AUSTRALIA’S
ORAL HEALTH TRACKER
Technical Paper
Second Edition
2020
TECHNICAL NOTE

Australia’s Oral Health Tracker was first released in 2018. This report is the second edition of Australia’s Oral Health Tracker technical paper. This update outlines the latest data on Australian oral health; how these figures compare to the past and how they are tracking against the proposed population health targets for 2025. The baseline data is the available data nearest to the year 2010, while the target year 2025 is in line with the World Health Organization (WHO)’s targets for global prevention and reduction in chronic diseases.

There are limitations in the data that is currently available. Comparative data in this report is drawn from the most recent reputable source for the appropriate age cohort. Where possible, adult statistics have been updated. Children and young people statistics will be updated as further studies and surveys are completed.

PREFERRED CITATION


ACKNOWLEDGEMENTS

The Australian Dental Association (ADA) and the Australia Health Policy Collaboration (AHPC) in cooperation with a working group made up of academics, researchers, epidemiologists, public health experts and dental practitioners developed Australia’s Oral Health Tracker 2018 to inform and influence oral health policies and services in Australia.

The AHPC is led by the Mitchell Institute at Victoria University and brings together leading health organisations and chronic disease experts to translate rigorous research into good policy. The national collaboration has developed health targets and indicators for preventable chronic diseases designed to contribute to reducing the health impacts of chronic conditions on the Australian population.

The Mitchell Institute for Education and Health Policy at Victoria University is one of the country’s leading education and health policy think tanks and trusted thought leaders. Our focus is on improving our education and health systems so more Australians can engage with and benefit from these services, supporting a healthier, fairer and more productive society.

The updated data included in the Oral Health Tracker has been compiled by the ADA, the peak national body for dentists in Australia, with support from the Australian Research Centre for Population Oral Health (ARCPOH) and the Mitchell Institute. Australia’s Oral Health Tracker is a shared resource and it is for use by everyone with an interest in improving the oral health and general health of Australians.
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# ABBREVIATIONS

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ABS</td>
<td>Australian Bureau of Statistics</td>
</tr>
<tr>
<td>ADA</td>
<td>Australian Dental Association</td>
</tr>
<tr>
<td>AHS</td>
<td>Australian Health Survey</td>
</tr>
<tr>
<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
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<td>ARCPOH</td>
<td>Australian Research Centre for Population Oral Health</td>
</tr>
<tr>
<td>NDSHS</td>
<td>National Drug Strategy Household Survey</td>
</tr>
<tr>
<td>NDTIS</td>
<td>National Dental Telephone Interview Survey</td>
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<td>NHMRC</td>
<td>National Health and Medical Research Council</td>
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<td>NOHP</td>
<td>National Oral Health Plan</td>
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<td>NSAOH</td>
<td>National Survey of Adult Oral Health</td>
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<td>PHIDU</td>
<td>Public Health Information Development Unit</td>
</tr>
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<td>WHO</td>
<td>World Health Organization</td>
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</table>
Poor oral health is a significant contributor to the burden of disease in Australia. Oral diseases are among the most common and costly to Australians and the Australian healthcare system, with $10.2 billion being spent on dental services in 2016/17. Many of the conditions that affect the oral cavity are largely preventable, including dental caries, periodontitis, and oral cancers. However, these conditions can have a significant effect on oral health and quality of life, with the ability to cause pain and an increase in days absent from work. In severe cases, these conditions can result in hospitalisation or even lead to death.

Oral diseases share many risk factors with diseases that affect whole-body health. These can include non-nutritious diets high in sugar, tobacco use, and the regular consumption of alcohol at risky levels. In 2005, the World Health Organization (WHO) called for oral health to be integrated with all health care:

“the compartmentalization involved in viewing the mouth separately from the rest of the body must cease because oral health affects general health by causing considerable pain and suffering and by changing what people eat, their speech and their quality of life and well-being.”

