



## FDI POLICY STATEMENT

### Oral health for healthy ageing

Revised version adopted by the FDI General Assembly: September 2023,  
Sydney, Australia

Original version adopted by the FDI General Assembly: September 2009,  
Singapore, Singapore

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#### 2 **CONTEXT**

3 As the world's population ages, the cumulative effect of oral health on healthy ageing  
4 becomes more significant. While a healthy and functional dentition is a fundamental  
5 part of general health and wellbeing, oral health professionals should promote and  
6 provide better integration of oral health care into general health care systems as a  
7 life course approach in support of the United Nations Decade of Healthy Ageing  
8 2021–2030.

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#### 10 **SCOPE**

11 The purpose of this policy statement is to raise awareness of the fundamental role of  
12 oral health practitioners in screening, prevention treatment and rehabilitation and that  
13 appropriate referrals are provided as a component of an integrated community health  
14 care system. These services are crucial for preventing and treating oral diseases as  
15 well as promoting oral functions, like eating, talking and interacting with others, which  
16 are linked to the delay and prevention of frailty. These services are also crucial for  
17 their contribution to the prevention or stabilization of certain general health conditions  
18 such as noncommunicable diseases, infectious diseases and neurocognitive  
19 disorders.

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#### 21 **DEFINITION**

22 **Healthy ageing:** Reacquiring and maintaining the functional capacity that promotes  
23 well-being as people age.

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#### 25 **PRINCIPLES**

26 This policy statement calls on oral health professionals and organizations to go further  
27 than preventing and treating oral diseases, and to work in partnership with their local  
28 communities to develop appropriate and consistent methods for evaluating and  
29 screening oral functions at all health care levels. Oral health practitioners should  
30 identify and monitor oral function decline. Oral health practitioners should attempt to  
31 measure and document even slight decreases in components of oral function such as  
32 tongue function, lip function, saliva production and eating and swallowing functions.  
33 Additionally, using screening programmes, such as the Kihon checklist<sup>4</sup>, can expand

34 traditional dental evaluation. These would aim to measure and document even slight  
35 decreases in components of oral function such as tongue function, lip function, saliva  
36 production and eating and swallowing functions.

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## 38 **POLICY**

39 Access to adequate oral health care is fundamental at all stages of life, especially in  
40 older populations, in order to establish and maintain healthy ageing and improve  
41 quality of life. FDI recommends the following actions:

42 Oral health practitioners should:

- 43 • understand and appreciate the impact of ageing on the ability to perform daily  
44 activities, such as oral hygiene;
- 45 • detect and manage poor oral health among older people to prevent frailty;
- 46 • engage in cooperative efforts with their local communities that focus on person-  
47 centred assessment, screening of oral functions and assessments of oral health  
48 related quality of life;
- 49 • provide education to maintain oral health and the functions it supports: eating,  
50 talking and smiling, as well as general health;
- 51 • be integrated as part of the aged care multidisciplinary team at all health care  
52 levels.

53 Qualified providers of oral health education should:

- 54 • educate students in the competencies related to geriatric oral health practice.

55 National Dental Associations and related organizations should:

- 56 • urge policymakers to adopt a strategy centred on the evaluation and monitoring of  
57 older adults' oral function, oral health quality of life and the subsequent  
58 multidisciplinary response (including referrals and preventive interventions, etc.)  
59 as a shift towards a person-centred strategy built on interprofessional cooperation;
- 60 • encourage policymakers' understanding that improving health in older adults  
61 should involve reorienting and sustained healthy ageing policies to include greater  
62 concentration and action on oral health;
- 63 • urge policymakers to plan national oral health services for older adults and  
64 improve integration of oral health services in primary health care as part of  
65 universal health coverage;
- 66 • support training and education of non-oral health professionals (e.g., physicians,  
67 nurses and dieticians) in the oral health for older adults to improve integration with  
68 primary care.

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## 70 **KEYWORDS**

71 older adults, healthy ageing, oral functions, oral health professionals

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## 73 **DISCLAIMER**

74 The information in this Policy Statement was based on the best scientific evidence  
75 available at the time. It may be interpreted to reflect prevailing cultural sensitivities

76 and socio-economic constraints.

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