EFFORTS TO IMPROVE DENTAL AND ORAL HEALTH KNOWLEDGE IN THE ELDERLY AT UPTD GRIYA WERDHA JAMBANGAN SURABAYA

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Abstract

The aging process is a process of slowly disappearing the ability of tissues to repair themselves or replace and maintain their normal functions. Tooth decay, tooth mobility, caries, halitosis, gingivitis, gingival recession, loss of periodontal attachment, and alveolar bone are changes in periodontal tissue that are commonly found in the elderly. If this is not treated, it can cause mobility and loss of teeth which will interfere with the function and activity of the oral cavity and will have an impact on the quality of life. Dental and oral health problems become one of the problems that have negative implications for overall health that in the end, it affects the quality of life in the elderly. Based on this analysis, in implementing the Tridarma of Higher Education, especially community service, the strategy is to increase public access to dental health services. One form of community service that can be carried out is promotive and preventive efforts. This activity is an educational approach to increase the ability and participation of the elderly community in maintaining dental health which can affect a person’s quality of life.

Keywords: Elderly, dental and oral health, dental and oral diseases, dental health care in elderly

INTRODUCTION

Increased life expectancy can be influenced by advances in health services, decreased infant and child mortality, improved nutrition and sanitation, and increased surveillance of infectious diseases (RI, 2018). Increasing life expectancy and increasing the number of elderly people on the one hand is one of the successes in social and economic development, both for the government and the community, to give more serious attention. This is due to increasing age, and the condition and ability of the elderly to carry out activities are decreasing (BTKLPP, 2019). In the elderly, there is a decrease in intellectual and physical abilities, one of which is due to the aging process. The aging process is a process of slowly disappearing the ability of the tissue to repair itself or replace and maintain its normal function so that it cannot survive infection and repair the damage suffered (Alpin, 2016). The aging process that occurs in the elderly slowly results in a decline in the structure and function of organs, both physical, psychological, mental, and social aspects so the elderly are vulnerable to various diseases.
Physiological changes that occur in the elderly also occur in the oral cavity, including the oral mucosa which has reduced function, making it easier to experience oral lesions. The Elderly is someone who reaches the age of 55 years, are powerless to earn a living for their daily needs, and receive a living from others. Old age is something that must be accepted as a reality and the biological phenomenon of life will end with the aging process which ends in death. According to WHO (2012), the elderly are classified into three, namely: middle age (middle age) 45-59 years, elderly (elderly) 60-74 years, and elderly (old) 75 years and over (Oppermann et al., 2015).

The condition of the body of the elderly is also often associated with systemic diseases or disorders which are directly or indirectly related to reduced efforts to maintain oral hygiene. Tooth decay, tooth mobility, caries, halitosis, gingivitis, gingival recession, loss of periodontal attachment, and alveolar bone are changes in periodontal tissue that are commonly found in the elderly. The periodontal tissues of the elderly who still have teeth have the capacity to survive, overcome and repair the effects of periodontal disease, requiring attention from health workers, especially dental health workers, both dentists, and dental nurses. Several studies that have been conducted, show that behavior and habits of maintaining dental and oral health have a very important role in maintaining teeth and periodontal tissue from dental and oral diseases. Treatment of periodontal disease includes scaling, root canal treatment, pocketing, regular plaque control, and diet (Niemiec, 2008).

IMPLEMENTATION METHOD

The implementers in this activity consisted of lecturers or dentists from the Faculty of Dentistry, Hang Tuah University, Surabaya. In this activity, props are needed in the form of posters and dental phantoms to increase knowledge of dental and oral health (Dental Health Education) and evaluation to know the level of knowledge of the elderly community on dental and oral health. In carrying out counseling and evaluation, resource persons are lecturers or dentists who are integrated from various fields of science, including public dental health, oral biology, orthodontics, prosthodontics, and dental radiology. Preparations are carried out for one month before the activity, starting in April 2022. Preparation for the activity begins with the formation of activities, which the committee then coordinates with each other to carry out community service activities. The coordination carried out includes site surveys, situation analysis, primary data collection, determination of extension themes, determination of the implementation team, and determination of the concept of extension events, as well as evaluation of results.