Changes to maintain or improve Australian oral health require both individual behavioural change and government policy action. Individual changes should address diet, a reduction in free sugar and alcohol consumption, cessation of smoking, regular exposure to fluorides and regular preventive dental checks. To aid individual changes, government actions must address the determinants of health, including social, lifestyle and economic factors in an attempt to improve the oral health of Australians. A multi-faceted approach is required to address the level of complexity and factors affecting oral health.

This technical paper (second edition) is the accompanying document for Australia’s Oral Health Trackers; Australia’s Adult Oral Health Tracker (2020) and Australia’s Children and Young People Oral Health Tracker (2018).

**TABLE KEY**

- Trend in right direction. **Good progress** towards target. Maintain efforts.
- Trend indicates **no/limited progress** towards target.
- Trend in wrong direction. **Poor progress** against target.
### SUMMARY OF AUSTRALIA’S ORAL HEALTH TARGETS AND INDICATORS

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<tr>
<th>FRAMEWORK ELEMENT</th>
<th>PROPOSED MEASURES TO REACH TARGETS</th>
<th>PROPOSED AUSTRALIAN INDICATORS</th>
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<tr>
<td><strong>Risk Factors and Determinants for Poor Oral Health</strong></td>
<td></td>
<td></td>
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<td><strong>Sugar intake</strong></td>
<td>A 30% reduction in the proportion of Australians consuming too much sugar</td>
<td>• Free sugar consumption is greater than 10% overall energy intake (aged 19+)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Free sugar consumption is greater than 10% overall energy intake (young people 14-18 years)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Free sugar consumption is greater than 10% overall energy intake (children 9-13 years)</td>
</tr>
<tr>
<td><strong>Access to optimally fluoridated drinking water</strong></td>
<td>Increased access to optimally fluoridated drinking water across the Australian population</td>
<td>• Proportion of the Australian population with access to optimally fluoridated drinking water</td>
</tr>
<tr>
<td><strong>Tooth brushing</strong></td>
<td>A 10% increase in twice daily toothbrushing</td>
<td>• Adults (aged 18+) that brush their teeth at least twice daily</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Children (5-14 years) that brush their twice at least twice daily with fluoridated toothpaste</td>
</tr>
<tr>
<td><strong>Dental visiting behaviours</strong></td>
<td>A 10% increase in the proportion of Australians receiving an annual dental check-up</td>
<td>• Adults (aged 18+) that have visited the dentist for a check-up in the previous 12 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Young people (12-17 years) that have visited the dentist for a check-up in the previous 12 months</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Children (5-11 years) that have visited the dentist for a check-up in the previous 12 months</td>
</tr>
<tr>
<td></td>
<td>A 20% increase in the proportion of Australians visiting the dentist before age 5</td>
<td>• Children (aged 5-6) that visited the dentist before age 5</td>
</tr>
<tr>
<td><strong>Alcohol and tobacco consumption</strong></td>
<td>A 20% reduction in long-term risky drinking</td>
<td>• Reported average alcohol consumption of more than 2 standard drinks per day over the last year (aged 14+)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Age standardised prevalence of Australians daily smokers (aged 14+)</td>
</tr>
</tbody>
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## Oral Health Conditions

