

## Oral Health: Tooth Loss in Vermont



### ORAL HEALTH AND 3-4-50

3-4-50 is a simple concept to help us grasp the reality that **3 health behaviors** contribute to **4 chronic diseases** that are the cause of more than **50 percent of deaths in Vermont**. These same health behaviors and chronic diseases are also associated with poor oral health, including tooth loss from tooth decay or gum disease. Vermonters who use tobacco, are obese or have a chronic disease are more likely to have tooth loss, even after considering other possible explanations, such as education, household income, dental visits in the past year and age. Many of these Vermonters are also less likely to [visit the dentist](#).

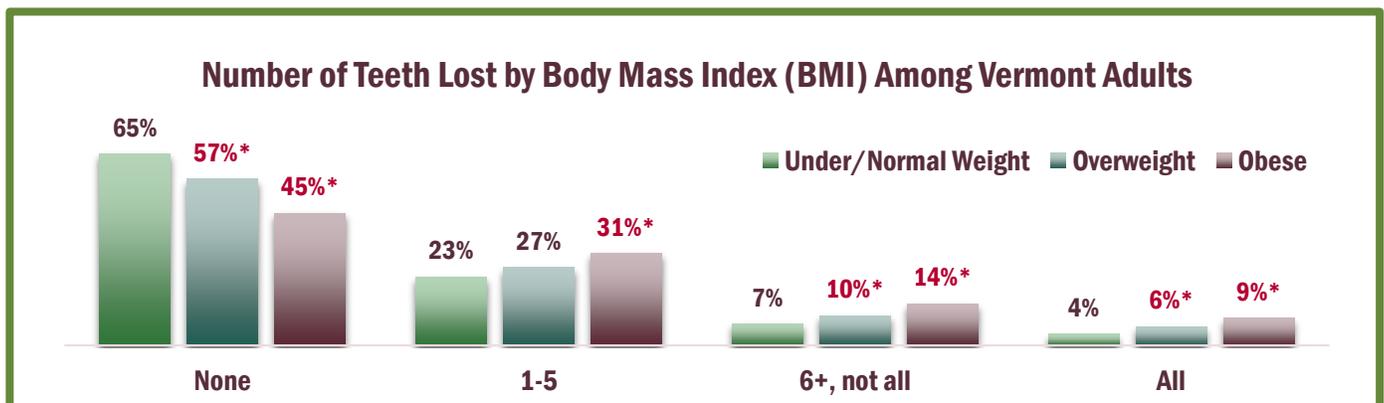
### RISK BEHAVIORS AND TOOTH LOSS

- Vermonters who used tobacco had more tooth loss than those who never used tobacco.
- Vermonters who were obese had more tooth loss, making it harder to eat healthy food. Poor diet and drinking sugar-sweetened beverages have been linked to tooth decay and are risk factors for obesity.



(\* ) notes statistical difference, after controlling for age, education, income, dental visit and BMI

Source: 2014 BRFSS



(\* ) notes statistical difference compared to those who were under/normal weight

