

SUMMARY OF A RECOMMENDATION BY COHERE FINLAND ON DECREASING THE RISK OF DISEASE CAUSED BY POOR ORAL HYGIENE IN HIGH-RISK PATIENTS WITH SUPPORT FOR SELF-MANAGEMENT OF ORAL HEALTH AND LIFESTYLE COUNSELLING

The Council for Choices in Health Care in Finland (COHERE Finland) adopted the recommendation at its meeting on 24 March 2021.

The recommendation has been targeted at those parties in public health care that organise support for self-management of oral health and lifestyle counselling to patients in order to promote oral hygiene. It applies to persons whose oral hygiene has declined either because of insufficient self-management or as a result of a lifestyle that is harmful to oral health, resulting in a high risk of oral inflammatory diseases. The recommendation also applies to patients who have been diagnosed with a high risk of chronic diseases and for whom the probability of disease can be reduced with good oral hygiene, and to certain special groups.

Neglecting oral hygiene may result in serious oral inflammatory diseases such as caries or periodontal disease. Ignoring their treatment is also linked to other serious illnesses (e.g. cardiovascular diseases and treatment balance in diabetes and rheumatic diseases), the treatment of which consumes the resources of the care system and causes significant decline in patients' quality of life. Untreated oral inflammatory diseases also prevent many operations and the start of treatments. In institutional and hospital patients, poor oral hygiene increases the risk of pneumonia and other respiratory tract infections.

The reason for poor oral hygiene is often that the person cannot take care of their oral hygiene without outside help and does not receive the support they need for it from the people close to them. As a result of poor oral hygiene, such patients and patients belonging to certain special groups are at an increased risk of oral inflammatory diseases. Signs of poor oral hygiene have been detected in 47% of men, 17% of women, over 50% of boys and 30% of girls of secondary school age, and over 90% of older people in institutional care. The incidence of oral inflammatory diseases that could be prevented is high. Approximately 20% of the adult population have caries that requires treatment and more than one half have periodontal disease.

With effective prevention and early treatment, it is possible to reduce the costs of the care of oral inflammatory diseases, which amount to hundreds of millions of euros every year.

When preparing the recommendation, efforts were made to identify the theory-based methods that enable the patient to commit themselves and become motivated to self-management of oral health and to making changes to their lifestyle habits in order to maintain better oral hygiene. In this context, theory-based methods mean scientifically proven methods whose components have been described. Effective support for self-management of oral health and lifestyle counselling contribute to the prevention of caries and periodontal disease, for example, by influencing the diet, promoting tooth brushing, and take into account any medication that affects the production of saliva. As part of supporting self-management of oral health in families with children, the family's internal interaction is influenced by supporting the child in taking care of their oral hygiene.

The recommendation describes what sub-areas are included in the methods that bring about a behavioural change and what factors must be taken into account when implementing effective support for self-management.

Supporting self-management of oral health and providing lifestyle counselling with effective methods belong to the range of services offered in health care to reduce the risk of diseases caused by poor oral hygiene in high-risk patients. In the provision of the services, the following factors are also taken into account:

- Identification of patients in the high-risk group and bringing them within the sphere of the care system
- The methods used are ones that based on research evidence have a positive effect (e.g. motivational interviews) and include assessing the initial situation, motivating the patient or their parents, increasing knowledge, setting a goal, making a plan and giving feedback on an individual basis according to the patient's situation.
- Cooperation between health and social services professionals
 - is often required for preventive measures to succeed
 - as part of the cooperation, it is taken into account that if the size of the customer fees prevents the patient from seeking treatment or prevents the implementation of the treatment, the patient will be directed to social services.
- Flow of information and the care plan
 - the patient's care plan is used in the flow of information between the different sectors. Individual preventive measures are recorded in the care plan so that the patient's overall health including oral health will be taken in to account when the patient is cared for in different places.
- Efforts are made to ensure that persons with an increased need for help receive the support and help they require for self-management of oral health.
- The required counselling and support are ensured by other means to patients who cannot use digital services or do not have the devices required to use them.

This is a summary of a recommendation adopted by the Council for Choices in Health Care in Finland (COHERE Finland). The actual recommendation and the related background material are available in Finnish on the website of COHERE Finland under [Recommendations](#).

The summary of the recommendation is also available in [Finnish](#) and [Swedish](#) on the website.

The Council for Choices in Health Care in Finland (COHERE Finland) works in conjunction with the Ministry of Social Affairs and Health, and its task is to issue recommendations on services that should be included in the range of public health services. Further information about service choices in healthcare is available on [the COHERE Finland website](#).