<table>
<thead>
<tr>
<th>Disease</th>
<th>Target</th>
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<tbody>
<tr>
<td><strong>Dental caries</strong></td>
<td>A 10% increase in the proportion of adults that have never experienced dental caries</td>
</tr>
<tr>
<td></td>
<td>• Adults that have never experienced dental caries in their permanent teeth (DMFT = 0).</td>
</tr>
<tr>
<td></td>
<td>A 10% reduction in the proportion of children that have experienced dental caries</td>
</tr>
<tr>
<td></td>
<td>• Children (5-6 years) that have experienced dental caries in their primary teeth (DMFT &gt; 0)</td>
</tr>
<tr>
<td></td>
<td>• Children (6-14 years) that have experienced dental caries in their permanent teeth (DMFT &gt; 0)</td>
</tr>
<tr>
<td></td>
<td>A 20% reduction in Australians with untreated tooth decay</td>
</tr>
<tr>
<td></td>
<td>• Untreated dental caries (aged 15+)</td>
</tr>
<tr>
<td></td>
<td>• Untreated dental caries in primary teeth (children 5-10 years)</td>
</tr>
<tr>
<td></td>
<td>• Untreated dental caries in permanent teeth (children 6-14 years)</td>
</tr>
<tr>
<td><strong>Oral cancer</strong></td>
<td>Reverse the rise in oral cancer incidence</td>
</tr>
<tr>
<td></td>
<td>• Age-standardised incidence rate of oral cancer per 100,000 population.</td>
</tr>
<tr>
<td></td>
<td>A 15% reduction in oral cancer mortality</td>
</tr>
<tr>
<td></td>
<td>• Age-standardised mortality rate or oral cancer per 100,000 population.</td>
</tr>
<tr>
<td><strong>Gum disease (periodontitis)</strong></td>
<td>A 15% reduction in gum disease (periodontitis)</td>
</tr>
<tr>
<td></td>
<td>• Australians (aged 15+) with periodontal pockets (&gt;4mm)</td>
</tr>
<tr>
<td><strong>Potentially preventable hospitalisations</strong></td>
<td>A 10% reduction in potentially preventable hospitalisations due to dental conditions for children aged 5-9 years</td>
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<tr>
<td></td>
<td>• Refer to measure</td>
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<tr>
<td><strong>Inadequate dentition</strong></td>
<td>Halt the rise in Australians with inadequate dentition</td>
</tr>
<tr>
<td></td>
<td>• Adults (18+) with inadequate dentition/ severe tooth loss (fewer than 21 teeth)</td>
</tr>
<tr>
<td><strong>Toothache</strong></td>
<td>Reverse the rise in adult toothache prevalence</td>
</tr>
<tr>
<td></td>
<td>• Reported toothache in the previous 12 months (aged 15+)</td>
</tr>
<tr>
<td></td>
<td>A 10% reduction in child toothache prevalence</td>
</tr>
<tr>
<td></td>
<td>• Reported toothache in the previous 12 months (children 5-14 years)</td>
</tr>
</tbody>
</table>
### LATEST AUSTRALIAN DATA

As reported in Australia’s Oral Health Tracker 2018, 47.8% of adults exceeded WHO’s recommendation for free sugar intake to be 10% or less than total energy intake. Source: AHS 2011-12, Table 3.1, Australian Bureau of Statistics (2016).

### TECHNICAL NOTE

‘Too much free sugar’ is defined as ≥10% of daily energy (on a usual basis) from free sugars, based on WHO recommendations.

### TARGET

The 2025 target is 33.5%.

### TREND

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 47.8% (AHS 2011-12)
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.

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<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults (19+) consuming too much free sugar</td>
<td>47.8%^</td>
<td>33.5%</td>
<td>No new data</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.
The latest data reports 70.3% and 73.1% of children and young people respectively are consuming too much sugar. *Source: ASH 2011-12.*

**Technical Note**

‘Too much free sugar’ is defined as ≥10% of daily energy (on a usual basis) from free sugars, based on WHO recommendations.

**Target**

The 2025 target is 49.2% and 51.2% for children and young people respectively.

**Trend**

There is insufficient data to determine trends.

**Children**

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 70.3% (AHS 2011-12)
- Australia’s Oral Health Tracker 2020: No new data

**Young People**

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 73.1% (AHS 2011-12)
- Australia’s Oral Health Tracker 2020: No new data

**Latest Indigenous Data**

Comparable Aboriginal and Torres Strait Islander data not available.

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TRENDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (9-13 years) consuming too much sugar</td>
<td>70.3%^</td>
<td>49.2%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
<tr>
<td>Young people (14-18 years) consuming too much sugar</td>
<td>73.1%^</td>
<td>51.2%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.
# ACCESS TO OPTIMALLY FLUORIDATED DRINKING WATER

## Latest Australian Data

As reported in Australia’s *Oral Health Tracker* 2018, as of 2017, 89% of the Australian population had access to optimally fluoridated drinking water. *Source: Australia’s NOHP 2015-2024.*

## Technical Note

Optimally fluoridated drinking water refers to a water supply with fluoride levels ranging from 0.6 to 1.1 mg/L.

