

SUMMARY

This study was undertaken in 1991, with the prime objective of assessing the impact of the School Dental Service on the prevention and treatment of dental caries and periodontal disease among school children. The survey was conducted on the same diagnostic criteria used for the National Oral Health Survey of 1983/84, in order to attempt a logical comparison of the disease situation.

Study area was confined to Colombo South education division. The sample was derived from 6 year and 12 year old students. Two stage stratified random sampling technique was adopted with the help of a statistician to ensure best possible representation.

Two studies, a clinical and a questionnaire were undertaken simultaneously to obtain data. The diagnostic criteria was adhered to the standards set by WHO (1977).

The results suggested an overall reduction in the prevalence of both caries and periodontal disease when compared to 1983/84 situation. Consequently, there was a rise in disease free children. The treatment needs too showed a reduction and much scope to practice restorative dentistry than extractions. These findings appeared to be lined up with National Oral Health Goals for the year 2000. However, as the study sample was not representating the

entire country, further assessment on a wide scale is necessary to see the true picture.

Students who were benefitted from a school dental clinic situated within the premises of their schools, showed better oral health, suggesting a positive impact by the service. However, it has failed to achieve adequate coverage of its target population. It showed a significant need for improvement particularly with regard to the treatment of existing disease. The "need" and "unmet demand" far outweighs the "met demand".

School Dental Service had failed miserably in providing oral health education to an adequate number of children, which was an objective of the recent re-organization.

However, this positive impact and the overall reduction in disease situation shown in the present study should be interpreted only with a certain degree of reservation. The sample of the present study lacks adequate representation in socio-economic and educational background. In addition, the changes in the country, parental education, massive availability of fluoridated tooth-pastes, health education programmes in mass-media etc. would have influenced the reduction of both dental caries and periodontal disease with both being behaviour dependent. However, it still appears logical to state that School Dental Service exhibit the potential to play a key role in achieving National Oral Health Goals for the year 2000.