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Too many individuals adopt a laissez-faire approach to dental care – heading to the dentist only when painful toothaches erupt, with the expectation that immediate treatment will cure the root cause of the problem – says the writer. Caring for our teeth requires the same commitment as how we care for our heart, body and mind, he adds. ST PHOTO: AZMI ATHNI

Say aah! Why is Singapore neglecting dental health?

Misplaced priorities? People maintain their cars diligently but skip regular visits to the dentist.

Teo Yik Ying

A recent report revealed that half of the children in Singapore experience tooth decay by kindergarten age, leading to pain, missed school and even extractions. For a high-income nation renowned for its well-organised health system, this figure is both surprising and alarming.

How is it that Singapore, with robust public health programmes targeting conditions such as diabetes and cardiovascular diseases, struggles with something as fundamental as children's dental health?

This question highlights systemic gaps in oral health, not just for children but across all age groups.

The National Adult Oral Health Survey in 2019 revealed high rates of untreated tooth decay and gum disease among Singaporean adults, with over three-quarters of those aged between 21 and 64 suffering from periodontal disease.

Periodontal disease, also known as gum disease, is an infection of the tissues that hold the teeth in place. This happens when plaque, a sticky film of bacteria, builds up

on the teeth and is not properly removed.

While regular brushing and flossing are important, professional dental cleaning can access areas that are otherwise inaccessible, such as deep gum pockets.

For three-quarters of the adults surveyed to suffer from periodontal disease points to a widespread neglect of preventive dental care. Is this also the reason why our kindergarten children have such bad teeth, because the parents themselves don't care much about maintaining their own teeth?

Oral health issues extend beyond cosmetic concerns. Untreated tooth decay can cause pain, infections and tooth loss, which can affect eating, speaking and social interactions.

Chronic gum disease has also been linked to systemic conditions such as heart disease, diabetes and respiratory infections.

For individuals with diabetes, poor oral health can worsen complications, including kidney damage and nerve issues.

Yet, many Singaporeans prioritise the appearance of their teeth over their health, spending on aesthetic treatments like whitening and straightening, while neglecting preventive check-ups

This reflects misplaced priorities – people maintain their cars and phones regularly but skip the recommended six-monthly dental visits.

So where did we go wrong?

CURRENT PROGRAMMES FOR ORAL HEALTH

Globally, the World Health Organisation advocates preventive dental care, as most oral diseases are preventable with appropriate measures. Such dental care services should be made available and accessible to people across all ages, as the risk factors for oral diseases are present throughout our entire life.

In Singapore, a national programme addresses oral health early, with free dental screenings for pre-schoolers at some childcare centres. This expands to free basic dental services for schoolchildren, at regular intervals, six times through 10 years of primary and secondary schooling.

This shows in the exemplary oral health of our 12-year-olds, with Singapore ahead of nations like Japan and South Korea. It also shows that while our children may not have good teeth in kindergarten, we manage to fix this during their schooling years with a sound national programme.

However, the next time a

national programme formally looks at the health of a person's teeth is when the person reaches 60 and is then eligible for functional dental screening under the "See, Hear and Eat Better" programme.

This leaves a 40-year gap in preventive services, during which there are very few public education and national programmes to remind and incentivise individuals to proactively manage their oral health.

For many, this gap leads to years of accumulated plaque, untreated cavities, gum disease and other preventable issues, making dental care reactive, complex and expensive.

SUBSIDIES ON OFFER

What is surprising is that the National Adult Oral Health Survey also revealed that six in 10 eligible individuals did not utilise their government dental subsidies, often paying out of pocket instead.

This suggests that not many people realise that dental services in polyclinics are subsidised by the Government, with varying levels of subsidies depending on the specific services including cleaning, fillings, extractions, dentures, crowns and root canal treatment.

Or perhaps they have been stymied by the lengthy waiting time for polyclinic appointments, with non-emergency dental appointments involving waits of up to a year, despite dental clinics opening their appointment slots six months ahead.