RESULTS AND DISCUSSION

The elderly at UPTD Griya Werdha Surabaya participated in the activity were 68 people. The elderly who have been given dental and oral health education materials show a cooperative attitude and are enthusiastic about participating in activities. The elderly were given material in the form of knowledge about how to maintain dental and oral health, the material on dental prostheses, and how to brush teeth with the correct technique. This shows that by providing education about dental health, it is hoped that the elderly can increase their knowledge of good dental health. This activity can encourage the elderly so that in the future the elderly at UPTD
Griya Werdha Surabaya have good dental health so that they can improve their quality of life of the elderly.

After giving the material, it was followed by a dental examination for the elderly at UPTD Griya Werdha. However, at the time of the dental examination, only 28 elderly people had the desire to have their teeth checked. Here the elderly at UPTD Griya Werdha Surabaya are expected to understand the dental and oral problems that exist in themselves by holding this dental and oral examination so that they can motivate the desire to do further examinations and actions to the dentist. The contribution of partners, namely the UPTD Griya Werdha Surabaya in this activity, was very cooperative partner during the survey process, coordinating implementation, and during the implementation of activities. During the implementation of the activities, the UPTD Griya Werdha helped the implementation process starting from directing to helping communicate with the elderly. In addition to providing educational materials and dental and oral examinations, assistance in the form of food and necessities needed by the elderly at UPTD Griya Werdha in the hope of helping meet the needs of the elderly in UPTD Griya Werdha.

The elderly often ignore the cleanliness of their teeth and mouth, and they often complain of toothache and lose teeth which can cause teeth to fall out. This condition can be prevented by maintaining dental and oral hygiene by brushing teeth regularly so that bacteria and germs in the mouth can be prevented from forming. This can be done regularly and continuously starting from oneself using (Niemiec, 2008):

a. Maintain oral and dental hygiene.
   Brushing teeth regularly and cleaning the gums well for those who have no teeth by using a cotton swab dipped in warm water aims to avoid the growth of fungus on the gums.
b. Regulate your diet by avoiding foods that can damage your teeth, such as lots of sugar.
c. Regular dental check-ups to the dentist, health center, or hospital every six months to find out abnormalities in the mouth from an early age.

Activities that must be carried out in addition to the above, the elderly also need to be given preventive measures for dental and oral diseases such as in the implementation of nursing care. Dental and oral health, especially for the active elderly, is the first order, various activities need to be considered by the elderly/family/health workers who carry them out. The efforts made include (Newman et al., 2019):
1. Promotive efforts, namely by providing counseling about:
   a. How to maintain dental and oral health.
   b. The importance of prostheses to restore chewing function.
   c. Periodic inspection.
2. Preventive efforts. What needs to be done is:
   a. Maintenance of teeth and mouth, including prostheses.
   b. Selection of foods that are easy to chew and digest.
   c. Early detection if there are mucosal abnormalities to prevent malignancy, so immediately carry out an examination.
   d. Periodic checkups by a dentist.
3. Curative and rehabilitative efforts.
Providing simple-level services in services is carried out in a polyclinic where there is an internal medicine expert who has studied geriatric problems, a nurse, and medical social workers (Newman et al., 2019)

Figure 1. Opening dental and oral health counseling activities for the elderly

Figure 2. Education of periodontal disease in the elderly

Figure 3. Education about dentures

Figure 4. Implementation of Oral Screening

Figure 5. Donations to the elderly at UPTD Griya Werdha
CONCLUSION

Providing education about dental and oral health to the elderly can increase knowledge of good dental health. This activity can encourage the elderly so that in the future the elderly at UPTD Griya Werdha Surabaya have good dental health so that they can improve their quality of life of the elderly.

REFERENCE


