ARKANSAS PRAMS UPDATE

PREGNANCY RISK ASSESSMENT MONITORING SYSTEM JULY 2009

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Pregnant Women and Oral Health Care, 2007

Oral health care during pregnancy

Oral health care during pregnancy is a big part of effective prenatal care.[1-3] The American Dental Association has stated that a pregnant woman can safely undergo essential dental treatment during the second trimester and first half of the third trimester. Therefore, any dental emergencies should be dealt with immediately throughout the pregnancy.[4] Practicing good oral health and seeking timely treatment for dental problems when pregnant are important for the following reasons:

- Hormone changes during pregnancy increase the risk for oral diseases, such as periodontal (gum) disease.[5]
- A possible association exists between periodontal diseases and the risk of having a pre-term or low birthweight baby. Preeclampsia (high blood pressure due to pregnancy) may also be caused by periodontal disease.[1-5]
- The bacteria responsible for dental cavities can easily be transmitted from the mother to the infant or toddler.[1-5]

Summary

- The American Pregnancy Association recommends regular dental care and preventive exams *during* pregnancy.
- In 2007, just 27% of all Arkansas women, 18% of women on Medicaid, and 41% of women not on Medicaid went to a dentist or dental clinic *during* their most recent pregnancy.
- Of the women who had a dental problem during their most recent pregnancy, only 35% sought dental care.
- Most women (82%) had their teeth cleaned *before* their most recent pregnancy, but much smaller percentages had their teeth cleaned *during* (23.7%) or *after* (22.7%) their pregnancy.

ARKANSAS PRAMS AND ORAL HEALTH

This report uses data from the 2007 PRAMS survey. In 2007, 1,859 of the 2,572 women surveyed responded for a 73.9% weighted response rate.

The following oral health questions were on the survey:

- This question is about the *care of your teeth during your most recent pregnancy*. (Yes or No for each response):
    - a) I needed to see a dentist for a problem
    - b) I went to a dentist or dental clinic
    - c) A dental or other health care worker talked to me about how to care for my teeth and gums

- Have you *ever* had your teeth cleaned by a dentist or dental hygienist? Yes or No

- When did you have your *teeth cleaned by a dentist or dental hygienist*:
    - a) Before my most recent pregnancy
    - b) During my most recent pregnancy
    - c) After my most recent pregnancy"

Prevalence rates were computed using SAS PROC SURVEYFREQ to give a 95% confidence interval. The survey responses are weighted to adjust for the sampling design, non-coverage, and non-response. The data are also stratified by birth weight and population density. Prevalence rates given in the report are for women who responded to the survey. Table 1 in the Appendix contains prevalence rates and confidence intervals. The data are not broken out by race/ethnicity because there is no discernable or significant difference in any of the indicators.

The Medicaid data refers to women whose prenatal care and/or delivery were paid for by Medicaid. As required by the CDC, comments made by mothers are written verbatim with no corrections for spelling or grammar.

