



# The Child Dental Health Survey, Australian Capital Territory 1999

---

AIHW Dental Statistics and Research Unit  
The University of Adelaide

---

in collaboration with  
The Australian Capital Territory School Dental Service

AIHW Catalogue No. DEN 94

---

AIHW Dental Statistics and Research Unit  
The University of Adelaide  
SOUTH AUSTRALIA 5005

---

Phone: (08) 8303 4051  
Fax: (08) 8303 4858

---

The Australian Institute of Health and Welfare (AIHW) is Australia's national health and welfare statistics and information agency. The Institute's mission is to improve the health and well-being of Australians by informing community discussion and decision making through national leadership in developing and providing health and welfare statistics and information.

The AIHW Dental Statistics and Research Unit (DSRU) is a collaborating unit of the AIHW established in 1988 at The University of Adelaide. The DSRU aims to improve the oral health of Australians through the collection, analysis and reporting of information on oral health and access to dental care, the practice of dentistry and the dental labour force in Australia.

### **Suggested citation**

AIHW Dental Statistics and Research Unit (2002). *Child Dental Health Survey, Australian Capital Territory 1999*.

### **Acknowledgments**

These data used for this report were collected in collaboration with the Australian Capital Territory School Dental Service. The support of the service and its staff was crucial to the successful collection of data for this survey.

### **DSRU Staff:**

Director:	Professor John Spencer
Deputy Director:	Dr Kaye Roberts-Thomson
Senior Research Fellows:	Dr David Brennan Dr Jane Chalmers
Research Officers:	Mr Jason Armfield Mr Knute Carter Mrs Judy Stewart Ms Dana Teusner
General Staff:	Mrs Lorna Lucas Mrs Ruth Wass
Consultants:	Dr Peter Arrow Dr Mike Morgan ( <i>University of Melbourne</i> ) Dr Gary Slade ( <i>University of North Carolina</i> )

Any comments or information relevant to the subject matter of this report would be welcome. Correspondence should be directed to:

The Director  
AIHW Dental Statistics and Research Unit  
The University of Adelaide  
SOUTH AUSTRALIA 5005

Tel: (08) 8303 4051  
Fax: (08) 8303 4858  
E-mail: [aihw.dsru@adelaide.edu.au](mailto:aihw.dsru@adelaide.edu.au)  
Website: <http://www.adelaide.edu.au/socprev-dent/dsru>

# Contents

Purpose of this report .....	1
Sampling and data analysis .....	1
Demographic composition of the sample .....	3
Deciduous teeth .....	4
Permanent teeth .....	6
All teeth .....	8
Fissure sealants .....	9
School Dental Service examinations .....	10
Percentage of children with dmft = 0, DMFT = 0 and d+D ≥ 4 .....	12
Caries experience by geographical location .....	12

# Tables

Table 1: Demographic composition of the sample .....	4
Table 2: Deciduous teeth – decayed, missing and filled teeth by age .....	5
Table 3: Deciduous teeth – caries experience indices by age .....	5
Table 4: Deciduous teeth – decayed, missing and filled surfaces by age .....	6
Table 5: Permanent teeth – decayed, missing and filled teeth by age .....	7
Table 6: Permanent teeth – caries experience indices by age .....	7
Table 7: Permanent teeth – decayed, missing and filled surfaces by age .....	8
Table 8: All teeth – age-specific experience .....	9
Table 9: Fissure sealants – age-specific experience .....	9
Table 10: School Dental Service examinations – age-specific distribution .....	10
Table 11: School Dental Service examinations – time since last visit .....	11
Table 12: Deciduous caries experience for 5–6-year-old children by region .....	13
Table 13: Permanent caries experience for 11–12-year-old children by region .....	13

,

## Figures

Figure 1: Statistical Subdivisions of the Australian Capital Territory .....	2
Figure 2: Percentage of children in sample and Australian Capital Territory population by Statistical Subdivision.....	3
Figure 3: Time since last dental examination for 6- and 12-year-olds .....	11
Figure 4: Percentage of children with dmft = 0, DMFT = 0 and d+D $\geq$ 4 .....	12

## Abbreviations

d	deciduous decayed teeth
m	deciduous missing teeth
f	deciduous filled teeth
dmft	deciduous decayed, missing and filled teeth
D	permanent decayed teeth
M	permanent missing teeth
F	permanent filled teeth
DMFT	permanent decayed, missing and filled teeth
SD	standard deviation

## **Purpose of this report**

This report is part of the annual series providing descriptive statistics concerning child dental health in the Australian Capital Territory. The report contains tables and figures. Information listed in the tables includes: the age and sex of children in the sample, their deciduous and permanent caries experience, frequency of fissure sealants and children's history of School Dental Service examinations. The figures combine and summarise information from four of the tables.