## Target

The 2025 target is for 94% of the Australian population to have access to optimally fluoridated drinking water.

## Trend

The latest data suggests progress towards the target.

- Baseline: 82.2% (Australia’s NOHP 2015-2024)
- Australia’s *Oral Health Tracker* 2020: No new data

## Latest Indigenous Data

Comparable Aboriginal and Torres Strait Islander data not available.

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### Table: Access to Optimally Fluoridated Drinking Water

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Latest Australian Data</th>
<th>2025 Target</th>
<th>Baseline Data Against Latest Data</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>89%^</td>
<td>94.0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The proportion of the population with access to optimally fluoridated drinking water.

^Unable to update data. No new comparable data.
## LATEST AUSTRALIAN DATA

The latest data indicates 53% of Australian adults brush their teeth twice daily. Source: ADA Consumer Survey 2019.

## TECHNICAL NOTE

Twice daily brushing is used as the measure. The addition of fluoride toothpaste is important, and the majority of toothpaste sold in Australia contains fluoride.

## TARGET

The 2025 target is 56%.

## TREND

The latest data suggests progress towards the target.

- Baseline: 56% (ADA Consumer Survey 2011)
- Australia’s Oral Health Tracker 2018: 51% (ADA Consumer Survey 2016)

## LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.
## CHILDREN

### RISK FACTORS

Children (5-14 years) that brush teeth twice daily with fluoridated toothpaste

### LATEST AUSTRALIAN DATA

<table>
<thead>
<tr>
<th></th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>68.5%^</td>
<td>75.4%</td>
<td></td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.

### LATEST AUSTRALIAN DATA

As reported in Australia’s Oral Health Tracker 2018, 68.5% of children aged 5-14 years brush their teeth twice daily. Source: NCOHS 2012/14.

### TECHNICAL NOTE

Twice daily brushing is used as the measure. The addition of fluoride toothpaste is important, and the majority of toothpaste sold in Australia contains fluoride.

### TARGET

The 2025 target is 75.4%.

### TREND

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 68.5% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

- Australia’s Oral Health Tracker 2018: 54.4% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data
### LATEST AUSTRALIAN DATA

The latest data reports only 48.8% of Australian adults (18+) have had a dental check-up in the last 12 months. Source: NSAOH 2017-18.

### TECHNICAL NOTE

Dental check-ups are reported rather than dental visits as dental check-ups reflect proactive, preventive measures whereas dental visits may be reactive for acute conditions. The latest data was extracted from the NSAOH 2017/18 by the Australian Research Centre for Population Oral Health (ARCPOH).

### TARGET

The 2025 target is 61%.

### TREND

The latest data suggests poor progress towards the target.

- Baseline: not available
- Australia's Oral Health Tracker 2018: 55.5% (NDTIS 2010)
- Australia’s Oral Health Tracker 2020: 48.8% (NSAOH 2017-18, extracted from data by ARCPOH)

### LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.
### LATEST AUSTRALIAN DATA

As reported in Australia’s Oral Health Tracker 2018, just over half (55.8%) of children (5-6 years) visited a dentist before age 5. Source: NDTIS 2012/14.

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (5-6 years) that visited a dentist before age 5</td>
<td>55.8%^</td>
<td>67.0%</td>
<td></td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

[^]Unable to update data. No new comparable data.

### TARGET

The 2025 target is 67%.

### TREND

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 55.8% (NDTIS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

- Australia’s Oral Health Tracker 2018: 46% (NDTIS 2010)
- Australia’s Oral Health Tracker 2020: No new data
As reported in Australia’s *Oral Health Tracker* 2018, 73.9% of children (5-11 years) had a dental check-up in the last 12 months. *Source: NDTIS 2010.*

**TECHNICAL NOTE**

Dental check-ups are reported rather than dental visits as dental check-ups reflected proactive, preventive measures whereas dental visits may be reactive for acute conditions.

