

## ORAL HEALTH COUNSELING FOR ELDERLY PATIENTS AT KERANGAN HEALTH CENTER, SOUTH TANGERANG

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### ABSTRACT

The elderly population increases every year and leads to several problems, especially health problems, because physical conditions have decreased every year. Elderly patients have limitations in carrying out activities including paying attention to and taking care of their oral health. The purpose of this study was to explain the importance of education for the elderly in maintaining oral health. This research method is Simple Random Sampling by using questionnaires and interviews with 37 elderly people, at Keranggan health center, South Tangerang. The results of the study obtained data in the form of the elderly age 60 - 67 years, the elderly work varied in the form of, traders, retirees, and no work. The drugs that are consumed routinely are antihypertension drugs, diabetes drugs, gout drugs, stomach acid drugs and pain relievers. The conclusions obtained from this study, there is still a lack of knowledge of the elderly in Keranggan health center, South Tangerang regarding the importance of maintaining oral and dental health.

**Keywords:** health, elderly, teeth, and mouth

### 1. INTRODUCTION

Poor oral health among elderly will cause non-communicable diseases which lead to increase mortality, decrease health-related quality of life (HRQoL), and increase healthcare expenses. In recent years, the program of Desa Siaga has also been promoted, which aims to empower villages, make communities or villages independent in overcoming health problems in their respective villages, and increase community participation in the health sector. In the Keranggan Community Health Center area, all villages/sub-districts including Siaga Village/District.<sup>1</sup>

Implementation of community participation and empowerment activities at the Keranggan Community Health Center can be realized in the form of Community-Resourced Health Efforts (UKBM) whose activities include monitoring and coaching health center for toddlers in 22 sub-districts/villages, 4 health centers for the elderly, and 2 health centers for PTM. There is also cross-sectoral collaboration with the Women's Empowerment, Child Protection, Population Control and Family Planning Service (DP3AP2KB) for infant, teenage and elderly.<sup>1</sup>

The results of the Posyandu strata data collection in the Keranggan Community Health Center working area in 2022 showed that there were no Pratama health center (0%), Madya health center (36%), Purnama health center (64%), and no Mandiri health center (0%). The active health center reached 100% and the activeness of toddler cadres reached 100%. All cadres have been trained and regularly carry out coordination meetings and coaching. Even though there are no Independent Health Center Strata in each sub-district, none are still Pratama Health Center.<sup>1</sup>

Geriatrics is a health service for the elderly (elderly) and treats conditions and diseases related to the aging process.<sup>2</sup> Base on the Law of the Republic of Indonesia No. 13 of 1998, the elderly is someone who has reached the age of 60 years and over.<sup>3</sup> Hawari in 2001 stated that the elderly is a condition characterized by a person's failure to maintain a balance against physiological stress conditions. This failure is related to a decrease in the ability to live and an increase in individual sensitivity. The characteristics of geriatric patients are multipathology, decreased physiologic reserve, atypical symptoms, and signs of disease, decreased functional status, and malnutrition.<sup>4</sup>

The World Health Organization (WHO) divides the life cycle of the elderly into four groups, namely middle age (middle age) age group 45 to 59 years, elderly (elderly) aged 60-74 years, elderly (old) aged 60-75 and 90. years, veryold age more than 90 years.<sup>3</sup> According to Solomon et al, The "13 i" which consists of Immobility (immobilization), Instability (instability and falls), Intellectual Impairment (intellectual disorders such as dementia and delirium), Incontinence (urinary and pelvic incontinence), Isolation (depression), Impotence (impotence), Immuno-deficiency (decreased immunity), Infection (infection), Inanition (malnutrition), Impaction (constipation), Insomnia (sleep disorders), Iatrogenic disorder (iatrogenic disorder) and Impairment of hearing, vision and smell (hearing disorders, sight and smell).<sup>3</sup>

The aim of the community service activity is to determine the knowledge and awareness geriatric people about procedures for proper and correct brushing of teeth in the Keranggan Community Health Center area, Ciputat, South Tangerang.

## 2. METHODS

This research method uses Simple Random Sampling by using questionnaires and interviews with 36 elderly people, at Keranggan Health Center, South Tangerang. The subject of the study obtained data in the form of the elderly age 60 -67 years. Each questionnaire's validity and reliability were tested on 30 respondents by online administration. After validation test of the questionnaire, a few questions were modified based on participants' feedback, and afterward, the survey was distributed at the day of counseling.