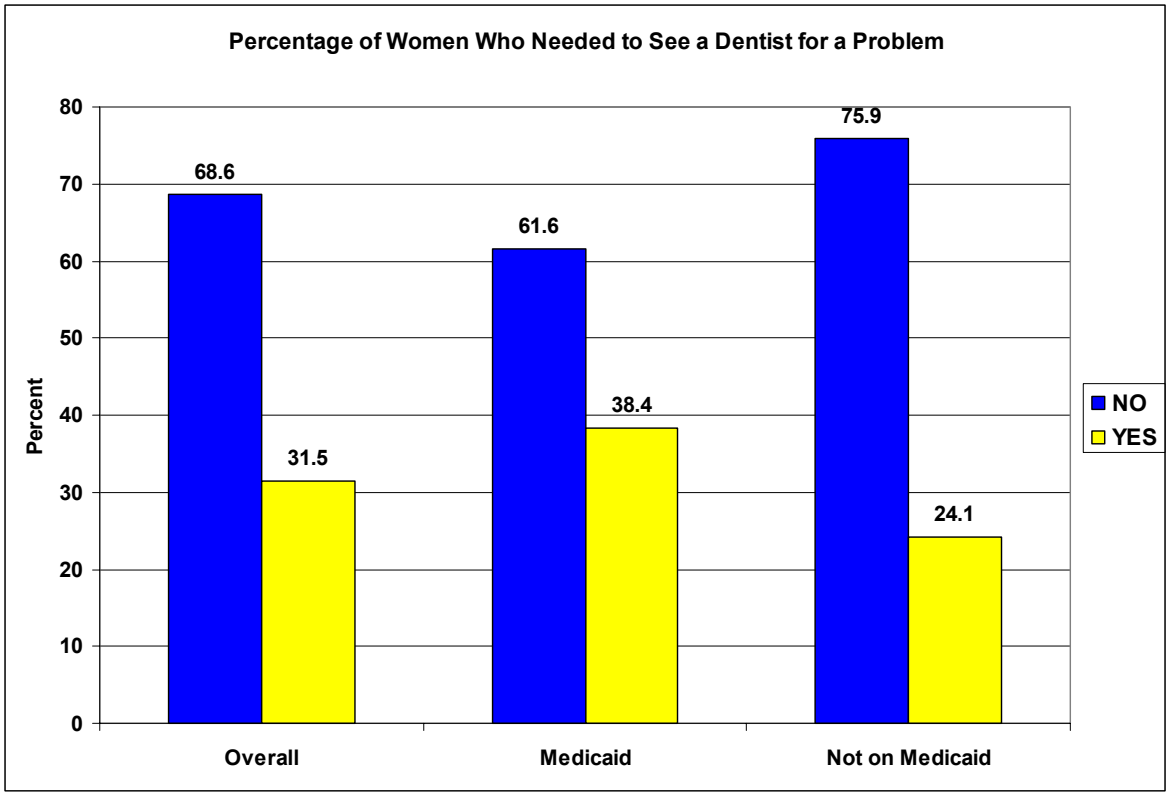
ARKANSAS PRAMS DATA ON ORAL HEALTH

Care of teeth during pregnancy

Overall, most women in the PRAMS survey indicated that they did not need to see a dentist for a problem during their most recent pregnancy. They also indicated they did not go to a dentist or dental clinic or have a dental or other health care worker talk with them about how to care for their teeth and gums during their most recent pregnancy. Women on Medicaid were more likely to need dental care and less likely to receive it than women not on Medicaid.

Needed to see dentist for a problem

- About one-third (31.5%) of the women indicated that they needed to see a dentist about a problem during their most recent pregnancy. Women on Medicaid (38.4 %) were more likely to report needing to see a dentist than women who were not (24.1%).

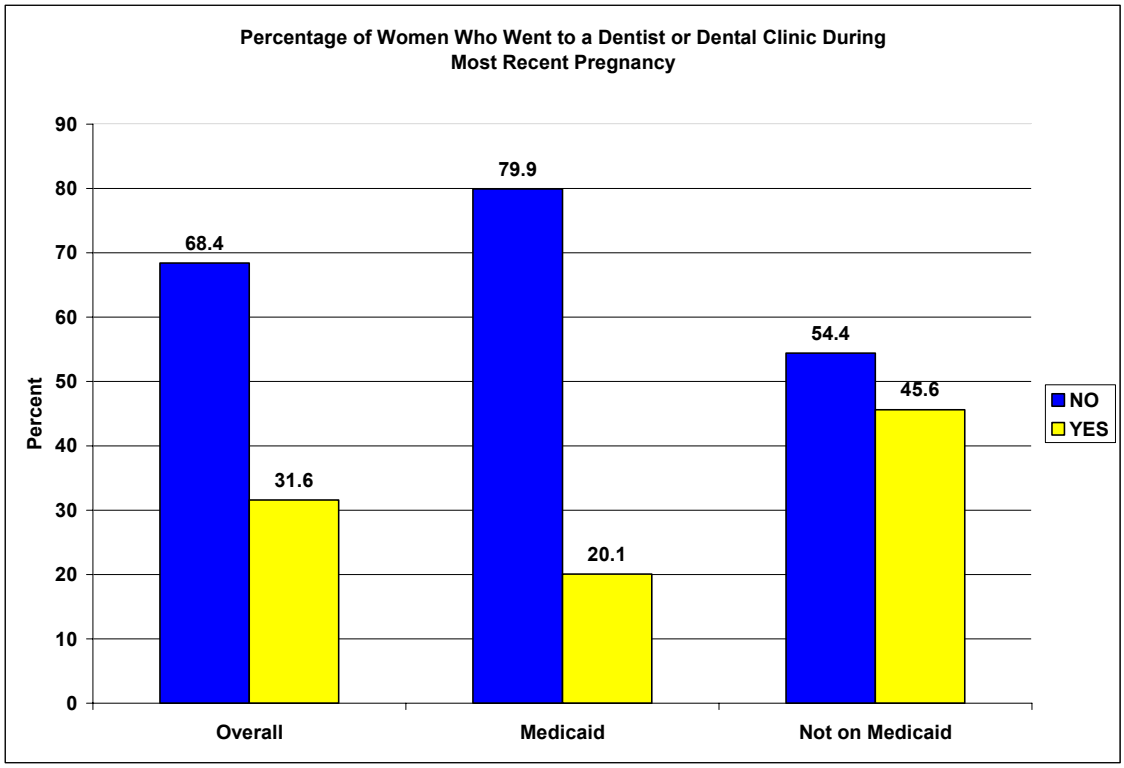


"I was told I could not go because I was pregnant, but I needed a tooth pulled…"
---Anonymous PRAMS Mom

Went to dentist or dental clinic

Most women, particularly those on Medicaid, did not go to a dentist or dental clinic during their most recent pregnancy.