The following sections briefly describe the tables and figures of this report and provide a simple, summary statement highlighting differences between the 1998 and 1999 findings. However, no formal hypothesis tests have been undertaken and descriptions of difference between years are intended as a guide to the reader rather than an evaluation of trends.

## **Sampling and data analysis**

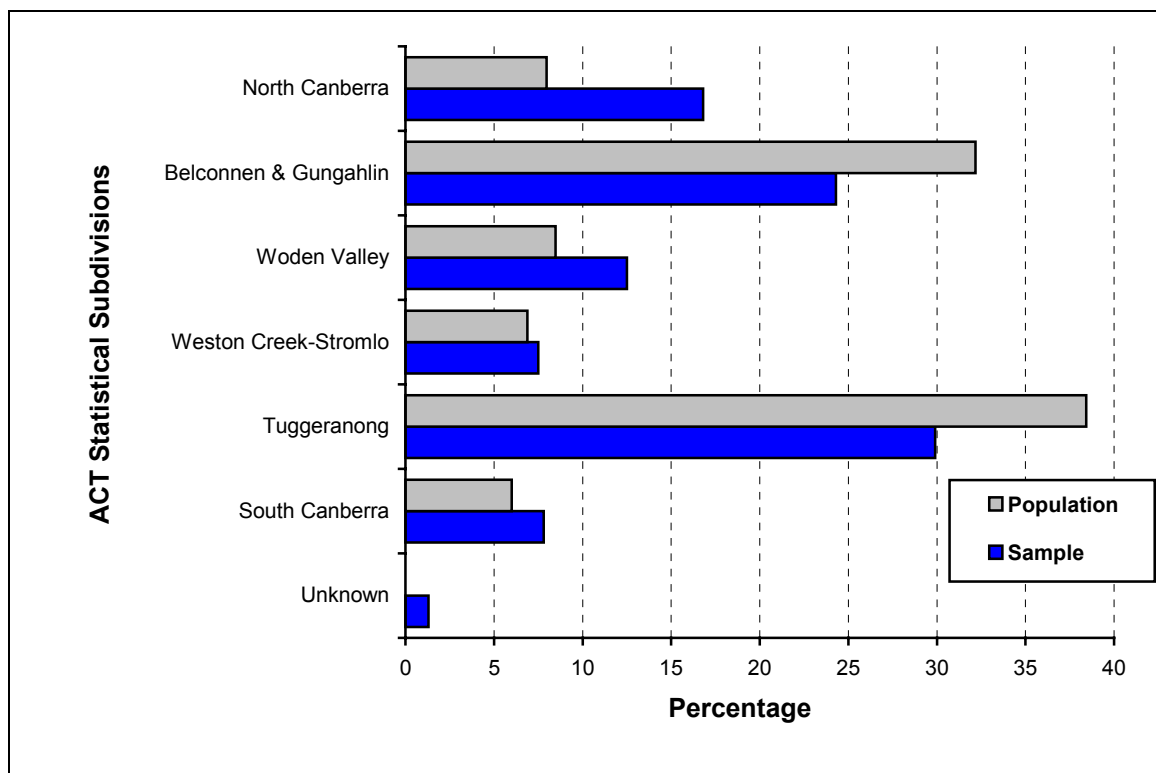
Data were collected during the 1999 calendar year from patients of the ACT School Dental Service by dental therapists and dentists. A random sampling procedure was used to select approximately one in two (1:2.5) patients. This was achieved by selecting those children whose birthday was between the 1st and 12th (inclusive) of any month. Provision was made for inclusion and numerical weighting of data from children whose date of birth was unknown. A total of 17 patients with birth dates outside of the desired sampling frame were also sampled. These children were included in the analyses with appropriate adjustments being made to statistical weights. Records from children with a known date of birth were weighted up, while records from children for whom age only was known or who were not sampled according to the desired sampling frame were weighted down. The sum of the weighted records is equivalent to the number of children sampled for the survey. The number of cases has been rounded to the nearest integer.

The data were extensively cleaned prior to analysis to correct for errors and duplicate cases. In addition, cases with ages more than 3 standard deviations from the mean age for a given number of either deciduous or permanent teeth were examined and corrected where the cause for an error could be determined. These cases most likely represented data recording errors

All indices were calculated from data collected over a 12-month period. Where children received more than one examination during this period the information derived from examinations other than the first has been excluded. However, analyses of children's history of School Dental Service examinations (Tables 10 and 11) use information from all examinations. Age-specific indices denoted with an asterisk (\*) are those in which the relative standard error exceeds 40% and population estimates of these indices may be considered to be statistically unreliable and should be interpreted with due care.