Source: 2014 BRFSS

## CHRONIC DISEASE AND TOOTH LOSS

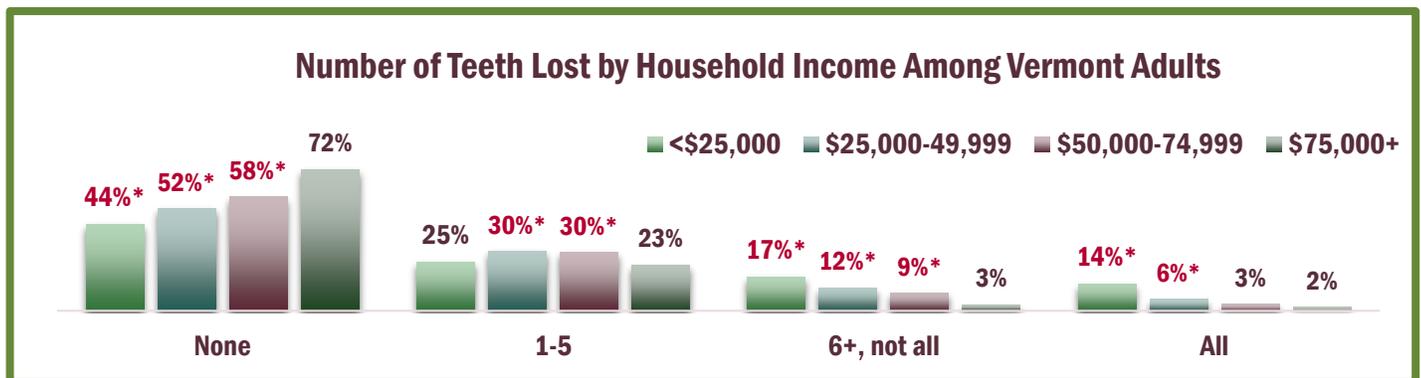
- Vermonters with cardiovascular disease, diabetes or prediabetes, lung disease or cancer were more likely to have lost all of their teeth compared to those without the chronic disease.
- Please note, these data are from one point in time so it is unknown which condition, the chronic disease or tooth loss, occurred first. An association between the two does not mean one causes the other.



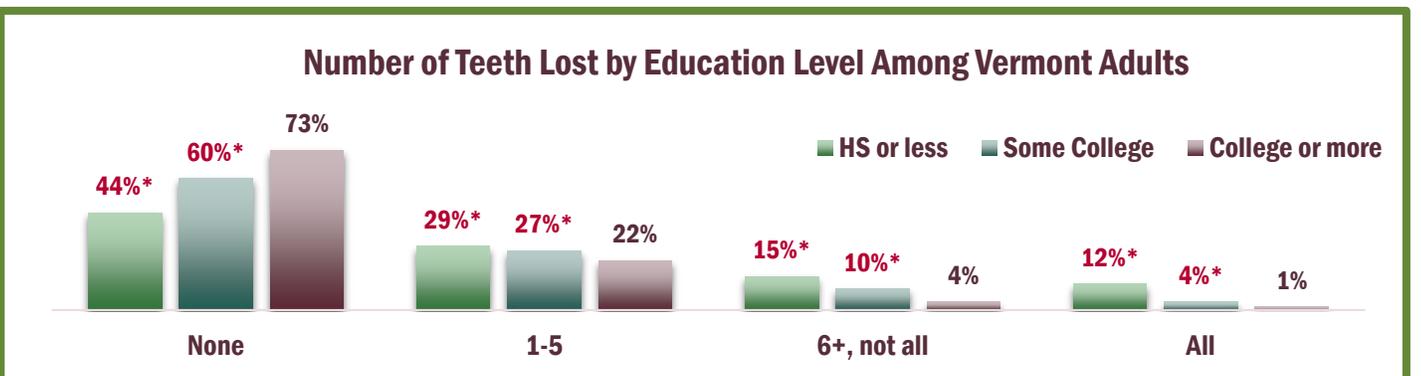
(\* notes statistical difference, after controlling for age, education, income, dental visit, tobacco use and BMI) Source: 2014 BRFSS

## SOCIOECONOMIC STATUS AND TOOTH LOSS

Vermont adults of lower socioeconomic status (lower income levels and less education) reported more tooth loss compared to adults of higher socioeconomic status. They were also more likely to report tobacco use, lack of physical activity, poor diet, and having been diagnosed with a chronic disease.



(\* notes statistical difference) Source: 2014 BRFSS



(\* notes statistical difference) Source: 2014 BRFSS

For questions related to the data presented here, email [3-4-50@vermont.gov](mailto:3-4-50@vermont.gov). To learn more about oral health and chronic disease, see the detailed data brief titled, [Oral Health: Risk Behaviors, Chronic Disease and Oral Health](#).