- Overall, only 32% of pregnant mothers went for dental care during pregnancy.
- Only 20% of women on Medicaid visited a dentist or dental clinic during pregnancy compared to over 46% of women not on Medicaid.
- Black women (26%) were less likely to visit a dentist or dental clinic during pregnancy than pregnant women overall (32%).

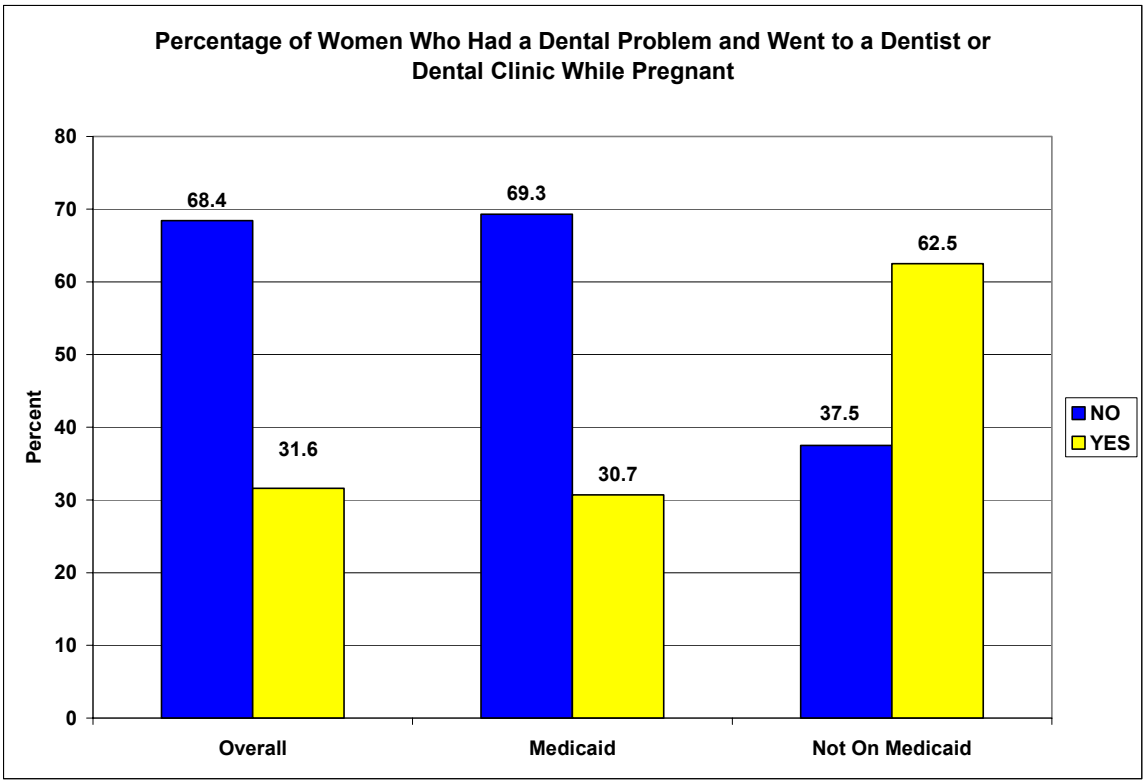


"I think that dental care should be provided to pregnant women because, like me, their teeth hurt, they are less likely to eat when they are hurting to when they are not."

---Anonymous PRAMS Mom

The majority of women who needed to see a dentist for a problem did not, especially if they were on Medicaid.

- Only 31.6% of the women who needed to see a dentist during their most recent pregnancy went for dental care.
- Only 31% of the women with a dental problem during pregnancy who were on Medicaid sought dental care during their pregnancy. Sixty-three percent (62.5%) of pregnant women NOT on Medicaid, but with a dental problem during pregnancy, sought dental care while pregnant.



