Understanding Task Force Draft Recommendations

This fact sheet explains the U.S. Preventive Services Task Force's (Task Force) draft recommendation statements on screening and preventive interventions for oral health in children and adolescents ages 5 and older and adults. It also tells you how you can send comments about the draft recommendations to the Task Force. Comments may be submitted from May 23, 2023, to June 20, 2023. The Task Force welcomes your comments.

Screening and Preventive Interventions for Oral Health in Children 5 Years and Older and Adults

The Task Force issued draft recommendation statements on Screening and Preventive Interventions for Oral Health in Children and Adolescents Ages 5–17 and Screening and Preventive Interventions for Oral Health in Adults.

The Task Force found that there is not enough evidence to make a recommendation for or against screening or preventive interventions for oral health conditions in the primary care setting for children 5 years and older, adolescents, and adults.

These recommendations apply to children, adolescents, and adults who do not have signs or symptoms of oral health conditions.

Facts About Oral Health in Children and Adults

Oral health problems can negatively affect children, adolescents, and adults. Dental caries is one of the most common conditions of childhood, and the likelihood of untreated dental caries increases as children age. If left untreated, oral health conditions in children can lead to serious infections and affect growth, development, and quality of life. In adults, untreated oral health conditions can lead to tooth loss, irreversible tooth damage, serious infections, and other health outcomes.

Risk factors for developing oral health problems include lack of brushing and flossing teeth, high sugar diets from both beverages and food, low fluoride exposure, tobacco use, and developmental defects in teeth. Social factors can also increase the risk of oral health conditions and include low socioeconomic status, lack of dental insurance, and living in communities with limited access to dental care. Additionally, Black, Hispanic/Latino, Native American/Alaska Native, Asian, and Native Hawaiian/Pacific Islander children and adults are more likely to have oral health problems.

Screening and Preventive Interventions for Oral Health in Primary Care

The Task Force looked at whether primary care clinicians could complement the work of dental professionals and accurately identify people with oral health conditions—cavities or gum disease—using an oral exam or another tool. The Task Force also considered whether clinicians could accurately identify those at increased risk of a future issue. Additionally, the Task Force reviewed interventions focused on preventing future oral health problems, including counseling patients to improve oral health habits such as brushing and flossing, decreasing the frequency of refined sugar intake, referrals by health professionals to dental professionals, as well as the use of fluoride, dental sealants, silver diamine fluoride, and xylitol.

Importantly, the Task Force focused only on services that can be done in primary care, not by dental professionals.
Potential Benefits and Harms of Screening and Preventive Interventions for Oral Health in Children and Adults

The benefit of screening in primary care would be to detect cavities or gum disease or prevent these oral health problems from going untreated. The benefit of preventive interventions would be to prevent future oral health problems. However, there is limited evidence on the benefits of screening and preventive services for children and adults in primary care, so the Task Force is calling for more research on this important topic.

There is also not enough evidence to determine if there are harms associated with oral health screening and preventive interventions in primary care.

It is important that anyone who has concerns about their own oral health or their child’s talk to their healthcare professional so they can get the care they need.

The Draft Recommendations on Screening and Preventive Interventions for Oral Health in Children and Adults: What Does It Mean?

Here are the Task Force’s draft recommendations on screening and preventive interventions for oral health in children and screening and preventive interventions for oral health in adults. The recommendations are based on the quality and strength of the evidence about the potential benefits and harms of screening and preventive interventions for this purpose. They are also based on the size of the potential benefits and harms. Task Force recommendation grades are explained in the box at the end of this fact sheet.

When the Task Force issues an I Statement, it means that there is not enough evidence to recommend for or against the preventive service.

Before you send comments to the Task Force, you may want to read the draft recommendation statements for children and adults. The recommendation statements explain the evidence the Task Force reviewed and how it decided on the grade. Evidence documents for children and adults provide more detail about the scientific studies the Task Force reviewed.
**Children and Adolescents**

The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of routine screening performed by primary care clinicians for oral health conditions including dental caries. (I Statement)

The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of preventive interventions performed by primary care clinicians for oral health conditions including dental caries. (I Statement)

**Adults**

The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of routine screening performed by primary care clinicians for oral health conditions including dental caries or periodontal-related disease. (I Statement)

The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of preventive interventions performed by primary care clinicians for oral health conditions including dental caries or periodontal-related disease. (I Statement)

**Notes**

- **current evidence is insufficient**
  - There is not enough evidence to make a recommendation for or against screening.

- **screening**
  - Oral examination or using risk prediction tools to identify those having issues or at increased risk.

- **dental caries**
  - Cavities.

- **preventive interventions**
  - Efforts to prevent future cavities or gum disease, which include counseling patients to improve oral health habits such as flossing or decreasing refined sugar intake, referrals to dental professionals, as well as the use of fluoride, dental sealants, silver diamine fluoride, and xylitol.

- **periodontal-related disease**
  - Gum disease.
What is the U.S. Preventive Services Task Force?

The Task Force is an independent, non-federal, volunteer group of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of people nationwide by making evidence-based recommendations about clinical preventive services, such as screenings, counseling services, and preventive medicines. The recommendations apply to people with no signs or symptoms of the disease being discussed.

To develop a recommendation statement, Task Force members consider the best available science and research on a topic. For each topic, the Task Force posts draft documents for public comment, including the draft recommendation statements for children and adults. All comments are reviewed and considered in developing the final recommendation statement. To learn more, visit the Task Force website.

### USPSTF Recommendation Grades

<table>
<thead>
<tr>
<th>Grade</th>
<th>Definition</th>
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<tbody>
<tr>
<td>A</td>
<td>Recommended.</td>
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<tr>
<td>B</td>
<td>Recommended.</td>
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<tr>
<td>C</td>
<td>Recommendation depends on the patient’s situation.</td>
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<tr>
<td>D</td>
<td>Not recommended.</td>
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<tr>
<td>I statement</td>
<td>There is not enough evidence to make a recommendation.</td>
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**Click Here to Learn More About Oral Health**

- **Basics of Oral Health**
  (Centers for Disease Control and Prevention)
- **Oral Hygiene**
  (National Institute of Dental and Craniofacial Research)
- **Gum Disease**
  (MedlinePlus)

**Click Here to Comment on the Draft Recommendations**

The Task Force welcomes comments on these draft recommendations.

Comments must be received between May 23, 2023, and June 20, 2023.

All comments will be considered for use in writing final recommendations.

Comment Period from May 23, 2023, to June 20, 2023