Colorado

Reducing the Burden of Oral Diseases by Tracking Diseases and Targeting Programs

Public Health Problem

Cavities have declined in the United States because of preventive strategies such as community water fluoridation, use of fluoride toothpaste and mouth rinses, and application of dental sealants. Despite this progress, dental decay remains a significant problem among all age-groups and is particularly a problem among people with low incomes and some racial and ethnic groups. In Colorado, 62% of third grade children have already had a cavity, and 26% have untreated dental decay.

Program Example

The Colorado Department of Public Health and Environment's Oral Health Program is establishing a surveillance system that will track oral health information on people of all ages in the state. The system is being developed through a cooperative agreement with the CDC. The state has developed a surveillance plan to identify which oral diseases, conditions, and age-groups to track and how often the data will be collected. By collecting data on people's oral health and access to care, Colorado will be able to monitor trends over time and document improvements in oral health among state residents. These data also will allow the state to target the populations most in need of oral health services and direct funds to programs that will reduce disparities and the burden of oral disease in the state. Because much of the data will be represented in the National Oral Health Surveillance System, Colorado will be able to compare state data with national findings. In addition, the Oral Health Program enhanced its Web site to make data on disease levels available to state and local policy makers as well as the public. The program also is producing a document that will describe the status of oral health in Colorado and the economic impact of oral health disparities in the state.

Implications and Impact

The new surveillance system will provide Colorado's Oral Health Program with data to help plan and evaluate the state's primary and secondary prevention programs. This information can be used to engage policy makers, communities, and other stakeholders interested in addressing oral health disparities in the state. These data also will be essential when the state sets priorities for programs to further address the burden of oral disease.