

**72 - EVALUATION OF ORAL HEALTH CONDITIONS IN THE ELDERLY AT THE PATOS FIP-PB PHYSICAL THERAPY SCHOOL CLINIC**

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**INTRODUCTION**

With the increase in the proportion of elderly people in Brazil, the occurrence of oral health problems related to caries is also increasing. Researchers have asserted that studies that contribute to the verification of the use of indices and indicators of oral health should be performed, especially in the elderly population (Pinto, 2000). The DMFT index described by Klein and Palmer in 1937 measures caries in the permanent dentition of a group of individuals, and results from dividing the number of decayed, missing (extracted because of caries), and filled permanent teeth by the number of individuals examined (Cyprian, SOUSA, WADA, 2004).

According to data from the IBGE (13), in 2003 the population aged 60 years or older accounted for approximately (9.6%) of the total, which has already surpassed 16.7 million elderly people in Brazil and in the Northeast represented (9.2%) in 2003. At this time, this means that in the Northeast of Brazil, there are approximately 1,500,000 elderly persons in absolute numbers. Paraíba has the third highest number of elderly persons in the country. 391,000 of its inhabitants are elderly, the equivalent of (10.8%) of the state population (BRAZIL, 2008). According to the IBGE statistics (14), the city of Patos, PB, has an elderly population of 9,149, which constitutes approximately (10%) of its population. The most recent studies on the health of the elderly population in Brazil have been addressing the country's demographic transition into a rapidly aging population, due mainly to a decline in mortality and fertility rates (Colussi, FREITAS, Calvo, 2007). With aging, doctor visits increase, contrary to what occurs with the dentist. The lower frequency of dental visits may reflect the difficulty of access to dental care services or a perception of there being no need for it due to edentulism (Santos et al., 2007).

According to Santos (2001), identifying the oral health status and treatment needs of the elderly population is an emerging need. Recognizing the demands and needs, it is possible to start planning health services aimed at this age group, which should include permanent educational activities, preventive care, treatment, and rehabilitation. Many studies have been performed by checking the status of elderly oral health only by normative criteria. Nowadays it is necessary that surveys include evaluations of the self-reported health and well-being of elderly people.

In Brazil, the situation observed in the buccal profile of the elderly is precarious. Studies in the 1990s revealed that about 65% of the elderly showed an absence of teeth (COLUSSI; FREITAS; CALVO, 2001). According to Campostrini and Zenobio (2002), once compromised, oral health affects the general health, compromising nutrition, speech, and the physical and social well-being of the elderly. These problems, however, are limited because they do not reflect the impact oral conditions have on the quality of life these individuals. Thus, self-rated oral health is related to some clinical factors, such as the number of decayed, missing, and restored teeth, and some subjective factors, such as symptoms of disease, and the ability to smile, speak, and chew (SANTOS, 2001). This is because the elderly seek dental care only when the need clearly arises (RODRIGUES, 2005).

A study on oral health status in the elderly is important, since data on this condition is widespread and growing in Brazil, thus demonstrating how people perceive their oral health, the importance attached to this fact and their behavior in relation to it, since most of the elderly only seek dental care when they realize its importance, or even its necessity. This study is justified by the absence of reports regarding the oral health conditions among the elderly in the city of Patos, PB, in the literature.

Previous identification of the elderly population's knowledge of their oral health conditions permeates prevention measures and oral health promotion measures, so that their quality of life is not affected by conditions experienced over time and so that results are satisfactory when applying the DMF-D indices in the elderly. This study aims to determine the oral health conditions of an elderly group of patients at the Physiotherapy Clinic of the Integrated College of Patos.

**METHODOLOGY**

This is an exploratory study using a quantitative approach, performed in the Physiotherapy Clinic of the Integrated College of Patos, PB. The population consisted of 60 patients enrolled in a group of elderly patients. The sample consisted of 40 participants who met the following inclusion criteria: the interviewee should be 60 years old or older, of either sex, who did not have one, all, or some teeth in the oral cavity and who were enrolled in the clinic where the research was performed. Exclusion criteria were elderly patients who were less than 60 years old, as well as those who did not agree to participate in the study.

To process collected data, an interview script was directed at the research subjects, who responded to an instrument created to obtain information about the goals proposed by the study, conducted in May of 2010, previously scheduling the date and time in order to coordinate with the clinic. For data analysis, tables and charts were used with the aid of the Microsoft Word and Excel (2007).