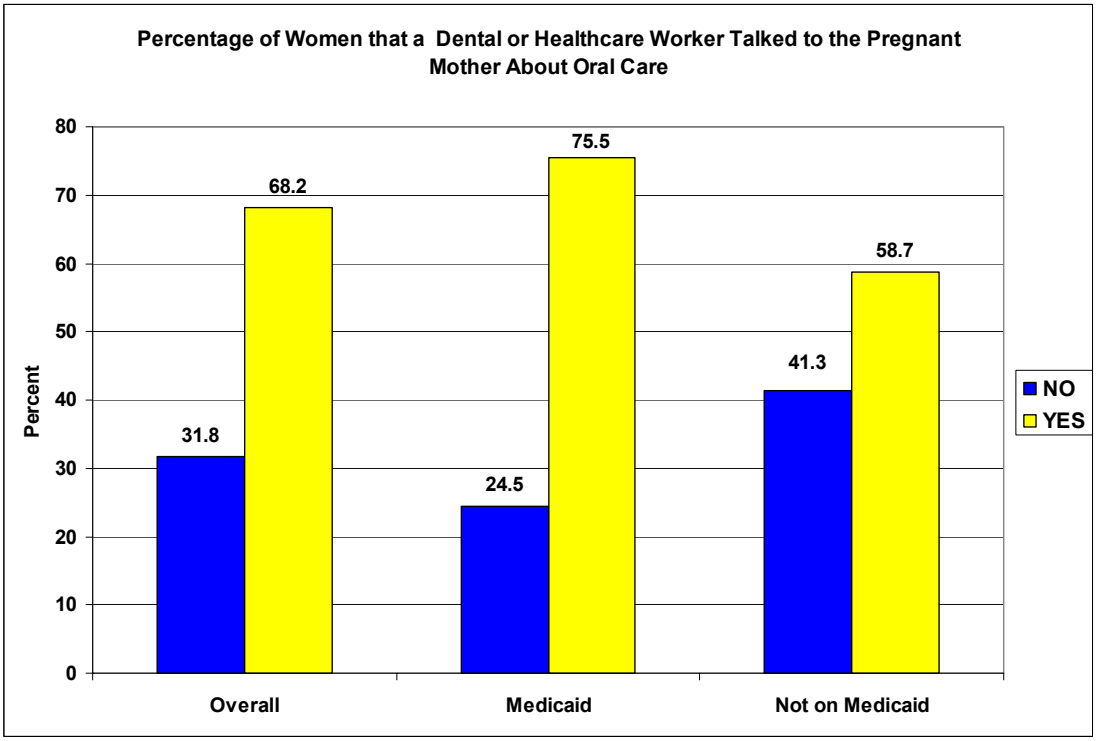
"The state needs to come up with a cheap dental insurance for low income Familys. It don't have to be Free. A lot of Pregnet Wemen's teeth go bad during Pregnancy. I personally cant afford Insurance at this time. but the state could help some people! It affected my pregnancy quite a bit."

---Anonymous PRAMS Mom

Had dental or other health care worker talk to them about care of teeth and gums

Most pregnant women did not have a dental or other health care worker talk to them about how to care for their teeth and gums.

- Only 32% of the women in the PRAMS survey said that a dental or other health care worker talked with them about how to care for their teeth and gums.
- Women on Medicaid (25%) were less likely than women who were not (41%) to be talked to about oral care.



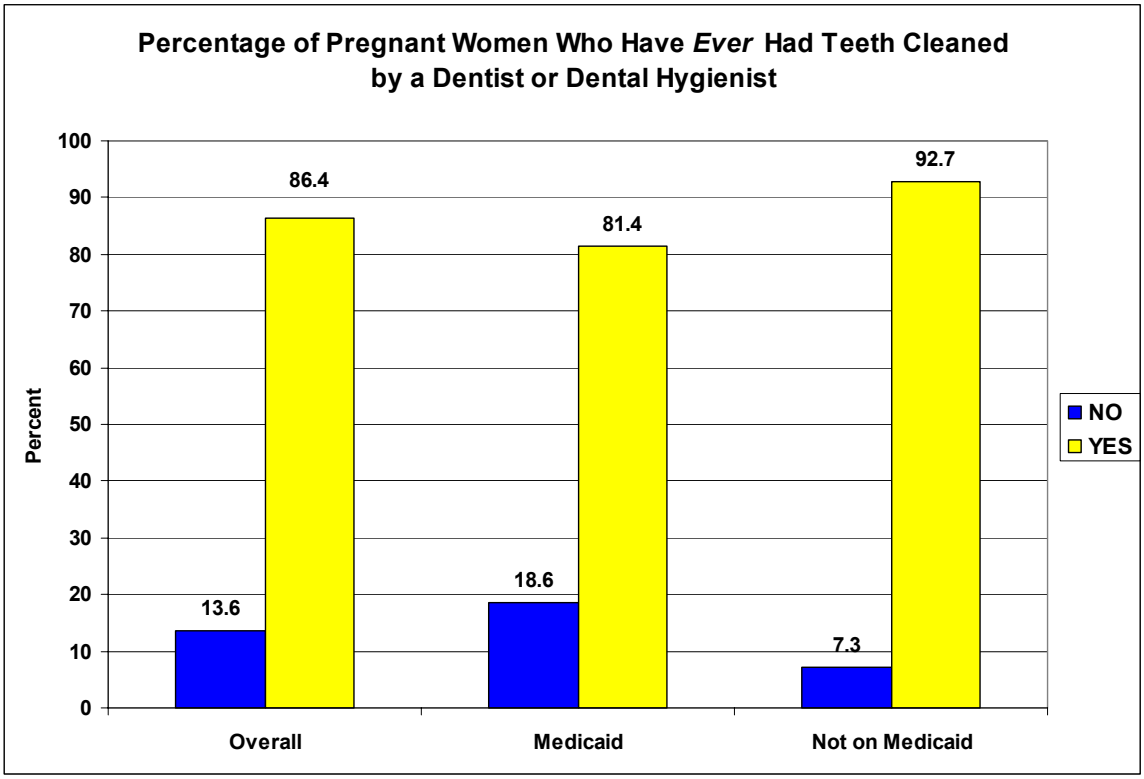
"I think doctors should push the use of prenatal vitamins in pregnant women. I also think there should be dental services available for free during pregnancy. I regret not taking vitamins during or after my two pregnancies b/c my teeth constantly hurt."

