

Improving Oral Health and Reducing Inequalities in the North East and North Cumbria: Water Fluoridation

30th January 2024

We will tackle the challenges in three phases

Improving access to dentistry will not be a quick fix

We are tackling this in three streams:



Immediate actions to stabilise services



A more strategic approach to workforce and service delivery



Developing an oral health strategy to improve oral health and reduce the pressure on dentistry

There are well evidenced interventions to improve oral health



Return on investment of oral health improvement programmes for 0-5 year olds*

Reviews of clinical effectiveness by NICE (PH55) and PHE (Commissioning Better Oral Health for Children and Young People, 2014) have found that the following programmes effectively reduced tooth decay in 5 year olds:



Targeted supervised tooth brushing programme

Varnish

A targeted fluoride varnish programme



Water fluoridation provides a universal programme



Targeted provision of toothbrushes and paste by post





After 5 years

After 10 years



£1 spent = £3.66



£1 spent = £2.74



£1 spent = £12.71

£1 spent = £21.98



£1 spent = £1.03

£1 spent = £1.54





1 spent = £4.89

£1 spent = £7.34

*All targeted programmes modelled on population decayed, missing or filled teeth (dmft) index of 2, and universal programme on dmft for England of 0.8. The modelling has used the PHE Return on Investment Tool for oral health interventions (PHE, 2016). The best available evidence has been used in this tool and where assumptions are made these have been clearly stated PHE Publications gateway number: 2016321

There are four key facets of good oral health

Using fluoride toothpaste

Regular checkups

Application of fluoride varnish when needed

Whole population water fluoridation

All four UK Chief Medical Officers advocate water fluoridation as an effective public health intervention

- The Government wants to expand water fluoridation across the North East to reach an additional 1.6 million people.
- This is subject to public consultation and due to start early 2024.
- Some areas in the North East are already covered by water fluoridation scheme since 1969. This scheme would cover Northumberland, County Durham, Sunderland, South Tyneside and Tees Valley, including Redcar and Cleveland, Stocktonon-Tees, Middlesbrough and Darlington

Why is this important?

- Tooth decay is largely preventable. However, it remains a serious health problem
- In the region [details of oral health need / health improvement focus].
- Water fluoridation is an effective and safe public health measure.
- Fluoride in water can reduce the likelihood of experiencing dental decay and minimise its severity.
- The effect of fluoridation on hospital admissions to have teeth extracted is substantial
- The impact is greatest for those areas with higher health needs and can reduce this inequality, especially with regard to children living in the most disadvantaged circumstances

The consultation

- The government has the power to introduce water fluoridation schemes subject to consultation.
- This process is not a referendum.
- It is a chance to provide more detail on the proposal, the areas affected and give people the opportunity to respond to it.
- The consultation will run for at least 12 weeks.
- After this, ministers will take final decisions on whether to proceed.
- Views are to be sought on whether or not to ask the water company to increase levels of fluoride in water to improve dental health.
- Depending on the outcome, work will be undertaken with the water company over the next few years to implement the scheme.

Achieving consensus across the NE

- Local Dental Committees, individual dentist support, paediatric dentists, Dental School and academic dental support
- All NE Directors of Public Health
- HWBs, scrutiny committees, individual members/MP, seeking support from every local authority
- Regional NHSE, NENC ICB, NHS FTs, GPs and medical directors
- Parents and communities