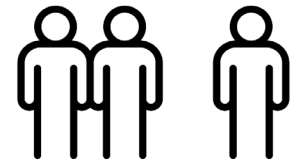


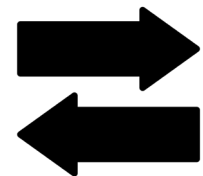
Diabetes and Tooth Loss Among Maryland Adults

Nearly 2 of every 3 adults with diabetes experience tooth loss.

According to the Behavioral Risk Factor Surveillance System (BRFSS)ⁱ, nearly 2 in 3 adults with diabetes experience permanent tooth loss signaling the significant impact of diabetes on oral health. While tooth loss rates are similar across sex and racial/ethnic groups, substantial disparities exist by education and income, demonstrating that social determinants of health are major drivers of oral health outcomes.



A Bidirectional Relationship: Diabetes and periodontal disease have a bidirectional relationship. Poor oral health can make diabetes more difficult to manage, while uncontrolled diabetes increases the risk of periodontal disease and tooth loss.



Key Findings

Permanent Tooth Loss Among Maryland Adults with Diabetes:

- **Overall:** Approximately 2 in 3 adults with diabetes have experienced permanent tooth loss.
- **By Sex:** 64% were men. 63% were women.
- **By Education:** 83% had less than a high school education. 50% were college graduates.
- **By Household Income:** 74% earned less than \$25,000 per year. 50% earned \$100,000 or more.

Takeaway: Adults with lower educational attainment and lower incomes experience substantially higher rates of permanent tooth loss than their more affluent and better-educated peers.

Socioeconomic Factors Matter

Individuals with limited financial resources and lower educational attainment often face barriers to preventive dental care, restorative treatment, transportation, and oral health education. These challenges can delay treatment, increase the severity of periodontal disease and dental decay, and ultimately lead to tooth loss.

The Need for Integrated Care

What Primary Care Providers Can Do

- **Ask** about oral health during diabetes visits.
- **Screen** for symptoms such as bleeding gums, loose teeth, or oral pain.
- **Refer** patients for regular dental care.
- **Reinforce** that good oral health supports better diabetes control.
- **Help** patients overcome barriers to accessing dental services.

What Dental Professionals Can Do

- **Educate** patients about the connection between diabetes and periodontal disease.
- **Provide** preventive care and periodontal maintenance.
- **Encourage** glycemic control as part of oral health management.
- **Coordinate** care with primary care providers and diabetes care teams.
- **Connect** patients with resources when financial barriers limit treatment.

Public Health Priorities

- **Expand** access to affordable preventive and restorative dental care.
- **Integrate** oral health assessments into routine diabetes care.
- **Increase** community-based dental services for underserved populations.
- **Improve** oral health education focused on diabetes.
- **Continue** surveillance to monitor disparities and evaluate interventions.

Bottom Line

For adults with diabetes the greatest burden falls on those impacted by social determinants of health such as lower incomes and lower educational attainment. This influences their ability to prevent dental disease and access routine dental care. Integrating oral health into diabetes care and addressing barriers to preventive dental services can improve oral health, support better diabetes management and reduce health disparities across Maryland.

ⁱ <https://health.maryland.gov/phpa/ccdpc/Reports/pages/brfss.aspx>