**Figure 1. Statistical Subdivisions of the Australian Capital Territory**



**Figure 2: Percentage of children in sample and Australian Capital Territory population by Statistical Subdivision**

## Demographic composition of the sample

The great majority of children in the sample (96.8%) were aged between 5 and 12 years inclusive (see Table 1). Twelve-year-olds were one third as likely as those aged between 6 and 11 years to be in the sample, while children aged 4 years or less and those aged 13 years or older were represented in relatively small numbers. Males and females were sampled in approximately equal numbers with only minor variations in proportions across age groups.

This distribution of the sample is closely related to the main target groups of children served by the School Dental Service in the ACT and emphasises that the sample is representative of primary school aged children served by the School Dental Service, rather than all children in the ACT. The small numbers of children aged younger than 5 years or 13 years and older are likely to be less representative of ACT children in general, and their small numbers contribute to imprecision in some age-specific statistics contained in the remaining tables. As a result of the small number of children aged less than 5, these age-groups are not reported on in the following analyses. Children aged between 15 and 17 were combined for subsequent analyses.

## Changes since 1998

The sampled number of cases has continued to decline, decreasing by 778 from 1998.

**Table 1: Demographic composition of the sample**

Age	Children in sample (unweighted)			Children in sample (weighted)		
	Males	Females	Persons	Males	Females	Persons
	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>	<i>n</i>
3	1	0	1	1	0	1
4	10	5	15	8	6	14
5	160	140	300	152	136	288
6	242	238	480	222	210	432
7	216	235	451	218	234	451
8	236	200	436	243	200	442
9	191	201	392	198	210	408
10	175	190	365	192	206	398
11	160	154	314	178	163	340
12	63	66	129	59	59	118
13	2	15	37	18	16	34
14	13	14	27	13	12	25
15	9	9	18	8	8	16
16	6	1	7	4	1	4
17	2	0	2	1	0	1
<b>Total</b>	<b>1,506</b>	<b>1,468</b>	<b>2,974</b>	<b>1,513</b>	<b>1,461</b>	<b>2,974</b>

## Deciduous teeth

The mean number of clinically detectable decayed (d) teeth among children aged 5 to 12 years ranged from 0.72 for 5-year-olds to 0.34 for 11-year-old children (see Table 2). The reduction in the decay score with age can be explained by the exfoliation of deciduous teeth (as seen by the decrease in the mean number of deciduous teeth, shown in Table 2) and does not necessarily reflect a reduction in the percentage of teeth with decay with increasing age. Across all age groups very few children presented with teeth missing due to caries. The mean number of teeth with fillings increased across age groups, from 0.39 among 5-year-olds to 0.91 among 9-year-olds, before declining. The mean dmft showed a similar trend to that of the mean number of filled teeth, peaking at age 9, before declining.

The percentage of caries experience due to decay (d/dmft) showed an age-associated decline, approximately halving from 67.2% among 5-year-olds to 33.5% among 12-year-olds (see Table 3). By comparison, the percentage of children with no recorded decay experience in the deciduous dentition (% dmft = 0) showed a more modest reduction from 67.9% among 5-year-olds to 51.8% among 9-year-olds before increasing to 60.2% for 12-year-olds.

The surface-level caries experience (see Table 4) shows approximately 60–70% higher caries experience (dmf) for 6–11-year-olds than when using tooth-level statistics. There were approximately 50–60% more clinically decayed surfaces across this age range than there were teeth with clinically detectable decay. General trends are similar to those indicated previously for analyses at the tooth level.



## Changes since 1998

The mean number of clinically detectable decayed teeth and mean dmft scores were lower in 1999 for 6–10-year-olds than in 1998. There were also reductions for some age groups in the mean number of filled teeth. Decreases in mean dmft were often appreciable for children aged between 6 and 10. There was little change in d/dmft between 1998 and 1999, however the percentage of children with dmft = 0 was lower for several age groups in 1999 than in 1998.

**Table 2: Deciduous dentition – decayed, missing and filled teeth by age<sup>†</sup>**

Age	Children <i>n</i>	Teeth mean	Decayed (d)		Missing (m)		Filled (f)		dmft	
			mean	SD	mean	SD	mean	SD	mean	SD
5	288	19.41	0.72	1.92	0.04*	0.40*	0.39	1.30	1.15	2.61
6	432	17.43	0.66	1.28	0.02*	0.37*	0.52	1.25	1.19	2.03
7	451	14.56	0.52	1.11	0.01*	0.07*	0.65	1.39	1.17	1.93
8	442	12.36	0.54	1.18	0.00	0.05*	0.77	1.41	1.31	2.03
9	398	10.69	0.50	0.90	0.00	0.06*	0.91	1.58	1.41	1.97
10	361	8.43	0.38	0.83	–	–	0.78	1.29	1.17	1.68
11	246	6.22	0.34	0.69	–	–	0.67	1.26	1.01	1.53
12	51	5.22	0.37	1.02	–	–	0.47	0.97	0.84	1.59

<sup>†</sup> Prior to 1998 ACT CDHS reports have included children with no deciduous teeth in the analyses of deciduous caries experience, effectively giving these children scores of 0 for decayed, missing and filled teeth. Including children with no deciduous teeth in analyses understates the total level of caries experience of children aged between 10 and 12.

