

Caries

YOUNG ADULT - A PERSON AT HIGH CARIES RISK?

Is there a problem?

- Mean DMFT of 3.7 found in 20-24-year-olds in Adelaide in 1999 (DMFT of 12-year-olds in Australia is 0.9);
- 21% of young adults have no caries experience;
- Close to 14% experience a DMFT of 8+.

There is an urgent need for preventive measures to reduce caries activity for teenagers and young adults in Australia.

Why does this problem exist?

- Significant changes in life. Leaving school, leaving home to live independently or getting a job can result in significant lifestyle changes that impact on diet or toothbrushing practices.
 - Use of easily accessible fast food and a lack of regular meals often resulting in a need for frequent snacking.
 - Less frequent toothbrushing is also characteristic for many young people. Altered toothbrushing practices often result in less frequent use of toothpaste and, associated with that, diminished exposure to fluoride.
- The decay process is able to progress rapidly once the cariogenic challenge increases.

Despite adequate pre- and post-eruptive exposure to fluoride in childhood and leaving school with good dental health, the increased caries challenge at a time when post-eruptive exposure to fluoride is lowered can exceed the capacity for remineralisation and caries occurs.

Effective management depends on:

- Accurate diagnosis – Careful visual examination, exploring possible risk behaviours influencing caries and bitewing radiography are essential following long periods of non-attendance at a dental clinic.
- Development of an effective control program, which is well accepted by the patient - outlining the main causes of the caries problem and asking the patient how they would prefer to manage these is likely to result in acceptable control measures being adopted.
- Quality treatment – inadequate care may affect patients' confidence in the profession and discourage them from seeking dental care.

Many young adults have active decay present in their mouth. Their busy lifestyle may prevent them from recognising THE IMPORTANCE OF CONTINUOUS DENTAL CARE. In these cases, a dental professional may need to explain to them the consequences of neglecting their oral health and suggest an appropriate preventive approach.

- Need for a long-term program of maintenance - the frequency of appointments will depend on how well and how quickly a patient adopts the new healthy habits and on the clinician's assessment of the risk of further dental problems occurring.
- It is almost always necessary to increase fluoride exposure when dealing with decay in young adults - use of additional fluoride products depends on disease severity, caries risk level, and on patient factors such as motivation and their ability to follow instructions.

Unhealthy habits that are developed in teenage years are likely to continue throughout the young adulthood period. Counselling for the young adult group is likely to have life-long impact on caries.