

Platform for Better Oral Health in Europe - comments on the Preliminary Opinion on Access to Health Services in the European Union

06 November 2015

The below comments respond to the consultation on the basis of the preliminary opinion on Access to Health Services in the European Union:

http://ec.europa.eu/health/expert_panel/opinions/docs/010_access_healthcare_en.pdf

Introduction

The Platform for Better Oral Health in Europe welcomes the opportunity to provide its input to the public consultation on equity of access to health services in the EU. Oral diseases remain a major public health problem both in Europe and worldwide. They have a mutual relationship and share common risk factors with many chronic diseases. Oral diseases have considerable negative impacts on the quality of life of populations, and oral health should be considered a human right rather than an optional extra in healthcare planning and provision. The Global Burden of Disease Study (2010) showed that oral conditions collectively affected 3.9 billion people worldwide. As the life expectancy of populations increases, this burden will continue to grow.

As with general health, oral health inequalities are a major challenge in EU, with an excessive oral health burden compounded on the more deprived groups in society. Furthermore, ensuring access to oral healthcare services remains a major barrier particularly among vulnerable and low income groups. These individuals generally attend services less frequently than the general population. When they do attend they do so for emergency treatment when in pain, rather than for preventive care. In fact, there are rising inequalities both within Member States and across Member States in terms of access to appropriate oral care.

A recent study published on the global economic impact of dental diseases suggests that the economic impact of dental diseases in Europe amounted to 123.56 billion Euros in 2010 with the highest productivity losses found in Western Europe; this includes 81.56 billion Euros in direct costs of treatment and 42.00 billion Euros in indirect costs. Looking only at the 27 EU countries, the direct costs of treatment in 2010 were estimated to 72.96 billion EUR, while the respective productivity losses approximated 37.56 billion EUR. The World Health Organization (WHO) estimates that diseases of the oral cavity are the fourth most expensive to treat. This figure does

not take into account subsequent loss of productivity. Expenditure on dental health is likely to exceed that for cancer, heart disease, stroke or dementia.

1. Financial resource linked to health need

The Preliminary Opinion on Access to Health Services in the European Union rightly emphasises that austerity should not detrimentally impact the availability of public funding for meeting the unmet health needs of the population, particularly as low public spending is often correlated to problems with access for the population.

In the context of the burden of oral diseases, which account for 5% of public health spending and impact the majority of school-aged children and adults, there is a clear health need. Dental caries, oral cancer, and periodontal diseases are largely preventable and as such necessitate the prioritisation of primary care and prevention as a fundamental health need. Comorbidities between oral disease and chronic conditions such as diabetes, pneumonia and heart disease can lead to additional complications for patients, while for pregnant woman, poor dental health has been linked to adverse pregnancy outcomes. This further necessitates monitoring initiatives for these at risk populations to prevent the development of potentially dangerous adverse events.

The Platform for Better Oral Health in Europe further recommends that due to the high cost of treatment of oral diseases, specific mention of investment in oral health prevention, and access to preventive oral health promotion programmes and clinical prevention is included in the country-specific recommendations in the European Semester (i.e. need to investment in oral health to ensure sustainability of healthcare systems).

2. Services are affordable to everyone

Primary and preventive dental care is not covered or underrated by public insurers across many Member States and is often considered elective in private coverage. This variation in the benefits packages available to the population places a greater risk on those who are not aware of the possibility of having dental care services as part of their health package or those who cannot afford the additional care. The creation of such inequalities has a disproportionately negative impact on the most vulnerable in the population, including children, minority groups, the unemployed, and the elderly.

3. Services are relevant, appropriate and cost effective

The Preliminary Opinion calls for the establishment of guidelines and their monitoring to ensure their relevance, appropriateness and cost-effectiveness. The Platform for Better Oral Health in Europe fully supports the need for building a coherent European strategy to improve oral health, including the provision of quantifiable targets. The strategy and quantifiable targets must however reflect oral health levels in the respective Member States and must not impair activities to further improve oral health in any EU Member State.

This should further be supported by the building up of data and knowledge on oral health including valid, harmonised assessments of preventive and interventive treatment needs, as well as the exchange of best practice examples across and within Member States.

4. Well-equipped facilities are within easy reach

Provision of high quality oral care should be available to all patients across Europe. To increase accessibility, oral health care services should be offered within a reasonable distance from or even in the community where people live. Access issues often involve getting to locations where people live such as institutions or community centres, integration of oral health care in community health care centres, the use of mobile units, etc.

Unfortunately barriers to care exist and for many older patients there is evidence of inequality of access to oral healthcare services, with those over the age of 50 years experiencing income-related barriers to preventative care. Accordingly the financial cost of tooth loss disproportionately affects older age groups.