\* relative standard error  $\geq$  40%

**Table 3: Deciduous teeth – caries experience indices by age**

Age	Teeth mean	d/dmft		dmft = 0	
		<i>n</i>	%	<i>n</i>	%
5	19.41	93	67.2	288	67.9
6	17.43	169	60.1	432	60.8
7	14.56	185	49.3	451	58.9
8	12.36	191	42.0	442	56.7
9	10.69	192	43.1	398	51.8
10	8.43	172	35.6	361	52.3
11	6.22	106	41.7	246	56.7
12	5.22	20	33.5	51	60.2

**Table 4: Deciduous dentition – decayed, missing and filled surfaces by age**

Age	Children	Surfaces	Decayed (d)		Missing (m)		Filled (f)		dmfs	
			n	mean	mean	SD	mean	SD	mean	SD
5	288	85.47	1.16	3.85	0.18*	1.78*	0.64	2.26	1.97	5.44
6	432	77.60	0.98	2.04	0.08*	1.66*	0.85	2.19	1.91	3.94
7	451	66.12	0.79	1.91	0.03*	0.37*	1.12	2.63	1.94	3.56
8	442	57.30	0.95	2.58	0.01*	0.25*	1.27	2.55	2.23	3.99
9	398	50.06	0.81	1.64	0.02*	0.29*	1.50	2.78	2.33	3.53
10	361	39.78	0.57	1.26	–	–	1.30	2.32	1.87	2.82
11	246	29.45	0.57	1.30	–	–	1.08	2.03	1.66	2.64
12	51	24.71	0.69*	2.28*	–	–	0.84	1.68	1.52	3.10

\* relative standard error  $\geq$  40%

## Permanent teeth

It can be seen from Table 5 that clinically detectable decay increased relatively consistently across the age range of 6–13 years from a mean of 0.11 to a mean of 0.55. The mean DMFT also increased across age groups, from 0.13 for 6-year-olds to 0.95 for children aged 13 years. To some extent, the age-related increase in D and DMFT scores reflects the increase in numbers of permanent teeth with age, from 3.39 for 5-year-olds to 24.89 for children aged 13 years old. However, there is also a significant increase in both clinically detectable decay and DMFT scores in the oldest age groups sampled despite a leveling off in the number of teeth present. The mean DMFT for 12-year-olds was 0.74.

The percentage of DMFT due to decay (D/DMFT) and the percentage of caries free children (DMFT = 0) generally declined across age groups, although a low-point can be seen for D/DMFT for children aged 12, after which D/DMFT begins to increase (see Table 6).

The surface-level caries experience (DMFS) in the permanent dentition (see Table 7) was higher than the respective mean DMFT scores, ranging from 13.3% among 7-year-olds to 36.8% among 13-year-olds. Up to the age of 12 there were approximately 10–20% more clinically decayed surfaces than decayed teeth, with the increase exceeding 20% for the older children.

## Changes since 1998

Increases in the mean number of clinically decayed permanent teeth occurred for children aged between 10 and 13 years of age. There was also an increase across these age groups for D/DMFT in 1999, compared to 1998. Less variability can be seen in DMFT scores between 1998 and 1999, with increases for children aged 6, 10 and 12. The percentage of children with DMFT = 0 has decreased between 1998 and 1999 for children aged 10, 12 and 13.

**Table 5: Permanent dentition – decayed, missing and filled teeth by age**

Age	Children <i>n</i>	Teeth mean	Decayed (D)		Missing (M)		Filled (F)		DMFT	
			mean	SD	mean	SD	mean	SD	mean	SD
5	93	3.39	0.02*	0.20*	–	–	–	–	0.02*	0.20*
6	340	5.62	0.11	0.44	–	–	0.02*	0.20*	0.13	0.50
7	443	8.62	0.12	0.43	–	–	0.02	0.19	0.15	0.49
8	441	11.09	0.12	0.47	0.00	0.08*	0.09	0.41	0.21	0.65
9	408	13.24	0.13	0.44	–	–	0.18	0.62	0.31	0.75
10	398	16.35	0.30	0.70	0.01*	0.14*	0.26	0.65	0.58	0.98
11	340	20.39	0.22	0.59	0.00	0.09*	0.29	0.75	0.51	0.96
12	118	23.89	0.29	0.68	–	–	0.46	0.99	0.74	1.31
13	34	24.89	0.55*	1.30*	–	–	0.40	0.76	0.95	1.61
14	25	27.79	1.00*	2.30*	0.02*	0.14*	0.44*	0.94*	1.47	2.42
15	22	27.54	0.41*	1.00*	0.05*	0.21*	1.13	1.85	1.59	1.97

† Prior to 1998 ACT CDHS reports have included children with no permanent teeth in the analyses of permanent caries experience, effectively giving these children scores of 0 for decayed, missing and filled teeth. Including children with no permanent teeth in analyses understates the total level of caries experience of children aged up to 7.