**TARGET**

The 2025 target is 81.3%.

**TREND**

There is insufficient data to determine a trend.

- Baseline: Not available
- *Australia’s Oral Health Tracker* 2018: 73.9% (NDTIS 2010)
- *Australia’s Oral Health Tracker* 2020: No new data

**LATEST INDIGENOUS DATA**

Comparable Aboriginal and Torres Strait Islander data not available.

^Unable to update data. No new comparable data.
### LATEST AUSTRALIAN DATA

As reported in Australia’s Oral Health Tracker 2018, 78.4% of young people (12-17 years) had a dental check-up in the last 12 months. Source: NDTIS 2010.

### TECHNICAL NOTE

Dental check-ups are reported rather than dental visits as dental check-ups reflected proactive, preventive measures whereas dental visits may be reactive for acute conditions. Data extracted from the National Survey of Adult Oral Health 2017-18 by Australia Research Centre for Population Oral Health (ARCPOH).

### TARGET

The 2025 target is 86.2%.

### TREND

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 78.4% (NDTIS 2010)
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.

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<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Young people (aged 12-17) that have had a dental check-up in the last 12 months</td>
<td>78.4%^</td>
<td>86.2%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.
## ADULTS

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily smokers (aged 14+)</td>
<td>12.2%^</td>
<td>5.0%</td>
<td>![Graph showing trend from 2010 to 2016]</td>
<td>▶️</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.

### LATEST AUSTRALIAN DATA

As reported in Australia’s Oral Health Tracker 2018, as of 2016, 12.2% of Australians aged 14+ years smoked daily, down from 15.1% in 2010. Source: NDSHS 2016, AIHW (2017)

### TECHNICAL NOTE

The 2025 target is 5%, as endorsed by a tobacco expert working group for Australia’s health targets and indicators.

### TREND

The data suggests progress towards the target.

- Baseline: 15.1% (NDSHS 2010, AIHW 2014)
- Australia’s Oral Health Tracker 2018: 12.2% (NDSHS 2016, AIHW (2017))
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

- Australia’s Oral Health Tracker 2018: 27.4% (NDSHS 2016, AIHW (2017))
- Australia’s Oral Health Tracker 2020: No new data
### LATEST AUSTRALIAN DATA

- **Long term risky drinking (aged 14+)**: 17.1% (2016)
- **Baseline data against latest data**: 21% to 14% to 7%
- **2025 target**: 13.7%
- **Trend**: Green dot indicates a 21% reduction from 2010 to 2016.

^Unable to update data. No new comparable data.

### TECHNICAL NOTE

‘Risky use of alcohol’ as defined in the NHMRC guidelines for lifetime risk is the consumption, on average, of two or more standard drinks per day.

### TARGET

The 2025 target is 13.7%.

### TREND

There is insufficient data to determine a trend.

- Baseline: 20.1% (NDSHS 2010, AIHW 2011)
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

- Australia’s Oral Health Tracker 2018: 20.4% (NDSHS 2016, AIHW 2017)
- Australia’s Oral Health Tracker 2020: No new data
## LATEST AUSTRALIAN DATA

The latest figures estimate that 4.2% of Australians aged 25-64 years are living with diabetes. Source: NHS 2017-18, ABS (2019).

## TECHNICAL NOTE

Prevalence, no incidence, is used to develop and report on the target. The data could not be standardised for age.

## TARGET

Using the 2007/08 figure as a baseline, the 2025 target is 4.1%.

## TREND

The latest data suggests good progress towards the target.

- Baseline: 4.1% (NHS 2007/08, ABS (2009))
- Australia’s Oral Health Tracker 2018: 4.7% (NHS 2014/15 extracted by PHIDU)
- Australia’s Oral Health Tracker 2020: 4.2% (NHS 2017/18 extracted by PHIDU)
  
  95% Margin of Error of Population (±) 0.5%

## LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.

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*This title was incorrectly labelled in Australia’s Oral Health Tracker 2018, which reported adults aged 25-65 years rather than 25-64 years.
LATEST AUSTRALIAN DATA

The latest data reports 10.7% of Australian adults (15+) have never experienced decay in permanent teeth. Source: NSAOH 2017-18.