--Anonymous PRAMS Mom

Teeth cleaning by dentist or dental hygienist

When asked "Have you *ever* had their teeth cleaned by a dentist or dental hygienist," most women responded that they had.

- Eighty-five percent (86%) of the respondents had at some time in their lives had their teeth cleaned by a dentist or dental hygienist.
- About 81% of women on Medicaid had ever had their teeth cleaned by a dentist or dental hygienist compared to 93% of those not on Medicaid.



"I almost go through a bottle of Aleve every day and still it doesn't get rid of the pain. I wish something could be done about it but like I said I have no money to afford it and I think eventually I will die from it. Unless I had someone to help me with this but I don't. So I guess I'm gonna suffer for the rest of my life with my teeth until I die eventually. Thanks."

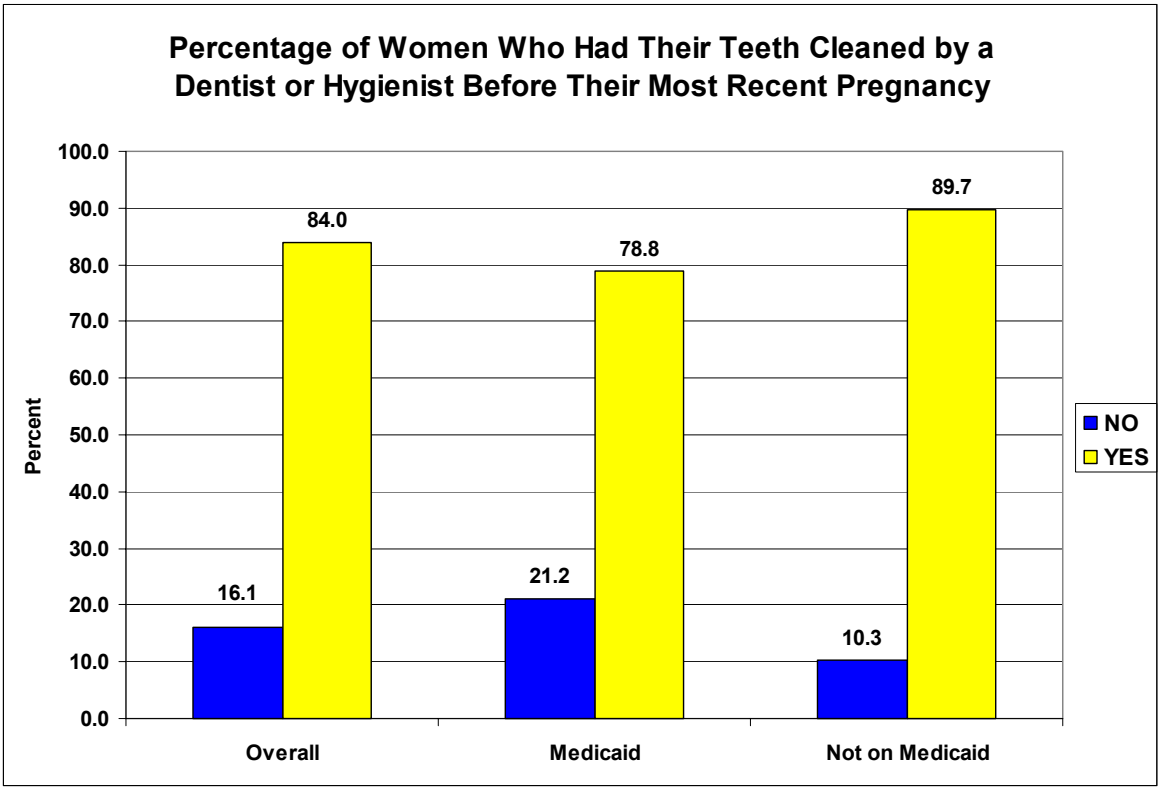
---Anonymous PRAMS Mom

When women had their teeth cleaned

Most women (84%) had their teeth cleaned *before* their most recent pregnancy, but much smaller percentages had their teeth cleaned *during* (29%) or *after* (24.5%) their pregnancy.

Before most recent pregnancy

- Eighty-four percent of the women had their teeth cleaned before their most recent pregnancy.
- Women not on Medicaid (90%) were more likely to have had their teeth cleaned than those who were (79%).
- Black women (72%) were less likely to have had their teeth cleaned before pregnancy than all women who were surveyed (84%).