\* relative standard error  $\geq$  40%

**Table 6: Permanent dentition – caries experience indices by age**

Age	Teeth mean	D/DMFT		DMFT = 0	
		<i>n</i>	%	<i>n</i>	%
5	3.39	1	100.0	93	99.0
6	5.62	28	81.9	340	91.9
7	8.62	46	82.8	443	89.5
8	11.09	61	57.7	441	86.3
9	13.24	79	49.0	408	80.7
10	16.35	133	50.7	398	66.5
11	20.39	102	46.6	340	70.0
12	23.89	47	44.3	118	60.3
13	24.89	15	56.8	34	55.4
14	27.79	12	63.3	25	52.9
15	27.54	13	24.3*	22	39.2

\* relative standard error  $\geq$  40%

**Table 7: Permanent dentition – decayed, missing and filled surfaces by age**

Age	Children	Surfaces	Decayed (D)		Missing (M)		Filled (F)		DMFS	
	<i>n</i>	mean	mean	SD	mean	SD	mean	SD	mean	SD
5	93	15.42	0.02*	0.20*	–	–	–	–	0.02*	0.20*
6	340	25.46	0.13	0.51	–	–	0.02*	0.20*	0.15	0.56
7	443	38.20	0.14	0.51	–	–	0.03*	0.28*	0.17	0.62
8	441	48.43	0.15	0.65	0.01*	0.35	0.11	0.52	0.28	0.97
9	408	57.87	0.13	0.46	–	–	0.23	0.82	0.36	0.93
10	398	72.16	0.33	0.77	0.07*	0.65	0.32	0.83	0.71	1.31
11	340	91.31	0.25	0.73	0.02*	0.44	0.42	1.19	0.69	1.48
12	118	108.23	0.31	0.80	–	–	0.56	1.27	0.87	1.68
13	34	113.06	0.68*	1.90*	–	–	0.62*	1.52*	1.30	2.48
14	25	126.85	1.30*	3.00*	0.10*	0.70	0.60*	1.34*	1.96	3.49
15	22	125.45	0.45*	1.10*	0.23*	1.07	1.72*	3.48*	2.40	3.69

\* relative standard error  $\geq$  40%

## All teeth

Untreated caries in the combined deciduous and permanent dentitions ( $d+D \geq 1$ ) existed for between 25.3% and 38.9% of children in the age range 5 to 14 years (see Table 8). The greatest likelihood of detectable untreated decay was seen for 13-year-olds. However, the most extensive levels of untreated decay ( $d+D = 4$  or more) occurred in the younger age groups with the percentage  $d+D \geq 4$  generally declining with increasing age.

More than 98% of children in the age range of 5–13 had no deciduous or permanent teeth missing due to caries, with little variation across age categories. However, smaller percentages avoided fillings. The percentage of children without fillings declined to age 10, before increasing again. There was a similar pattern in the percentage of children with no caries experience in either deciduous or permanent dentition ( $dmft+DMFT = 0$ ), declining from 67.6% at age 5 to 42.6% at age 10, then increasing to about 52% at ages 11 and 12.

## Changes since 1998

There was a decrease between 1998 and 1999 in the percentage of children with  $d+D = 0$  for children aged 7 and those between the ages of 11 and 14. There was an increase for 9- and 10-year-olds. There were also changes in the percentages  $f+F = 0$ , with increases for children aged 9, 10, 11, 14 and 15 and a decrease for 13-year-olds. Overall, the percentage of children with  $dmft+DMFT = 0$  remained relatively unchanged, reducing only for 7-year-olds and increasing for children aged 9 and 10.

**Table 8: All teeth – age-specific caries experience**

Age	Children <i>n</i>	d + D =						m+M = 0	f+F = 0	dmft+ DMFT = 0
		0	1	2	3	4	5+			
		%	%	%	%	%	%	%	%	
5	288	74.7	10.3	6.3	1.9	2.8	3.9	99.0	85.2	67.6
6	432	66.8	11.5	12.2	3.6	3.3	2.5	99.8	78.4	58.2
7	451	68.0	15.9	8.3	4.0	2.8	1.1	99.5	73.4	54.0
8	442	68.1	17.2	6.6	3.2	2.7	2.2	99.6	64.2	50.7
9	408	65.3	19.4	9.3	2.4	3.3	0.4*	99.7	60.5	45.2
10	398	63.8	20.3	9.0	3.1	2.4	1.4	98.7	58.1	42.6
11	340	71.9	16.3	7.6	2.4	1.7	0.1*	99.8	65.3	52.6
12	118	72.8	20.0	2.0*	2.8*	1.0*	1.4*	100.0	67.0	52.5
13	34	61.1	27.2	10.3	0.0	0.0	1.4*	100.0	64.4	39.4
14	25	64.1	14.9	13.1	2.8*	0.0	5.2*	98.1	79.8	52.9
15	22	79.1	13.0*	1.7*	0.0	6.0*	0.0	95.4	50.9	39.2

