

# Obesity and Dentistry

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## Possible factors relating Obesity and Dental Disease

- Intake of refined carbohydrates
- Television exposure including snack food advertisements
- Sedentary activities
- Inadequate family time including development of healthy lifestyles
- Inadequate control of food choices, lifestyle education and physical activity in school environments

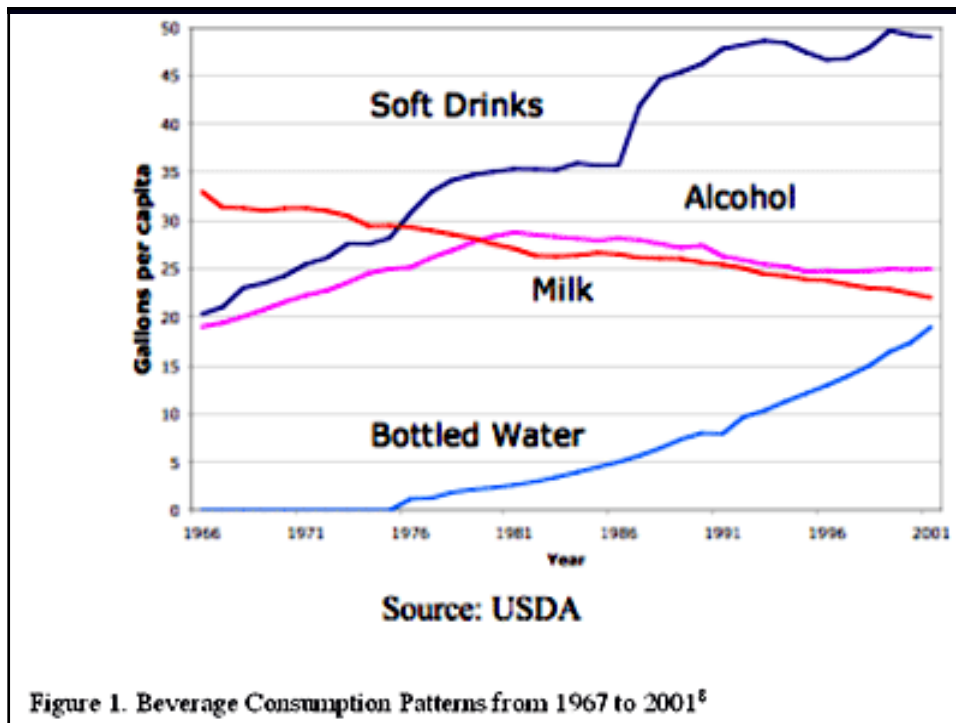


Figure 1. Beverage Consumption Patterns from 1967 to 2001<sup>6</sup>

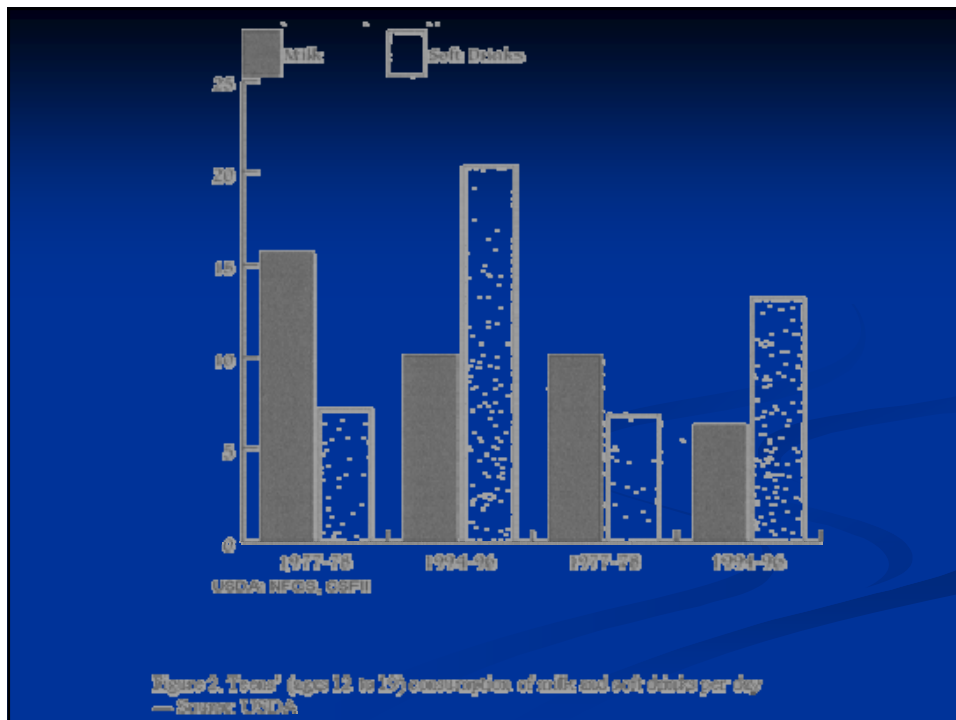


Figure 2. Teens' (ages 13 to 15) consumption of milk and soft drinks per day  
— Source: USDA

## Earlier Publications

- Larsson, B. et al. (1995) Community Dent Oral Epidemiol 23:205-210
  - Willershausen, B. et al. (2004) Eur J Med Res 9:400-404
  - Hilgers, K.K. (2006) Pediatr Dent 23:23-38
- Positive correlation between caries experience in permanent dentition and overweight status

## Recent Publications

- Dye, B.A. et al. (2004) J Am Dent Assoc 134:55-65
- No relationship between weight status and caries experience in primary dentition of US children 2-5 years of age

## Recent Publications

- Kopycka-Kedzierawski, D.T. et al. (2008)  
Community Dent Oral Epidemiol 36:157-167
  - No difference in caries experience between normal, at risk for overweight and overweight US children 2-18 years of age

## Diabetes and Periodontal Disease

- Loe H. (1993) Diabetes Care 16(1):329-34
  - Higher rate of inflammation and tooth loss among diabetics

## Diabetes and Periodontal Disease

- Stewart JE, et al. (2001) J Clin Periodontol 28(4):306-10
- Westfelt E, et al. (1996) J Clin Periodontol 23(2):92-100
  - Periodontal therapy improves glycemic levels

## Current Oral Health Guidelines and Obesity

- Balanced diets
- Oral hygiene
- Physical activity
- Monitoring by dental health professionals
- Education to promote oral health and prevent obesity in schools and public health programs