

## PREVALENCE OF CARIES IN CORDOBA SCHOOL-CHILDREN. CORA NATIONAL PREVENTION PROGRAM.



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### BACKGROUND

The National Prevention Program of CORA (Oral Health CORA) has been working in Cordoba since 1997. It works by training teachers to develop health education projects in urban and rural schools.

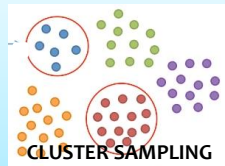
### OBJECTIVE

To determine the prevalence of caries in school children of ages 6 and 12 years from urban and rural schools under a preventive program of Cordoba. Its results will be contrasted with those of the rest of the country.

### MATERIALS AND METHODS

This was a cross-sectional study conducted on 228 children of age 6 and 216 of age 12 from urban and rural schools of Cordoba under de program "Oral Health CORA".

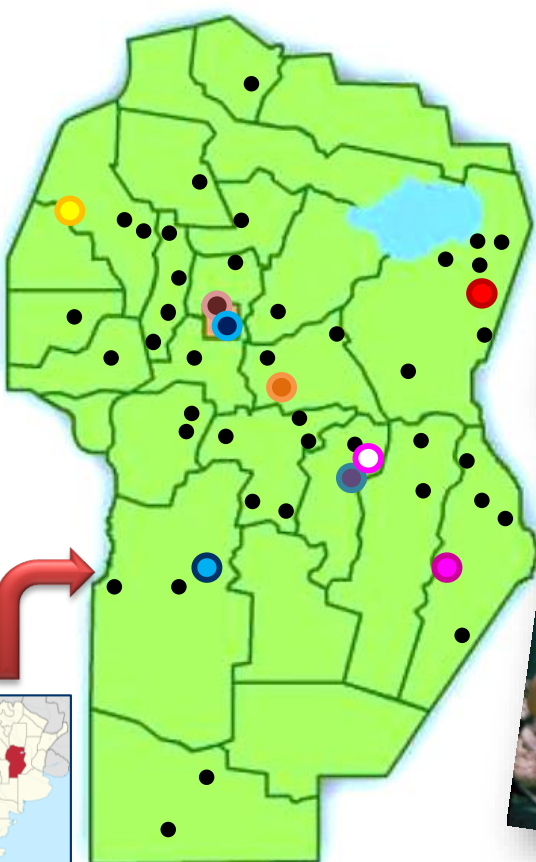
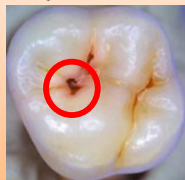
An exploratory survey was carried out according to WHO (1) criteria for epidemiological studies of oral diseases.



The data collection was performed at school, by visual examination, with natural light, without instruments(2) Informed consent was signed by parents.

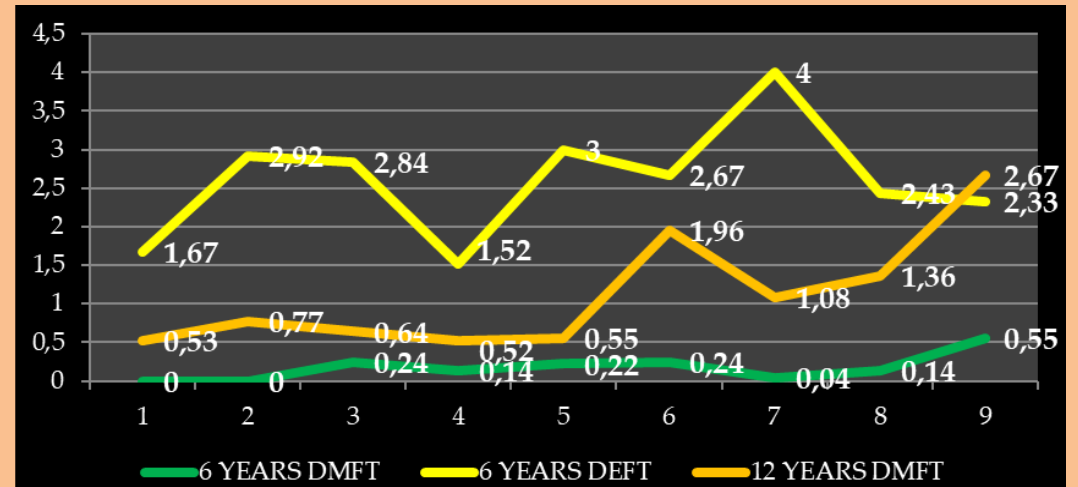


The DMFT and DEFT Index (3) were used. Caries was considered as the cavitated lesions corresponding to code 5 of ICDAS II (4). Descriptive statistics was applied: average and standard deviation.