\* relative standard error  $\geq$  40%

## Fissure sealants

The mean number of fissure sealants generally increased in prevalence with increasing age (see Table 9). There is clear evidence of preferential use of fissure sealants among those with caries experience: the prevalence of fissure sealants among children with some caries experience (DMFT = 1+) was generally greater than among those with no caries experience (DMFT = 0).

**Table 9: Fissure sealants – age-specific experience**

Age	Children <i>n</i>	Sealants		Students with sealants			
				DMFT = 0		DMFT $\geq$ 1	
		mean	SD	<i>n</i>	%	<i>n</i>	%
6	432	0.08	0.45	404	3.3	28	11.8
7	451	0.31	0.94	405	10.8	46	16.8
8	442	0.59	1.27	381	18.0	61	26.3
9	408	0.76	1.39	329	24.6	79	35.3
10	398	0.81	1.38	265	32.3	133	25.0
11	340	1.04	1.51	238	36.5	102	42.3
12	118	0.84	1.53	71	23.3	47	42.2
13	34	1.59	2.10	19	57.0	15	25.4
14	25	1.00	1.62	13	20.3	12	55.4
$\geq$ 15	22	0.94*	2.41*	8	21.9	13	21.9

## Changes since 1998

There were often large decreases in the mean number of fissure sealants across almost all age groups. The percentage of caries-free children with a fissure sealant showed a decrease across a number of age categories however the largest and most consistent decreases in the number of fissure sealants present occurred for children with DMFT  $\geq 1$ .

## School Dental Service examinations

Table 10 describes the percentage of examinations in 1999 recorded as the first examination for a child in the ACT School Dental Service. As expected, the figure is highest for the youngest ages (6 years or less) with few children aged 8 years or more having had no previous examination. This pattern is expected and indicates that most patients are enrolled during their early school years.

Table 11 includes only children with previous examinations and indicates their distribution according to time since last dental examination. Approximately 50% of examinations of children aged between 7 and 12 occurred within 12 months of their previous examination, with 22–32% occurring 13 to 24 months previously. Approximately one-quarter of examinations occurred more than 2 years since the previous examination for these age groups. Time since last examination was least for the youngest ages and highest among the older children: whereas 68.6% of 5-year-olds had an examination within the previous year this figure was only 30.1% for 13-year-olds. This can also be seen from the mean time since last visit, which increased from 10.37 months for 5-year-olds to 15.59 months for 13-year-olds.

Time since last examination for both 6- and 12-year-olds is presented in Figure 3.

**Table 10: School Dental Service examinations – age-specific distribution**

Age	Examinations <i>n</i>	Previous examination in School Dental Service		
		No %	Yes %	Unknown %
5	303	36.4	33.7	30.0
6	480	22.7	55.2	22.1
7	486	11.3	72.3	16.4
8	472	7.4	79.0	13.6
9	425	4.3	85.5	10.2
10	385	2.9	85.7	11.5
11	341	5.0	78.0	17.0
12	120	5.1	76.7	18.3
13	33	5.4*	60.3	34.3
14	24	18.0	64.7	17.4
15	22	12.0*	69.8	18.0