TECHNICAL NOTE

The proportion of the adult population who have never experienced dental caries is reported, rather than DMFT score (a score that indicates the level of individual decay experience over the lifetime), due to the significant limitations associated with setting a target for DMFT.

TARGET

The 2025 target is 10.9%.

TREND

The latest data suggests good progress towards the target.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 9.9% (NSAOH 2004-06)
- Australia’s Oral Health Tracker 2020: 10.7% (NSAOH 2017-18)

LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.
**LATEST AUSTRALIAN DATA**

Nearly one-third (32.1%) of Australian adults have untreated tooth decay. *Source: NSAOH 2017/18.*

**TECHNICAL NOTE**

Untreated decay was identified via the oral examination included in the NSAOH data collection.

**TARGET**

The 2025 target is 20.4%; a 20% decrease from baseline.

**TREND**

The latest data suggests poor progress towards the target.

- Baseline: Not available
- Australia’s *Oral Health Tracker* 2018: 25.5% (NSAOH 2004-06)
- Australia’s *Oral Health Tracker* 2020: 32.1% (NSAOH 2017-18)

**LATEST INDIGENOUS DATA**

Comparable Aboriginal and Torres Strait Islander data not available.
### Children

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Latest Australian Data</th>
<th>2025 Target</th>
<th>Baseline Data Against Latest Data</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (5-6 years) who have experienced decay in primary teeth</td>
<td>34.3%(^\wedge)</td>
<td>30.9%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

\(^\wedge\)Unable to update data. No new comparable data.

### Latest Australian Data

As reported in Australia’s Oral Health Tracker 2018, 34.3% of children (5-6 years) have experienced decay in primary teeth. 

**Source:** NCOHS 2012-14.

**Target**

The 2025 target is 30.9%.

**Trend**

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 34.3% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data

### Latest Indigenous Data

- Australia’s Oral Health Tracker 2018: 51.9% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data
# CHILDREN

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (6-14 years) who have experienced decay in permanent teeth</td>
<td>23.5%^</td>
<td>21.2%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.

## LATEST AUSTRALIAN DATA

As reported in Australia’s Oral Health Tracker 2018, 23.5% of children (6-14 years) have experienced decay in permanent teeth. Source: NCOHS 2012-14.

## TARGET

The 2025 target is 21.2%.

## TREND

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 23.5% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data

## LATEST INDIGENOUS DATA

- Australia’s Oral Health Tracker 2018: 36% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data
## CHILDREN

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (5-10 years) with untreated tooth decay in primary teeth</td>
<td>27.1%&lt;sup&gt;(^\text{^}&lt;/sup&gt; &lt;/sup&gt;</td>
<td>21.7%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

<sup>^</sup>Unable to update data. No new comparable data.

### LATEST AUSTRALIAN DATA

As reported in Australia's Oral Health Tracker 2018, 27.1% of children (5-10 years) have untreated decay in primary teeth. Source: NCOHS 2012-14.

### TARGET

The 2025 target is 21.7%.

### TREND

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 27.1% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data

### LATEST INDIGENOUS DATA

- Australia’s Oral Health Tracker 2018: 44% (NCOHS 2012-14)
- Australia’s Oral Health Tracker 2020: No new data
**CHILDREN**

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TRENDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (6-14 years) with untreated tooth decay in permanent teeth</td>
<td>10.9%(^\wedge)</td>
<td>8.7%</td>
<td>-</td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

\(^\wedge\)Unable to update data. No new comparable data.

**LATEST AUSTRALIAN DATA**

As reported in Australia’s *Oral Health Tracker* 2018, 10.9% of children (6-14 years) have untreated decay in permanent teeth. Source: NCOHS 2012-14.

**TARGET**

The 2025 target is 8.7%.