It should be noted that this study was approved by the Ethics Committee (CEP) at the Integrated College of Patos, according to protocol number 0854/2010. The study complied with the criteria established by Resolution 196/96 of the National Health Council (BRAZIL, 1996).

**RESULTS/DISCUSSION**

The following results refer to data collected from 40 subjects enrolled in the Physiotherapy Clinic of the Integrated College of Patos regarding oral health. The proposal to assess the oral conditions of the elderly enrolled in the Physiotherapy Clinic of the Integrated College of Patos, PB, was made in order to understand the issues perceived by the group regarding oral health. Based on existing data from the literature, it is known that the oral health of the elderly population in Brazil is in a precarious state. However, the available information does not allow for a more detailed analysis of these oral health-related conditions by age. The age group studied in a study by Caldas Júnior et al. (6) converges with those found in this study, for these authors were motivated by the fact that Brazil is a country that is aging rapidly, and from this assumption arises the need to investigate the oral health of this group.

According to Santos et al. (2007), the growth of the elderly population in Brazil is due to improvements in the quality of life associated with the advancement of the science and technologies specifically geared to health. The change in the population age structure can be translated by lower birth rates and lower mortality. This means an aging population and an increased life expectancy at birth.

**TABLE 1** - Sample characteristics regarding oral hygiene. Patos-PB, 2011

DESCRIPTION	No.	%
<b>Do you perform oral hygiene every day</b>		
Yes	40	100
<b>If yes, how many times per day</b>		
2 times	12	30
3 times	28	70
<b>TOTAL</b>	<b>40</b>	<b>100</b>
DESCRIPTION	No.	%
<b>How many teeth are there in your mouth</b>		
None	23	57.5
From 1 to 5 teeth	04	10
From 6 to 10 teeth	10	25
More than 10 teeth	03	7.5
<b>How many teeth are missing from your mouth</b>		
13 teeth	02	5
20 teeth	01	2.5
22 teeth	03	7.5
24 teeth	05	12.5
25 teeth	02	5
27 teeth	02	5
28 teeth	02	5
All	23	57.5
<b>TOTAL</b>	<b>40</b>	<b>100</b>
DESCRIPTION	No.	%
<b>Are you happy with the condition of your mouth</b>		
Yes	13	32.5
No	27	67.5
<b>Are you able to feed yourself with your mouth in this condition</b>		
Yes	35	87.5
No	05	12.5
<b>Have you ever felt inferior to others because of your oral health</b>		
Yes	02	5
No	38	95
<b>TOTAL</b>	<b>40</b>	<b>100</b>

With regard to oral hygiene, the data in Table 1 show that 100% (40) of elderly perform daily oral hygiene, of which 70% (28) do it three times a day and 30% (12) twice a day. Fifty-seven point five percent (23) of the elderly patients surveyed said they no longer had any teeth in their mouth, 25% (10) said they still had between 6 to 10 teeth, 10% (4) reported that there is at least one to 5 teeth remaining in their oral cavity, and 7.5% (3) responded that it still contains more than 10 teeth.

Table 1 shows that 67.5% (27) of the elderly are not happy with their current oral health conditions while 32.5% (13) said they are satisfied with the conditions of their the oral cavity. However, 87.5% (35) said they did not have any problem in relation to feeding and 12.5% (5) said they can not eat properly because of the dental elements they lack.

According to the table, 95% (38) of the elderly reported that they do not feel inferior to others because of their oral health, while 5% (2) said they feel embarrassed and feel inferior to others because of the condition of their mouth.

The fact that elderly individuals claim to perform oral hygiene two to three times daily does not mean that they are really satisfactory, with perfect oral health, because appropriate oral hygiene practices, such as tooth brushing and interdental cleaning, remove plaque. These daily practices, recommended for all people from the emergence of the first teeth, are those that contribute most to the maintenance of the teeth throughout life, and therefore, for maintaining good oral health. Nothing justifies good hygiene and missing teeth in the mouth (BRAZIL, 2008).

The edentulous elderly in this study did not differ from those found in a similar study conducted by Silva, Souza and Wada (2005), where the presence or absence of teeth in the group was 45.5% (n = 61) dentate and 54.5% (n = 51) edentulous.

