





## SEVERE ACUTE DENTAL INFECTIONS

## Promoting dental health among high risk groups

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Robertson and colleagues' review of severe acute dental infections rightly mentions the disparities in access to dental healthcare "disproportionately affecting the poor."

Poverty is associated with increased oral cancers and infections. Poorer people are more likely to smoke, have higher dietary sugar intake, and delay attending dental services because of previously having had to pay. All of these factors could lead to the increase in dental abscesses among poor people, which the authors note.<sup>2</sup>

Dental ill health exacts a considerable toll on quality of life.<sup>3</sup> Nevertheless, the poorest people with the greatest burden of disease have the worst access to dental healthcare; the inverse care law applies as much to teeth as to any body system.<sup>3 4</sup> This gap between need and provision is widening, especially among disadvantaged children and older people.<sup>2 5</sup>

Although most people seeking dental care still use NHS led services, more than a quarter (mostly richer people with the luxury of choice) choose private services, often because they cannot find an NHS dentist.<sup>2</sup> This reflects the fiscal strain the NHS is under as Conservative policy steamrolls into systematic privatisation. However, the privatisation of dental care preceded these policies; if such dramatic privatisation had occurred in, say, respiratory or cardiovascular medicine the public outcry

would have been huge. Why is dental healthcare treated differently?

Robertson and colleagues' article is a reflection of the current state of dental healthcare in the UK. Until free NHS dental care is restored, perhaps a focus on promoting dental health among high risk groups would reduce the need for physician led emergency care of the nation's mouths. In these times of austerity, such an approach might give the British public something to smile about.

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Full response at: www.bmj.com/content/350/bmj.h1300/rr-6.

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