**TREND**

There is insufficient data to determine a trend.

- Baseline: Not available
- Australia’s *Oral Health Tracker* 2018: 10.9% (NCOHS 2012-14)
- Australia’s *Oral Health Tracker* 2020: No new data

**LATEST INDIGENOUS DATA**

- Australia’s *Oral Health Tracker* 2018: 22.9% (NCOHS 2012-14)
- Australia’s *Oral Health Tracker* 2020: No new data
## Oral Cancer

### Latest Australian Data

The latest data reports the age-standardised incidence rate of oral cancers in Australian adults is 10.3 per 100,000 persons. *Source: Cancer in Australia 2019.*

### Technical Note

Incidence was preferred over prevalence in respect of oral cancer rates. Regarding cancer data, prevalence refers to the number of people alive with a prior diagnosis of cancer. It is a function of cancer survival and indicates the efficacy of cancer care, as well as the number of new cancers diagnosed. It reflects the number of people undergoing treatment or longer-term management for their cancer, whereas incidence measures the rate at which new cancer cases are diagnosed.

### Target

The 2025 target is 9.7 per 100,000 persons.

### Trend

The latest data suggests good progress towards the target.

- Baseline: 9.7 per 100,000 (2009, AIHW 2012)
- Australia’s *Oral Health Tracker* 2018: 10.9 per 100,000 (2013, AIHW 2017)
- Australia’s *Oral Health Tracker* 2020: 10.3 per 100,000 (2015, AIHW Cancer in Australia 2019)

### Latest Indigenous Data

Comparable Aboriginal and Torres Strait Islander data not available.

<table>
<thead>
<tr>
<th>Risk Factors</th>
<th>Latest Australian Data</th>
<th>2025 Target</th>
<th>Baseline Data Against Latest Data</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age-standardised incidence rate of oral cancers</td>
<td>10.3 per 100,000</td>
<td>9.7 per 100,000</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The latest data reports the age-standardised mortality rate of Australian adults from oral cancers is 1.6 per 100,000 persons. Source: Cancer in Australia 2019.

**Technical Note**

Incidence was preferred over prevalence in respect of oral cancer rates. Regarding cancer data, prevalence refers to the number of people alive with a prior diagnosis of cancer. It is a function of cancer survival and indicates the efficacy of cancer care, as well as the number of new cancers diagnosed. It reflects the number of people undergoing treatment or longer-term management for their cancer, whereas incidence measures the rate at which new cancer cases are diagnosed.

The incidence rates are age standardised to the 2001 Australian Standard Population and are expressed per 100,000 population.

**Target**

The 2025 target is 1.4 per 100,000 persons.

**Trend**

The latest data suggests no change in progress.

- Baseline: 1.7 per 100,000 (2010, Cancer in Australia 2012)
- Australia’s Oral Health Tracker 2018: 1.6 per 100,000 (2014, AIHW Cancer in Australia 2017)
- Australia’s Oral Health Tracker 2020: 1.6 per 100,000 (2016, AIHW Cancer in Australia 2019)

**Latest Indigenous Data**

Comparable Aboriginal and Torres Strait Islander data not available.
GUM DISEASE

LATEST AUSTRALIAN DATA

Latest data reports over one quarter (28.8%) of Australian adults have periodontal pockets >4mm, an increase of 9% from 2004/06. Source: NSAOH 2017/18.

TECHNICAL NOTE

Periodontal pocketing of >4mm was used rather than the prevalence of moderate to severe periodontitis as it is a common measure used in many epidemiological studies and the data is collected in that format in Australia.

TARGET

The 2025 target is 16.8%.

TREND

The latest data suggests poor progress towards the target.

- Baseline: Not available
- Australia’s Oral Health Tracker 2018: 19.8% (NSAOH 2004-06)
- Australia’s Oral Health Tracker 2020: 28.8% (NSAOH 2017-18)

LATEST INDIGENOUS DATA

Comparable Aboriginal and Torres Strait Islander data not available.

