Beat Diabetes – Let's Join Our Hands to Accomplish WHO Theme 2016

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Abstract

Diabetes mellitus is a major public health problem. A number of oral diseases have been associated with diabetes mellitus including xerostomia, candidal infections and periodontitis. The risk of periodontitis is increased by approximately threefold in diabetic individuals compared with non-diabetic individuals. Lifestyle changes, oral health education, dental care and self-monitoring need to be strengthened for diabetic patients

Key words: Diabetes, Oral Health, WHO

Introduction

World health Organization on World health day celebrates the theme "Beat Diabetes" for the year 2016. It focuses on ways to halt the rise of diabetes worldwide through scaling up prevention, strengthening care and enhancing surveillance. Literature supports the fact that early detection of diabetes is the key to effective management. To achieve the mentioned objective, it is pertinent that oral health should be given due importance. Evidence suggests that periodontal changes are the earliest manifestation of diabetes mellitus. Thus if effective partnership is made between oral health and diabetes related disorders, we can hope to reduce the burden of diabetes.

The relationship between oral health & Diabetes mellitus

Diabetes mellitus affects people of all ages, and its prevalence has been increasing. According to WHO, About 350 million people worldwide have diabetes, a number likely to more than double in the next 20 years. Half of those with diabetes remain undiagnosed. In 2014, 9% of adults 18 years and older had diabetes. In 2012 diabetes was the direct cause of 1.5 million deaths across the world. More than 80% of diabetes deaths occur in low- and middle-income countries.[1] People with diabetes have a substantially higher risk of mortality and shorter life expectancy than do those without diabetes.[2]

A number of oral diseases and disorders have been associated with diabetes mellitus, like xerostomia, candidal infections, taste and salivary dysfunction, burning mouth syndrome, lichen planus, gingivitis and periodontitis.[3] In contrast to other reported oral manifestations of diabetes mellitus, periodontal disease is a recognized and well-documented complication of diabetes and has been identified as a possible risk factor for poor metabolic control in subjects with diabetes. The risk of periodontitis is increased by approximately threefold in diabetic individuals compared with non-diabetic individuals. The majority of research has focused on type 2 diabetes mellitus as a risk factor for periodontitis, probably because both diseases have historically tended to develop in patients in their 40s and 50s. However, type 1 diabetes mellitus also increases the risk of periodontitis, and all patients with diabetes (including children and young adults) should be considered to be at increased risk of periodontitis.There is emerging evidence to support the existence of a two-way relationship between diabetes and periodontitis, with diabetes increasing the risk for periodontitis, and periodontal inflammation negatively affecting glycemic control.[4]

Conclusion

Diabetes as major chronic disease is increasing in developing countries, it has been recognized that the conditions in which people live, work and their lifestyles influence their health. So lifestyle modification including healthy diet and regular exercises along with stress free environment plays a very important role in diabetes prevention.

Controlling diabetes is likely to reduce the risk and severity of oral diseases like periodontitis. Early diagnosis and prevention are of fundamental importance to avoid the largely irreversible tissue loss that occurs in periodontitis, and early referral of adults and children with poorly controlled diabetes to dental clinicians is indicated for periodontal screening. Dentists can reduce the morbidity and mortality associated with diabetes by maintaining their patients' oral health.

Recommendations

- By integrating oral health into strategies for promoting general health, health planners can greatly enhance both general and oral health.
- Enough evidence exists about oral health disorders as a manifestation of various general health issues
- Oral health should be promoted in people with diabetes as an integral component of their overall diabetes management.
- Closer collaboration between medical and dental clinical teams is necessary for the joint management of people with diabetes and periodontitis, and contact with dentists is important after the diagnosis of diabetes.
- Coordinated international and national policies are needed to reduce exposure to the known risk factors for diabetes and to improve access to and quality of care.
- All ministries of health need to set national targets to control diabetes and lead the development and implementation of policies and interventions to attain them.

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