Subsidised care is also available at private dental clinics under the Primary Care Partnership Scheme (PCPS), although eligibility is limited to specific Community Health Assist Scheme (Chas) card holders, with basic-level subsidies for Orange and Blue card holders and greater support for Merdeka Generation and Pioneer Generation card holders.

However, what this means is that for adults with a household monthly income per person above \$2,300 – thus only eligible for Chas Green – who are unable to secure a timely appointment at a polyclinic, private care often becomes an expensive necessity.

WHAT CAN BE DONE?

The gaps in Singapore's oral health system lie in literacy, access and financing, requiring targeted solutions.

First, oral health literacy needs to improve.

Public health campaigns have successfully raised awareness about smoking, sedentary lifestyles, and unhealthy diets rich in sugar, salt and saturated fat.

A similar approach can educate Singaporeans on the importance of preventive dental visits, the risks of neglecting oral health and its role in overall wellness.

Campaigns should tailor messages for different age groups: children, adults and seniors.

This is not just the responsibility of the Health

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Expanding subsidies can make dental care more accessible

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Promotion Board, but requires collaboration across sectors, with paediatric healthcare workers advising parents on the importance of early childhood habits, human resources teams promoting dental check-ups at workplaces, and community groups organising free screenings and oral hygiene workshops.

Second, we should improve accessibility to dental care services by expanding the subsidy framework even to holders of Chas Green.

The current public dental system is overburdened, leading to long waiting times that discourage regular check-ups.

Expanding subsidies to effectively all Singaporeans, even if they visit private dental clinics under the PCPS, can make dental care more accessible.

Naturally, the levels of subsidies will continue to be tiered according to the type of Chas card one holds, but we should subsidise essential services like cleanings, extractions and fluoride treatments even for Chas Green card holders.

In fact, we could consider innovative measures, such as higher subsidies for consistent dental visits, to incentivise regular check-ups. This sends a clear message that, regardless of age and wealth, everyone should visit their dentists regularly – just as



into Healthier SG would create a unified system for preventive care that reduces financial barriers and encourage individuals to prioritise preventive care over costly corrective treatments.

Folding dental subsidies

The full benefits of Healthier SG, including the proposed extension to cover oral health, will be realised when the programme is expanded to offer preventive services to all age groups, including children and young adults, says the writer. ST FILE PHOTO

how we should go for our health screening and influenza vaccination regularly.

Third, dental care should be integrated into Healthier SG, which is after all our flagship preventive health programme.

Enrolling private dental clinics in the initiative, in the same way

that general practitioners have been invited to join the scheme, would expand service networks and standardise care protocols, ensuring quality.

Folding dental subsidies into Healthier SG would create a unified system for preventive care that reduces financial barriers and encourage individuals to prioritise preventive care over costly corrective treatments.

This expansion would require us to address workforce shortages by training and recruiting more dental professionals, including hygienists, therapists and assistants. Tele-dentistry could also play a role in providing consultations for minor dental concerns, such as gum irritation or early signs of cavities, increasing accessibility without requiring physical clinic visits.

However, the current version of Healthier SG focuses only on individuals aged 40 and above.

The full benefits of Healthier SG, including the proposed extension to cover oral health, will be realised when the programme is expanded to offer preventive services to all age groups, including children, adolescents and young adults.

BOOK THAT APPOINTMENT

We should rightly be proud of Singapore's healthcare system, especially as our recent reforms adopt a far-sighted perspective to protect and maintain the health of our people. However, it remains incomplete without a holistic approach towards oral health.

Too many individuals adopt a laissez-faire approach to dental care – heading to the dentist only when painful toothaches erupt, with the expectation that immediate treatment will cure the root cause of the problem.

Caring for our teeth requires the same commitment as how we care for our heart, body and mind. It requires one to adopt a preventive mindset, of prevention, daily maintenance and regular check-ups throughout an individual's entire lifespan.

So, if you are reading this and the last visit to your dentist was over a year ago, it is time to book a dental appointment.

Oh, and don't forget to check whether you are eligible for subsidised dental treatment.

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