5. There are enough health workers, with the right skills, in the right place

The availability of a well trained staff of healthcare professionals is imperative for the delivery of quality healthcare to patients. The Platform for Better Oral Health in Europe strongly supports the development of cross-sectoral approaches between the health and social care professions, as well as the general development of the dental team workforce. Expanding the number of dental hygienists, dental therapists and dental nurses in Europe, especially in those countries where the profession does not exist at all, will contribute to the oral health and the quality of life for many Europeans. In addition, emphasis on public health approaches and the strengthening of the public health teams so that they also cover issues related to oral health must be seen as a priority. The inclusion of the social care professions is particularly critical in the case of oral health as dental health problems can start early, making home and community interventions critical for their avoidance. Oral health promotion programmes at schools, or in the pre-natal stage, for example, can have a positive impact on dental health, helping to develop positive habits and avoid complications later in life. Adopting positive habits towards (oral) health may facilitate adoption of healthy behaviour preventing other lifestyle related diseases

Another example is in the case of older patients in nursing / residential care homes, where provision of care is equally important given the increasing numbers of older patients who have retained their own natural teeth. An emphasis on prevention of chronic oral diseases is essential with operative intervention provided according to minimally invasive approaches. Education of staff caring for older patients is essential to ensure that they form an active part of the dental team.

6. Quality medicines and medical devices are available at fair prices

Oral health services account for a significant portion of both public and private healthcare spending, with the projected figure for direct expenditure being estimated as 93€ billion by 2020

(with significant additional indirect costs such as loss of productivity). Yet dental diseases, which are expensive to treat, can be largely avoided if investment is made into prevention of tooth decay and oral disease, to achieve improved health outcomes and reduced long-term costs. Recommending and promoting widely use of qualitative oral hygiene products on affordable prices can be one aspect.

7. People can use services when they need them

A significant part of access is the ability of people to use healthcare services when they need them. This avoids long term cost by allowing healthcare professionals and patients to take the necessary steps to avoid disease progression. For oral health, the avoidance is strongly linked to the need for patient literacy. Patients must seek out help before small aches become big problems and lead to avoidable complications. Member States should thus have a comprehensive strategy on oral health in place as based on central EU guidelines alongside school-based oral health prevention programmes and integrated oral health advice in curricula of primary and secondary schools. Public health campaigns should also be implemented to help promote oral health in the population.

8. Services are accessible to everyone

The Platform strongly supports the goal of Provision of high quality oral care being made available to all patients across Europe. A critical component in access, particularly for areas of health traditionally overlooked in health policy such as oral health, it is critical that awareness-raising initiatives are taken up at both European and Member State level. The Platform for Better Oral Health in Europe recommends the creation of an oral health communications plan that would highlight the importance of good oral hygiene, fluoride use, reduction of sugar consumption, and adoption of healthy diet for well-being among all EU citizens.

9. Access for Roma, undocumented migrants and people with mental health problems

All vulnerable and disadvantaged groups are at a major risk for developing oral diseases. Roma, undocumented migrants, those with intellectual disabilities (an extension of the draft opinion which focuses on persons with psychiatric disorders), those with cognitive impairment including dementia and low income and social capital groups including many older patients with limited pension resources tend to attend regular preventative care services much less frequently than the general population. Instead, they are more likely to forego treatment until in an emergency situation. This leads to additional complications that could have been avoided in a preventive care setting. Demographic changes anticipated over the next decade magnify the importance of addressing racial/ethnic disparities in health and health care.

10. Ensuring equitable access: EU and Member State responsibilities and responses

To help reduce the inequalities between Member States with regard to oral health and its link to some chronic conditions, the Platform for Better Oral Health in Europe recommends that the European Commission works with relevant healthcare stakeholders – including representatives

from the dental professions as well as patients – to develop a specific EU Action Plan on Oral Health. This coincides with the European Commission’s existing strategy for reducing health inequalities in Europe and would ensure that all Member States are moving in a cohesive direction toward improving oral health. To understand the existing inequalities and hurdles in Member States, the Platform for Better Oral Health in Europe further recommends that the European Commission prioritises oral health and provides a platform for the facilitation of the exchange of best practice for oral disease prevention, improving data collection, and adopting strategies to reduce the detrimental effects of common risk factors on dental health.

The European Commission should establish, alongside Member States, a joint action on oral health that would focus on appraising current oral health promotion initiatives, identifying gaps, and formulating specific public health interventions to effectively contribute to improved oral health.

Member States should adapt their healthcare expenditure to ensure that oral health is covered through public awareness and education initiatives, as well as primary care, to help reduce the incidence of oral disease and related complications.

About the Platform

The Platform for Better Oral Health in Europe is a joint initiative of the Association for Dental Education in Europe (ADEE), the Council of European Chief Dental Officers (CECDO), the European Association of Dental Public Health (EADPH) and the European Dental Health Foundation (EDHF). Its work is supported by the Wrigley Oral Healthcare Program and GlaxoSmithKline. The Platform also has 14 associate members, representing national oral health promotion groups, and European associations of dental professionals (including orthodontists, periodontologists, dental hygienists etc.).

The Platform was created to respond to the Call to Action for Better Oral Health in Europe handed over to then Health Commissioner John Dalli by several Members of the European Parliament in 2010. The mission of the Platform is to promote the benefits of good oral health and the cost-effective prevention of oral diseases in Europe.

The Platform seeks a common European approach towards education, prevention and access to better oral health in Europe. The Platform is a collaborating partner to the Joint Action on Workforce Planning and the Joint Action on Chronic Diseases of the European Commission.

The Platform has recently launched a new website where you can find resources and policy documents on oral health policy in Europe

www.oralhealthplatform.eu

Contact us

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The Platform registered on the EU institutions' Joint Transparency Register, registration number 672133316550-32.