	10.9-23.7
Carroll	11.9	6.1-17.6
Cheshire	12.4	6.8-18.1
Coos	27.9	18.7-37.0
Grafton	18.4	11.8-25.0
Hillsborough	21.2	16.6-25.8
Merrimack	16.1	10.6-21.7
Rockingham	14.1	9.6-18.7
Strafford	18.3	11.4-25.2
Sullivan	17.1	9.6-24.7
New Hampshire	17.5	15.5-19.5

## SUMMARY

Data from the 2010 BRFSS<sup>1</sup> demonstrate disparities in oral health by socioeconomic status. Individuals living in households with lower income or those with less education are significantly more likely to report dental disease and less likely to report a recent visit to the dentist or dental clinic. There are differences among New Hampshire counties, though these are generally not statistically significant.

For more information on the data presented, contact the New Hampshire Oral Health Program at:

1 (800) 852-3345 ext. 4535 (within New Hampshire) or (603) 271-4535.

<sup>1</sup> All BRFSS analyses conducted using NEWFINALWT2