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
<th>LATEST AUSTRALIAN DATA</th>
<th>2025 TARGET</th>
<th>BASELINE DATA AGAINST LATEST DATA</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults (aged 15+) with periodontal pockets (&gt;4mm)</td>
<td>28.8%</td>
<td>16.8%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The latest data reports 9.5 per 1,000 Australian children, aged 5-9 years, have been hospitalised due to dental conditions in 2017/18, these hospitalisations were potentially preventable. Source: AIHW Hospital Morbidity database 2017-18.

Potentially preventable hospitalisation (PPH)’s in children is a subset of the total proportion of PPHs due to dental conditions published regularly by the AIHW on the ‘My Healthy Community’ website. PPHs are measured as a key indicator in the National Healthcare Agreement, and are closely monitored by Commonwealth, state and territory governments.

The 2025 target is 8.4 per 1,000 children.

The latest data suggests poor progress towards the target.

- Baseline: 9.1 per 1,000 (AIHW Hospital Morbidity database 2009-10)
- Australia’s Oral Health Tracker 2018: 9.3 per 1,000 (AIHW Hospital Morbidity database 2013-14)
- Australia’s Oral Health Tracker 2020: 9.5 per 1,000 (AIHW Hospital Morbidity database 2017-18)

- Australia’s Oral Health Tracker 2018: 11.5 per 1,000 (AIHW Hospital Morbidity database 2013-14)
- Australia’s Oral Health Tracker 2020: 12.6 per 1,000 (AIHW Hospital Morbidity database 2017-18)
INADEQUATE DENTITION

**LATEST AUSTRALIAN DATA**

The latest data reports 10.2% of Australian adults have an inadequate dentition (fewer than 21 teeth). Source: NSAOH 2017-18.

**TARGET**

The 2025 target is 15.5%.

**TREND**

Australia has surpassed the target set for 2025.

- Baseline: 14.9% (NDTIS 2010)
- Australia’s Oral Health Tracker 2018: 15.5% (NDTIS 2013)
- Australia’s Oral Health Tracker 2020: 10.2% (NSAOH 2017-18)

**LATEST INDIGENOUS DATA**

Comparable Aboriginal and Torres Strait Islander data not available.

---

**ADULTS**

<table>
<thead>
<tr>
<th>RISK FACTORS</th>
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<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adults with severe tooth loss (fewer than 21 teeth)</td>
<td>10.2%</td>
<td><strong>15.5%</strong></td>
<td></td>
<td>Reached 2025 target</td>
</tr>
</tbody>
</table>

Graph showing trend from 2010 to 2017/18.
The latest data reports 20.2% of Australian adults (15+ years) reported suffering from a toothache in the last 12 months. Source: NSAOH 2017-18.

The 2025 target is 14.9%.

The latest data suggests poor progress towards the target.

- Baseline: 14.9% (NDTIS 2010)
- Australia’s Oral Health Tracker 2018: 16.2% (NDTIS 2013)
- Australia’s Oral Health Tracker 2020: 20.2% (NSAOH 2017-18)

Comparable Aboriginal and Torres Strait Islander data not available.
As reported in Australia’s Oral Health Tracker 2018, 6.8% of children 5-14 years reported suffering from a toothache in the last 12 months. Source: NDTIS 2013.

The 2025 target is 6.1%.

There is insufficient data to determine a trend.

- Baseline: 8% (NDTIS 2010)
- Australia’s Oral Health Tracker 2018: 6.8% (NDTIS 2013)
- Australia’s Oral Health Tracker 2020: No new data

Comparable Aboriginal and Torres Strait Islander data not available.

<table>
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<tr>
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<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children (5-14 years) who reported toothache in the last 12 months</td>
<td>6.8%^</td>
<td>6.1%</td>
<td></td>
<td>Inadequate data to assess trend</td>
</tr>
</tbody>
</table>

^Unable to update data. No new comparable data.
Children (5-14 years) who reported toothache in the last 12 months

6.8%[^1] – 6.1%

*Inadequate data to assess trend*