## 3. RESEARCH AND DISCUSSION

Counseling on caries prevention, simulations technique to brush teeth and maintain dentures properly and correctly was performed at the Keranggan Community Health Center, South Tangerang. The initial outreach activity was done by explaining and distributing brochures about the symptoms of caries, causes of caries, tips for preventing caries, simulating the correct way to brush teeth and dentures, holding a question-and-answer session regarding dental and oral health problems, and finished with the distribution of toothbrushes and toothpaste. The participants can understand how to maintain healthy teeth and mouths and understand how to brush teeth and maintain the dentures properly and correctly. Table 1 shows sociodemographic characteristics and daily oral health practice of geriatric patients.

**Table 1. The Sociodemographic Characteristics and Daily Oral Health Practice of Elderly**

	n	%
Age Mean $\pm$ SD (years)	64.4 $\pm$ 8.6	
Gender	11	30.5
Male	25	69.5
Female		
Educational Background		
Elementary School	7	19.4
Yunior High School	18	50
Senior High School	10	27.8
Bachelor	1	2.8
Xerostomia		
Yes	9	32.2
No	27	67.7
Frequency of brushing teeth in a day		
Never	2	5.6
Once/day	31	86.1
More than once/day	3	8.3
The use of toothpaste containing fluoride		
Yes	31	86.1
No	5	13.9
The use of dentures		
Yes	3	8.3
No	33	91.7
Do you remove your dentures overnight?		
Yes	3	8.3
No	33	91.7
Frequency of cleaning the dentures		
Never	3	8.3
Once/day	30	83.3

More than once/day	3	8.3
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Only 3 participants (8.3%) have complained of xerostomia and wear dentures, while majority of them know frequency of tooth brushing using fluoride toothpaste and clean their dentures. All of the participants agree and satisfied with oral counseling about technique to maintain oral health and dentures.

#### 4. CONCLUSION

Oral health is an important component for maintaining overall health and linked to general health and health-related quality of life.<sup>1</sup> As age increase, every individual will experience a decline in body function due to aging. The aging process is usually characterized by impaired patient mobility.<sup>5,6</sup> The limited mobility of geriatric patients is one factor in the lack of awareness in maintaining oral health, resulting in health problems in the oral cavity. Dental and oral health problems can occur both in the teeth and the oral mucosa. Dental conditions in geriatric patients that can be found include carious teeth, loose teeth, and tooth loss.<sup>2,6</sup>

The condition of dry mouth (xerostomia) is also often found in geriatrics. Xerostomia in geriatrics occurs due to atrophy of the salivary glands which causes a decrease in saliva production and changes in its composition. Changes due to the aging process result in a reduction in the rate of saliva flow so that the oral cavity tends to become dry.<sup>2,6</sup> Maintaining a healthy oral cavity is one of the important efforts to maintain a healthy lifestyle. If the oral cavity is neglected and not treated properly, various diseases in the oral cavity will arise. Therefore, dental, and oral health problems among geriatrics are related to general health and will affect an individual's quality of life.<sup>8</sup>

Studies have explained that older people do not clean their dentures properly and do not have an adequate oral hygiene due to several factors such as social status, age, educational background, systemic diseases, and smoking. Also lack of information about the maintenance of oral health and periodic recalls play an essential role in above mentioned situation.<sup>9</sup> Elderly individuals with lower education levels, with lack of family support and inadequate self-care independence, have poor knowledge related to oral care. Elderly with higher education has tendency to search related information about oral problems and preventive measures, such as using dental floss and changing their toothbrush regularly, via various channels.<sup>10</sup>

After carrying out several activities in the Dental and Oral Health Education program at the Keranggan Community Health Center, several indicators of success were obtained from the Dental and Oral Health Education program. Collaboration is established and can help with service activities at the health center around the Keranggan Community Health Center. The attitude and habits toward home procedures for oral and denture hygiene resulted in poor prosthesis cleanliness. Obstacles that occur during the dental and oral health education program, the lack of the number of educations,<sup>8</sup> so that implementation is less than optimal.

The positive impact of implementing dental and oral health education, namely increased knowledge about health for residents around Posyandu and Puskesmas, and improved health for residents around Posyandu and Puskesmas. Relationships are established between students, the community and Puskesmas officials increased knowledge and skills of the Posyandu community in correct tooth brushing, causes, symptoms and steps to prevent caries.

The public was helped and received new information about dental and oral health for the first time. Majority of the participants admitted the knowledge of care about general health but also the dental and oral health.

The conclusions obtained from this study, there is still a lack of knowledge of the elderly in the Keranggan Health Center Community, South Tangerang regarding the importance of maintaining dental and oral health and dentures cleanliness.



Figures 1. The activity of dental health counseling and data collection of the study



Figure 2. Dental and oral health education with participant of elderly patients and health cadres (a,b).The poster used to in promotion of dental and oral health (c)

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