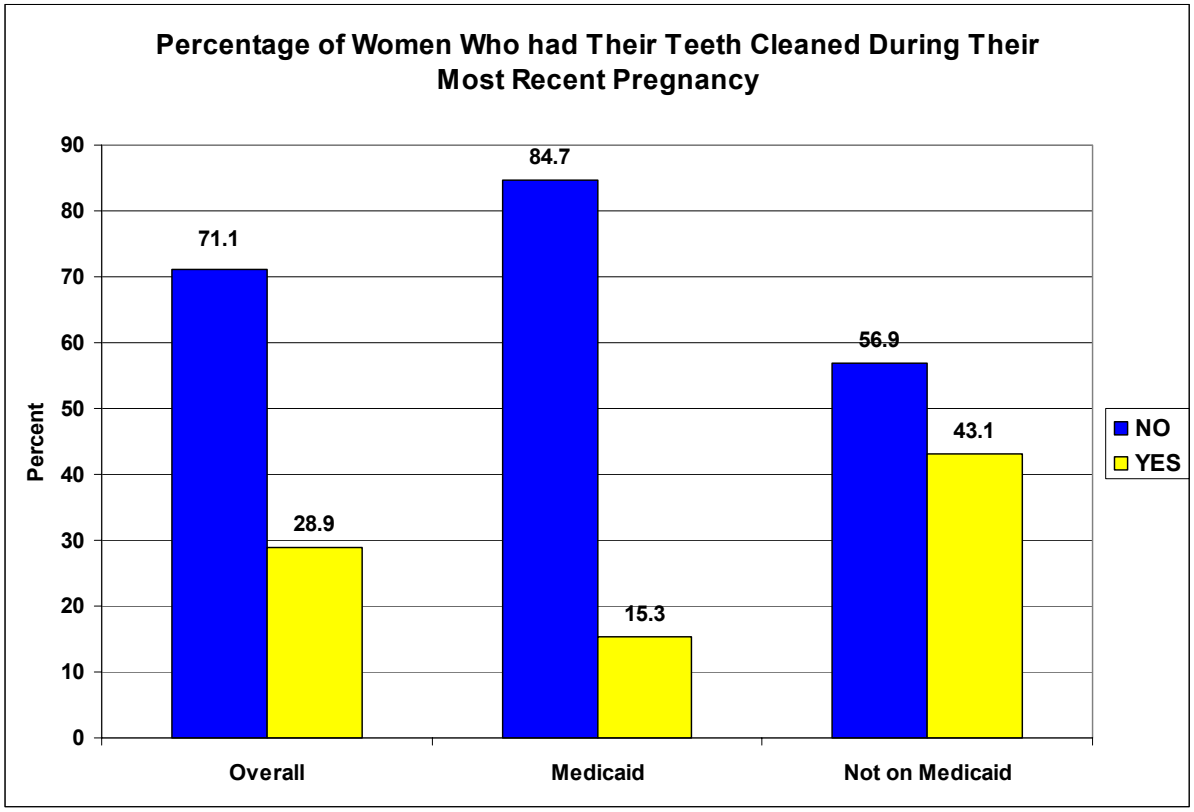
"Make sure you have your teeth checked before you plan a pregnancy because this (having a toothache during pregnancy) can cause major stress because there are few dentists that will treat you properly during this time. Most require you wait until after the baby is born. Other than that try to stress free eat healthy for the life of your child. It's giving birth the most beautiful gift."

---Anonymous PRAMS Mom

During most recent pregnancy

According to the American Pregnancy Association, "preventive dental cleanings and exams during pregnancy are not only safe, but are recommended."[7] To prevent the spread of infection, cavities should be filled and crowns should be treated. The second trimester is the safest and most comfortable time to take care of any necessary dental work.[7]

- Only about 29% of the women had their teeth cleaned during their most recent pregnancy.
- Women on Medicaid were less likely than women not on Medicaid to have their teeth cleaned (15% vs. 43%, respectively).
- Black mothers (22%) were somewhat less likely than pregnant women overall (29%) to have their teeth cleaned during pregnancy.

