0784 Outcomes of Workplace Oral Health Promotion: Was There Clinical Improvement?

A.M. REY, S. MAURIELLO, K. MOSS, R. MCKAIG, R. STRAUSS, and J. BECK, University of North Carolina, Chapel Hill, USA

Previous research has indicated that workplace lay health advisors and personalized health newsletters may be effective health promotional interventions for positive health changes. These interventions were used in small factories located in rural eastern North Carolina. **Objectives:** To determine if oral health measures changed as a result of the use of educational interventions and the provision of automated toothbrushes. **Methods:** Three intervention (N=85) and one control site (N=60) were included. Clinical data were collected by a calibrated examiner, including a plaque index (PQ), gingival index (GI), pocket depth (PD), and cementoenamel junction (CEJ) measurements. Attachment loss (AL) was calculated from PD & CEJ measures. After collecting the baseline clinical data, educational sessions were conducted for the lay health advisors, personal newsletters with health findings and recommendations were generated and delivered and automated toothbrushes were distributed to the intervention sites. Follow-up exams were conducted eleven months after the intervention. A paired t-test was used to determine a statistical difference in scores between the baseline and follow-up visits. For analysis, extent scores were defined as PD \(\geq 4\) mm, AL \(\geq 3\) mm, PQ \(\geq 1\) and GI \(\geq 1\). **Results:** PD, PQ, and especially GI, scores were reduced from baseline to follow-up in both intervention and control groups, but were not significantly lower (p>0.05). There was a trend for less AL in the control group from baseline to follow-up, but a slight increase in the intervention groups (p>0.05). **Conclusion:** Trends toward improvement were seen in clinical dental measures between baseline and follow-up visits for control and intervention groups. Although lower extent scores were seen in most of the clinical extent measures, it appears that a more robust clinical intervention, such as periodontal therapy, may be needed in order to produce a significant change in the measures studied. Supported by: NIH P60-DE13079 and CDC-U48/CCU409660.

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