\* relative standard error  $\geq 40\%$

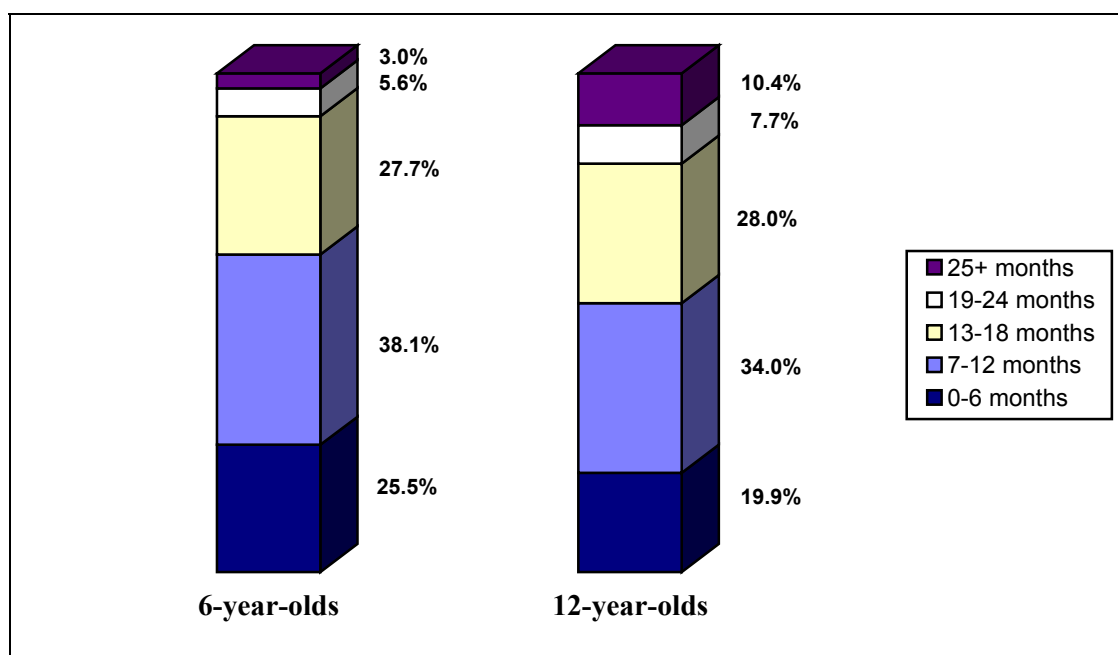
**Table 11: School Dental Service examinations – time since last visit**

Age	Children <i>n</i>	Months since last visit					mean	SD
		0–6	7–12	13–18	19–24	25+		
		%	%	%	%	%		
5	102	33.5	35.1	20.8	7.2	3.3*	10.37	7.01
6	265	25.5	38.1	27.7	5.6	3.0	10.62	6.22
7	351	21.4	29.6	25.6	14.9	8.4	13.07	7.68
8	373	18.6	27.3	31.5	14.0	8.6	13.87	8.43
9	363	21.6	28.9	25.6	9.4	14.4	14.08	9.91
10	330	19.7	29.6	22.7	12.1	15.8	15.25	11.15
11	266	20.5	30.3	22.8	11.3	15.0	14.70	10.36
12	92	19.9	34.0	28.0	7.7	10.4	13.95	9.91
13	20	13.4*	16.7	48.4	8.7*	12.9*	15.59*	9.48*
14	16	3.0*	16.1*	42.9	20.5	17.6*	17.55*	8.38*
≥15	16	4.3*	40.9	40.8	0.0	14.1*	14.33*	6.96*

\* relative standard error ≥ 40%

### Changes since 1998

For children who had had a previous examination there was a trend towards increased time since their last examination with mean time since last examination increasing for children aged 5, 7, 8 and 10.



**Figure 3: Time since last dental examination for 6- and 12-year-olds**

## Percentage of children with dmft = 0, DMFT = 0 and d+D ≥ 4

Figure 4 uses data from previous tables to describe the percentages of children with no detectable caries experience in the deciduous dentition (dmft = 0), no detectable caries experience in the permanent dentition (DMFT = 0) and with clinically detectable decay in 4 or more teeth in either the deciduous or permanent dentition (d+D ≥ 4). Trends across age groups should be interpreted in light of the exfoliation and eruption with age of deciduous and permanent teeth respectively.