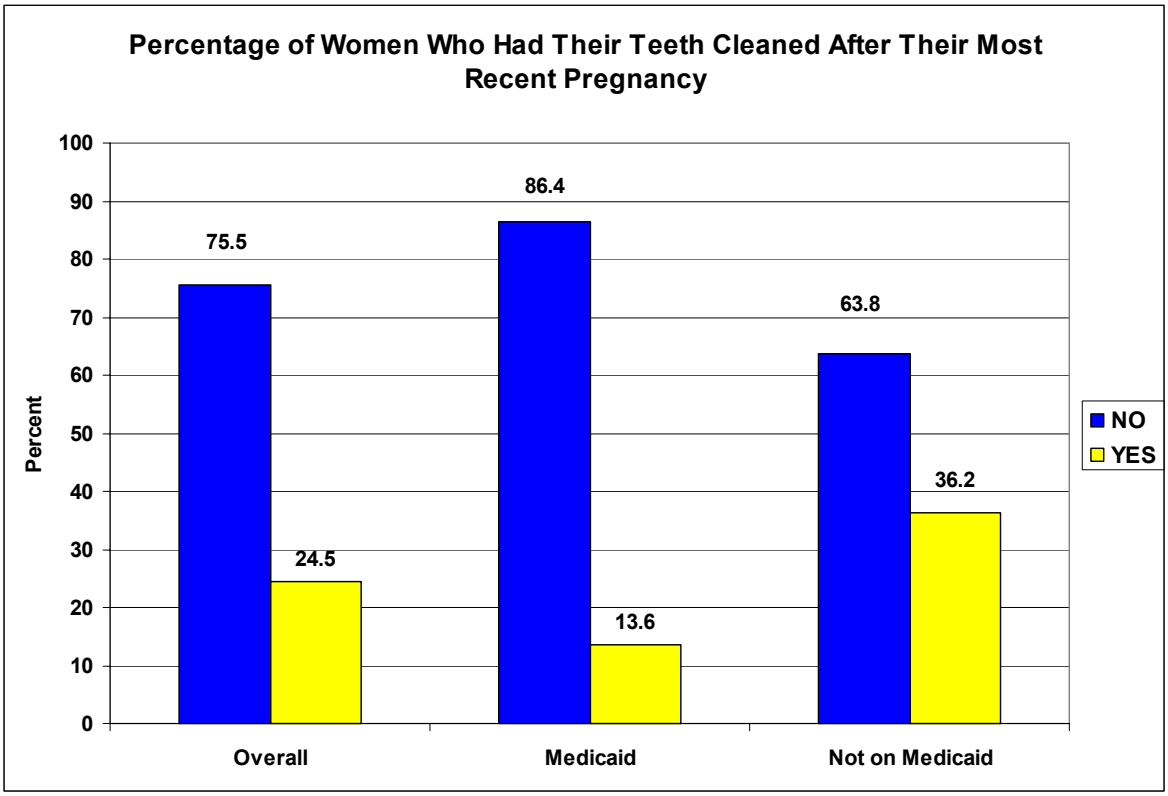


"I would really like to see mothers to be get approved for Dental work or cleaning if they need it. It really destroyed my teeth by being pregnant."

---Anonymous PRAMS Mom

After most recent pregnancy

- Twenty-five percent (25%) of all women, 14% of women on Medicaid, and 36% percent of women not on Medicaid had their teeth cleaned after their pregnancies



"Dental care is not provided for by medicade unless there is a problem. There for most mothers I know do not get there teeth checked or cleaned, including myself."

---Anonymous PRAMS Mom

Recommendations

The Healthy People 2010 target to visit a dentist within a year is 56% for all age groups. This applies to pregnant women as well. In Arkansas, just 29% of pregnant women visited a dentist during their pregnancy. Due to the hormonal changes in a woman's body during pregnancy, oral health is of even more importance than ever. As hormone levels rise dramatically during pregnancy, gingivitis (early periodontal disease) is common during the second to eighth month of pregnancy due to the body's increased response to plaque. The ADA has set forth several guidelines for good oral health during pregnancy.

- Eat a balanced diet. Babies' teeth develop between the third and sixth month of pregnancy, so what a woman eats during pregnancy affects development – including teeth.
- Pregnant women should resist the urge to snack constantly and should choose from the five food groups when they do snack.
- Make appointments for preventive dental visits and exams during pregnancy. Any required x-rays are safe, especially between the eighth and twenty-first weeks of pregnancy. A leaded apron is used to protect the abdomen and thyroid during x-rays, so the minimal amount of radiation used in dental x-rays is not harmful.

The National Maternal and Child Oral Health Resource Center of Georgetown University has found that, nationally, women who participate in Medicaid are significantly less likely to visit a dentist before, during, and after pregnancy compared to those with private insurance. This is evidenced in Arkansas by the fact that only 15% of pregnant women on Medicaid visited a dentist during their pregnancy. The Center suggests some strategies for improving oral health care during pregnancy.

- Promote the use of guidelines for oral health during pregnancy and disseminate these guidelines to healthcare and oral health professionals.
- Expand opportunities for health professional education on risk assessment, prevention, and treatment of oral health problems during pregnancy.
- Educate women on how to improve oral hygiene and access any available oral health care resources.
- Increase dental insurance coverage for women during pregnancy.
- Integrate oral health risk assessment, education, and referrals for follow-up oral health care as a part of routine perinatal and prenatal care.

