

한국 성인의 사회경제적 요인과 구강건강수준간의 연관성

Association between the oral health status and the economic factor among Korean adults

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Abstract

The objective of this study was to evaluate relationships between the economic status and the oral health status. Data were obtained from the National Health Insurance Corporation database. The prevalence of dental caries and tooth loss were compared among the ten-percentile according to the level of the monthly income. The prevalence of dental caries and tooth loss were lower in the high level of monthly income than low level of monthly income group. There was a significant relationships between the economic status and the oral health status.

I. Introduction

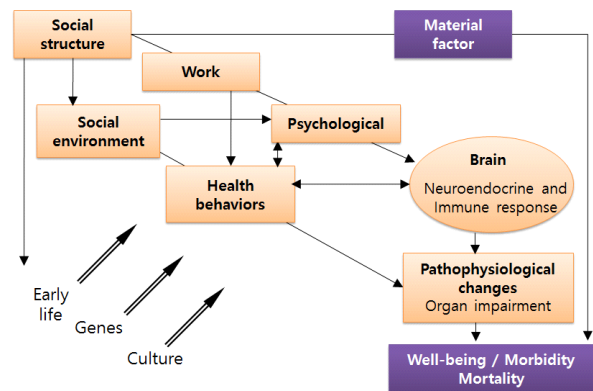
It is widely accepted that there are socio-economic inequalities in oral health. It is suggests that the socio-economic gradient in oral health may be related to social, environmental, political factors, which act through material, behavioral, and psychosocial pathways[1].

The objective of this study was to evaluate relationships between the economic status and the oral health status.

II. Materials and Method

Data were obtained for subjects participating in oral health screening program from the National Health Insurance Corporation database, which included information regarding the demographic, economic status, health behaviors, and oral health status in 2007.

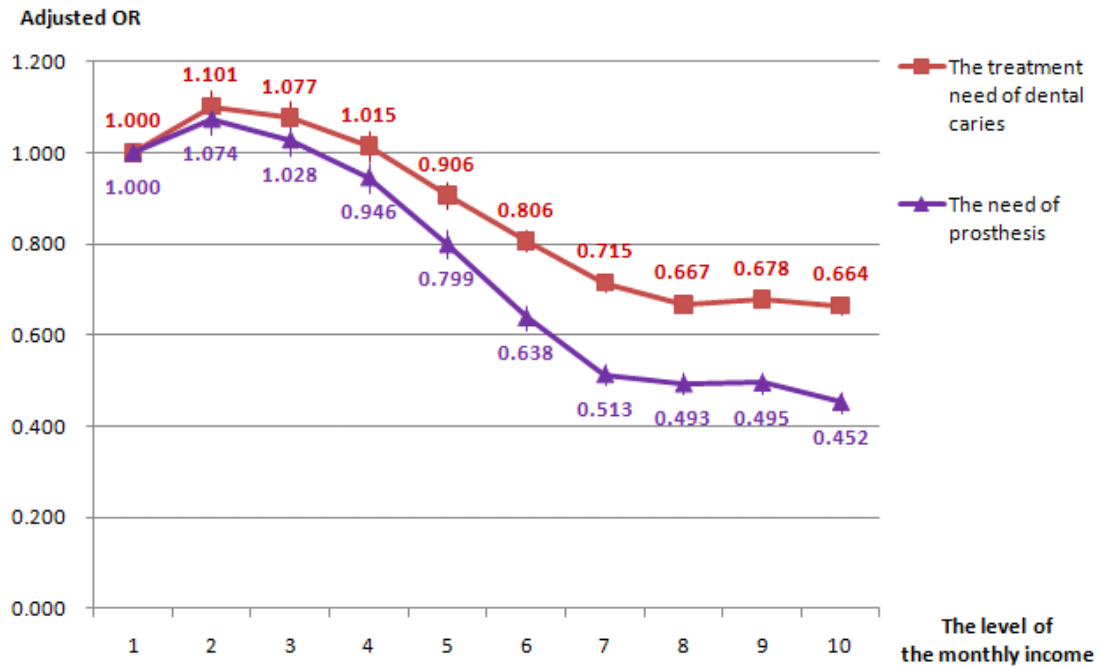
We conducted a cross-sectional study of 442,535 subject who were between 40 and 64 years of age. The prevalence of dental caries and tooth loss were compared among the ten-percentile according to the level of the monthly income. Multivariate logistic regression analysis was carried out adjusting for the age, gender, residential district, water fluoridation.



▶▶ Figure 1. Social determinant of (oral) health status in socio-psychological model

III. Results

The association between the ten-percentile of the monthly income and the prevalence of dental caries and tooth loss remained significant after adjusting for age, gender, residential district, water fluoridation, oral health behaviors such as tooth brushing, consumption of sugar containing food and soft drink, health behaviors such as drinking and smoking, dental utilization. The treatment need of dental caries and the need of prosthesis decreased as the level of monthly income increased.



▶▶ Figure 2. The oral health status according to the level of monthly income

IV. Conclusion

There was a significant relationship between the economic status and the oral health status.

■ 참고 문헌 ■

- [1] Marmot & Wilkinson, "Social determinants of health", Oxford Univ Press, 2nd Edition, 2006.