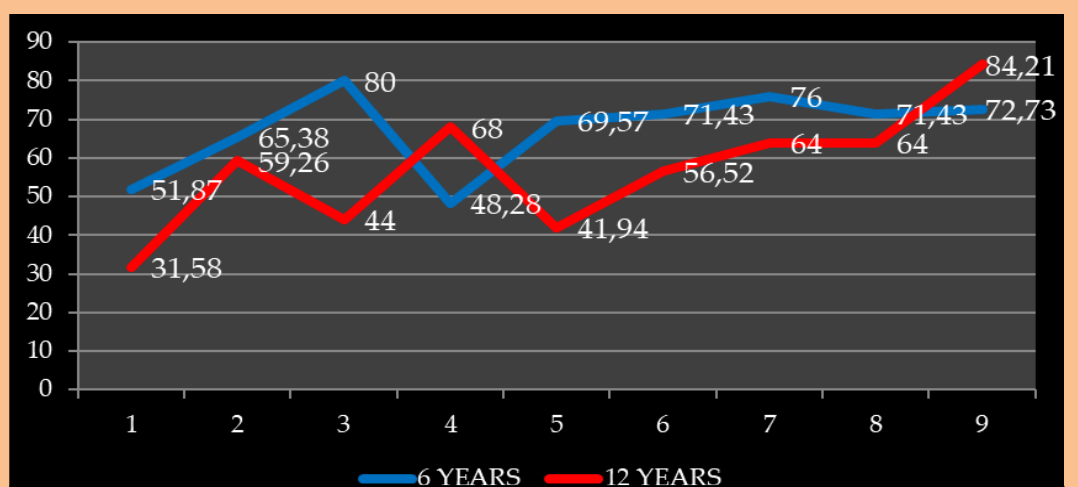


### RESULTS

- In the whole group, DEFT at 6 years children was 2.54 ( $\pm$  2.87) and DMFT: 0.18 ( $\pm$  0.58) and at the age of 12 years, DMFT was 1.16 ( $\pm$  1.66).
- The average percentage of children presenting caries at age 6 was 67,41% and at age 12 was 57,06%.



GRAPHIC 1: DMFT- DEFT of children ages 6 and 12 year old



GRAPHIC 2: Caries experience in children of 6 and 12 years old

CODE	TYPE OF SCHOOL AND LOCALITY	6 YEARS n	12 YEARS n
1	PUBLIC - CAPITAL	27	19
2	PUBLIC - CAPITAL	26	27
3	PUBLIC VILLA MARIA	25	25
4	PRIVATE VILLA MARIA	29	25
5	PUBLIC RIO CUARTO	23	28
6	RURAL ONCATIVO	21	23
7	RURAL SERREZUELA	25	25
8	RURAL FREYRE	21	25
9	RURAL MONTEBUEY	31	19

### DISCUSSION

DMFT rates measured at age 12 place this group at a range of low level of caries (Low= DMFT: 1.2-2.6) according to WHO parameters (5). This differs from the data published by other authors who place the national median at moderate DMFT (6). DMFT and DEFT rates registered at ages 6 and 12 were lower than the national median registered in a similar study carried out in Argentina in 2013 (6). As regards the objective proposed by WHO/FDI (7): DMFT from ages 3 to 12 yr, the results obtained are below it. However, the rate of 50% of children with no caries is not achieved yet. This coincides with the results of another national study (8).

### CONCLUSION

It was possible to know the prevalence of the caries experience in school-children of 6 and 12 years old of urban and rural schools under the Córdoba program.

The schools of the province sustain the project with continuity for 20 years. Ministerial recognition and agreements with public health have been achieved. Strong institutional commitment of FOPC and Círculos Odontológicos. Commitment and altruism are highlighted in the work group. The social context strongly conditions the dental caries process.

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