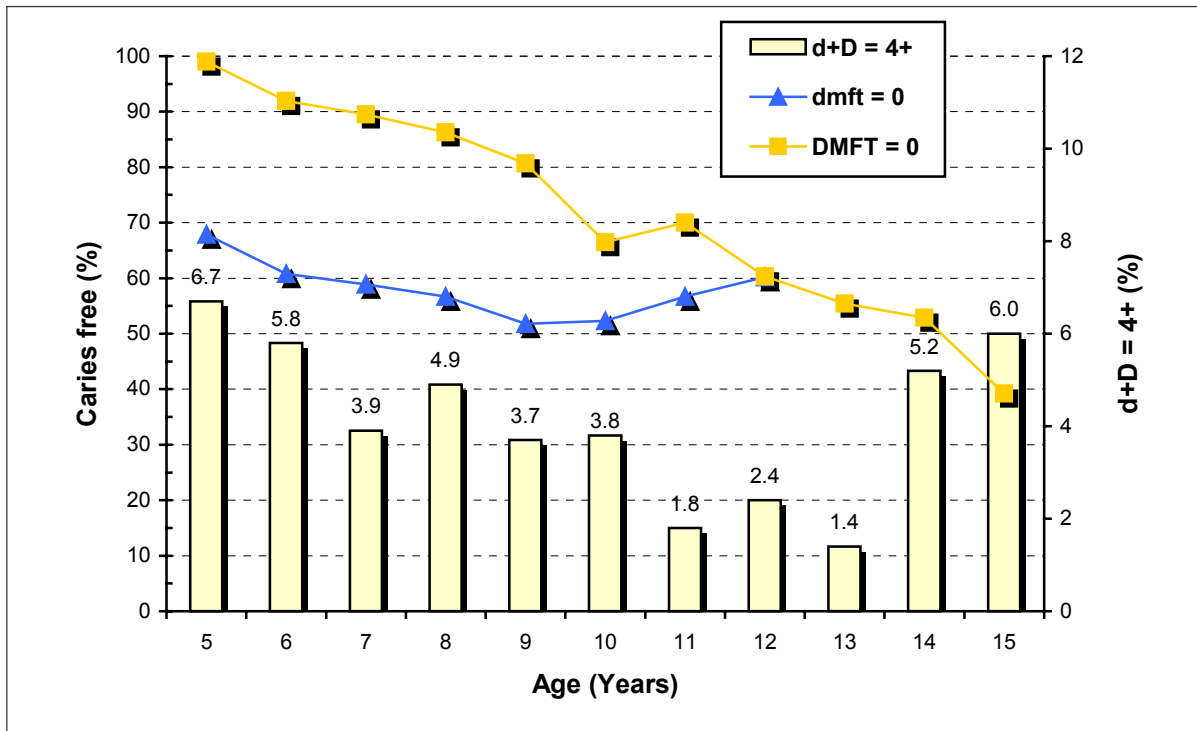


Figure 4: Percentage of children with dmft = 0, DMFT = 0 and d+D ≥ 4

## Caries experience by geographical location

Tables 12 and 13 present caries experience data for each of the Statistical Subdivisions used in this report. Despite the homogeneity and small population of Canberra in comparison to some of the other Australian capital cities, variation can be seen in caries experience for both selected age groups across geographical areas. Among 5- and 6-year-old children, mean decay scores in the deciduous dentition ranged from 0.61 in South Canberra to 0.88 in Woden Valley. The mean number of filled teeth was lowest in South Canberra (0.30) and highest in North Canberra (0.80). Mean dmft scores were also lowest in South Canberra (0.91) and highest in North Canberra (1.43) and Woden Valley (1.39). The percentage of children with dmft = 0 was highest in Belconnen/Gungahlin (65.6%) and lowest in Western Creek-Stromlo (55.1%).



**Table 12: Deciduous caries experience for 5–6-year-old children by region**

	Child.	Decayed (d)		Missing (m)		Filled (f)		dmft		dmft = 0
	<i>n</i>	mean	SD	mean	SD	mean	SD	mean	SD	%
North Canberra	138	0.63	1.24	0.00	0.00	0.80	1.70	1.43	2.30	58.0
Belconnen/Gungahlin	192	0.65	1.56	0.06	0.64	0.46	1.19	1.17	2.37	65.6
Woden Valley	104	0.88	2.02	0.00	0.00	0.52	1.16	1.39	2.54	55.8
West. Creek-Stromlo	49	0.63	1.45	0.00	0.00	0.57	1.02	1.20	2.01	55.1
Tuggeranong	222	0.67	1.46	0.00	0.00	0.50	1.46	1.17	2.17	64.4
South Canberra	69	0.61	1.27	0.00	0.00	0.30	0.86	0.91	1.70	62.3

Among 11–12-year-old children (Table 13), Tuggeranong and South Canberra had the lowest mean decay scores (0.15 and 0.18 respectively) while North Canberra had the highest score (0.33). For filled teeth, the highest mean score was again in North Canberra (0.80) with the lowest score in Belconnen/Gungahlin (0.19). North Canberra also had the highest mean DMFT score (1.74) and the lowest percentage of children with DMFT = 0 (51.5%). The lowest mean DMFT score among 11–12-year-olds was in Belconnen/Gungahlin (mean = 0.48) and South Canberra had the highest percentage of children with DMFT = 0 (76.3%).

**Table 13: Permanent caries experience for 11–12-year-old children by region**

	Child.	Decayed (D)		Missing (M)		Filled (F)		DMFT		DMFT = 0
	<i>n</i>	mean	SD	mean	SD	mean	SD	mean	SD	%
North Canberra	66	0.33	0.83	0.00	0.00	0.80	1.61	1.14	1.74	51.5
Belconnen/Gungahlin	109	0.28	0.67	0.00	0.00	0.19	0.50	0.48	0.87	68.8
Woden Valley	66	0.21	0.57	0.03	0.25	0.32	0.77	0.56	1.02	69.7
West. Creek-Stromlo	37	0.22	0.63	0.00	0.00	0.32	0.63	0.54	0.87	64.9
Tuggeranong	123	0.15	0.38	0.00	0.00	0.47	1.00	0.63	1.10	66.7
South Canberra	38	0.18	0.87	0.00	0.00	0.42	0.92	0.61	1.49	76.3