Given the association between severe periodontal (gum) disease and pre-term and low birthweight babies, attention to oral healthcare is extremely important. Beyond the effect on the baby, poor oral healthcare has long-term effects on the mother, including severe gingivitis, loss of teeth, and even severe systemic infection. The American Dental Association, as well as the American Pregnancy Association, states that it is very safe for pregnant women to have dental care during the second trimester and the first half of the third, so the fact that a woman is pregnant should not prevent good oral healthcare. Notice should be given to the guidelines set forth by the American Dental Association and the American Pregnancy Association to provide options for improved oral healthcare in Arkansas.

What mothers told us about oral health and pregnancy…

"I would just like to thank you for the Medicaid, if I didn't get it I would be in a lot of debt. The only problem is that I don't have any money to get my teeth fixed. Medicaid doesn't offer it and it is very important to have your teeth, I came from Maryland and their Medicaid does cover it. I wish Arkansas would give Medicaid to women without being pregnant."

"Medicaid should cover basic dental for everyone not just minors under 19 or something!"

"I think pregnant women over 18 should be able to go to the dentist while on Medicaid. And Medicaid should pay. Teeth care is very important during pregnancy."

"I think a lot more benefits such as dental should be given to mothers during and after pregnancy on Medicaid no matter of age. Your teeth hurts worse than labor at times because of the baby taking calcium and we need help."

"I used to work in the dental profession and women (especially pregnant women) are not educated enough about periodontal disease and low birth weight babies!"

"It is important for you and your baby to get checks before and after pregnancy. I did not go to the dentist when I was pregnant. I had several bad teeth. My baby was born small."

"Every pregnancy, I've had 'pregnancy gingivitis' which is very hard on my teeth. I wished Medicaid included dentistry in their health care."

"All women need help with their teeth when they are pregnant. Medicaid should pay for it. I hurt so bad I could barely eat. I told the doctor and all she gave me was pain pills. I wish more people knew about this. My teeth hurt so bad. I needed antibiotics. I told the doctor, but she said Medicaid only paid if you were under 21."

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8. Access to oral healthcare during the perinatal period: A policy brief (2008), National Maternal and Child Oral Health Resource Center.

Appendix A

Table 1. Oral health care of pregnant women in Arkansas, 2007

Characteristic	Total (n=1,859) Percent	Total (n=1,859) 95% CI*	On Medicaid (n=1,080) Percent	On Medicaid (n=1,080) 95% CI*	Not on Medicaid (n=739) Percent	Not on Medicaid (n=739) 95% CI*
Care of Teeth During Most Recent Pregnancy						
Needed to see a dentist for a problem	31.7	28.5-34.4	37.4	34.2-42.6	23.9	19.9-28.2
Went to a dentist or dental clinic	31.7	28.6-34.5	19.7	16.6-23.6	47.5	40.9-50.3
Dental or other health care worker talked with woman about how to care for my teeth and gums	32.0	28.8-34.8	24.3	20.8-28.2	42.5	36.3-46.0
Having Teeth Cleaned						
Ever had teeth cleaned by a dentist or dental hygienist?	86.5	84.2-88.5	81.0	78.0-84.7	94.0	90.3-95.2
When Teeth Were Cleaned						
Before most recent pregnancy	83.9	81.4-86.5	78.3	74.7-82.8	90.3	86.6-92.7
During most recent pregnancy	28.9	25.6-32.1	15.3	11.6-19.0	44.2	38.0-48.1
After most recent pregnancy	24.6	21.4-27.5	14.0	10.3-16.9	36.8	31.2-41.2

*95% confidence interval.

What is PRAMS?

The Pregnancy Risk Assessment Monitoring System (PRAMS) is an on-going, population-based surveillance system sponsored by the Centers for Disease Control and Prevention (CDC). The PRAMS survey is designed to capture information on maternal behaviors and experiences that occur before, during, and after pregnancy among women who had a live birth. PRAMS provides information that is not available from the birth certificate or other sources.

The goal of PRAMS is to provide state-specific information that can be used to improve the health of mothers and infants by reducing adverse outcomes such as low birth weight, infant mortality and morbidity, and maternal morbidity. Data from the PRAMS survey can be used to identify women who are at high risk for health problems, to monitor changes in maternal health indicators, and to measure progress in improving the health of mothers and their infants.

In Arkansas, over 200 recent mothers are sampled from Arkansas birth certificates each month and stratified by birth weight and population density. Mothers are mailed as many as three questionnaires about such issues as prenatal care, birth control, breastfeeding, insurance coverage, well-child care, and pregnancy intention. Responses are weighted to adjust for sample design, non-coverage, and non-response.

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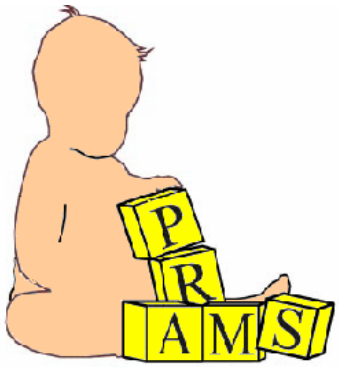

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