

Policies and Programs for Oral Healthcare in Older Adult Populations from a Global Perspective

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Received: 3-May-2022, Manuscript No. heor-22-67870; **Editor assigned:** 16-May-2022, PreQC No. heor-22-67870 (PQ); **Reviewed:** 18-May -2022, QC No. heor-22-67870 (Q); **Revised:** 21- May -2022, Manuscript No. heor-22-67870 (R); **Published:** 30- May -2022, DOI No. 10.35248/2155-9562.2022.8.5.228.

Introduction

In the vast majority of nations, both the proportion and quantity of older individuals are rising quickly. According to UN projections, there were 703 million older persons worldwide in 2019 who were 65 years of age or older; by 2050, this number is expected to increase to 1.5 billion. By 2050, there will be 16% more elderly persons worldwide than the anticipated 9% in 2019. Northern Africa and Western Asia will have the fastest population aging in the next decades, whereas Europe and North America will experience the slowest rate of population aging since their populations are already much older than those in other regions of the world. Around the world, and especially in emerging nations, the percentage of elderly people is rising. In the upcoming decades, health and social policy-makers will confront enormous problems brought on by the rapidly increasing burden of chronic diseases in old age. Non-communicable diseases are quickly overtaking communicable diseases as the primary causes of disability and mortality. There are similar risk factors for chronic illness and the majority of oral disorders. The high rates of tooth loss, dental caries, and the prevalence of periodontal disease, xerostomia, and oral precancer/cancer have all been found to be particularly pronounced indicators of poor oral health in elderly persons globally. A fundamental human right is a right to good oral health, which is crucial to overall health. It significantly affects a person's quality of life and adds to their physical, mental, and social well-being. There are numerous, intricate connections between dental health and overall wellness. Oral disorders like periodontitis are linked to systemic diseases like endocarditis and diabetes mellitus, whereas systemic diseases can affect oral health indirectly through changes in behavior brought on by the condition. Older individuals' overall health benefits from oral disease prevention and oral health promotion, which can enhance their quality of life.

Policymakers need to address the significant public health issue of the detrimental effects of poor dental health on the quality of life of older persons. The main difficulty is to turn information into action programs for older people's oral health because the tools for improving program execution for oral health are already accessible. To improve the oral health of the elderly, the World Health Organization advises that nations implement specific measures. For oral health, national health authorities should create policies as well as quantifiable objectives. Incorporating oral health promotion and disease prevention using the common risk factors approach should be a part of national public health programs. Worldwide, adults are frequently afflicted with periodontitis and dental cavities.

According to estimates from the middle of the 2010s, 11% of people had severe periodontal disorders, while 35% of the world's population had untreated caries.

Another significant hardship for a culture that is becoming older is extensive tooth loss, which grows exponentially with age. Following the 2019 Worldwide Burden of Diseases, Injuries, and Risk Factors Study (GBD), oral diseases impact more than 280 million older persons who are 70 years of age or older and are one of the main causes of global Disability-Adjusted Life-Years (DALYs). According to a recent study, the estimated prevalence and incidence of oral diseases in older persons worldwide (including untreated dental caries, periodontitis, edentulism, and other oral problems) were 57%-77%, respectively.

In both wealthy and developing nations, the most attention is required for marginalized, vulnerable communities. Due to a lack of dental professionals, providing primary oral health care is particularly difficult in developing nations. The demands of elderly persons in need of oral care should be taken into account when reorienting oral health services in industrialized nations toward prevention. The biological and psychological facets of caring for elderly persons must be thoroughly understood by oral health care practitioners, and this requires extensive training and education. Public health research has to be bolstered, especially in poor nations, to enhance oral health; it should not only concentrate on the biological and clinical components of oral health care.

Cite this article: Gassen J. Policies and Programs for Oral Healthcare in Older Adult Populations from a Global Perspective. Health Econ. Outcome Res. 2022,8(5), 001.