According to Reis et al. (2005), the prevalence of edentulism in the elderly reflects a problem in Brazil as a whole, as these authors state that caries is one of the greatest villains of infectious processes that lead to tooth loss, and it is the main determinant for performing multiple and large-scale extractions with advancing age, which begins to be the inevitable standard from the age of 30, as noted in the first national survey of oral health in 1986.

On the other hand, several studies have shown that elderly adults have fewer teeth in the mouth and a high rate of restorations in proportion to the number of teeth present, and that this is not an inevitable consequence of aging, but the result of a complex interaction between dental disease and a lack of preventive therapies used over the individual's lifetime (PASTRE, 2007).

According to this study's results, the majority of older people are not happy with their oral health conditions, for oral health plays an important role in the quality of life, and impairment can negatively affect one's self-esteem as well as decrease the pleasure of an active social life (TIAGO, 2006).

Thus, the problems relating oral health and aging cannot be associated with difficulties in swallowing and decreased chewing ability, since the literature shows that people with a deficient number or total loss of teeth do not experience difficulty with normal feeding. However, when some problems occur frequently, such as diminished capacity, difficulty swallowing, dry mouth, changes in taste, loss of the vertical dimension, they can have a cumulative negative effect on the health of the elderly person, leading them to feel inferior to others (TIAGO, 2006), although the results of this study show that the elderly people surveyed felt inferior because of their oral health.

When asked about the number of visits to the dentist, 80% (32) respondents said they do not regularly visit the dentist,

that is, there is no regular frequency of going to a dentist to check on their oral health; only 20% (08) said they often go to the dentist to check on their oral condition. Ninety-five percent (38) of the elderly respondents confirmed that they have received guidance on how to clean and take better care of their oral health, while 5% (2) said they never received any guidance.

The main reason older people did not go to the dentist was the belief that did they not require treatment, although other reasons were also cited, such as fear and the high cost of treatment. The main reason for seeking consultation was the presence of pain. Dental treatment was considered synonymous with extraction, and extraction would lead to the restored health of the teeth (ROCHA, 2006).

Guerra et al. (2003) conducted a study in which they evaluated the frequency of visits to the dentist by elderly people who regularly attended a medical clinic at a health center in Pernambuco. The sample consisted of 71 individuals aged 60 years or more and the data were obtained through interviews. The vast majority (89.9%) reported that it had been five years or more since they had visited the dentist and that they were not visiting the dentist regularly; these results converge with those found in this study.

Thus, the role of oral health education should not be attributed solely to the dentist, despite the dentist being the professional responsible for the dissemination of knowledge to the population. This task can be accomplished either directly, through the dentist's/surgeon's contact with groups and/or related persons, or indirectly through capacity building and training of individuals or groups (WENTZ; Portella, 2008).

## CONCLUSION

Given that the objective of this study was to examine the state of oral health in an elderly group at the Physiotherapy Clinic of the Integrated College of Patos, second, the responses of the questionnaire suggest that programs that encourage and enhance the quality of life of the elderly be developed, adding basic information in a humane way about the self-care, promotion, and preventive health care for this important segment of society, returning to them the right of citizenship that is a part of the Federal Constitution.

With aging, several anatomical and physiological changes occur in the oral cavity, but not necessarily effecting a health-disease imbalance. Many dental problems found in the elderly are, in fact, complications of disease processes accumulated throughout one's life due to poor oral hygiene, iatrogenesis, lack of guidance and interest in oral health, and lack of access to dental care.

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## EVALUATION OF ORAL HEALTH CONDITIONS IN THE ELDERLY AT THE PATOS FIP-PB PHYSICAL THERAPY SCHOOL CLINIC

### ABSTRACT

Introduction: With the increase in the proportion of elderly people in Brazil, the occurrence of oral health problems related to caries is also increasing. Researchers affirm that studies that contribute to the verification of the use of indices and indicators of oral health should be performed, especially in the elderly population. Objective: To examine the state of oral health in an elderly group at the Physiotherapy Clinic of the Integrated College of Patos. Methodology: A descriptive study with a quantitative approach, performed with 40 subjects in the Physiotherapy Clinic of the Integrated College of Patos, PB. Data were collected during the month of May 2010 through a structured interview. Data were analyzed descriptively and presented as a table. The research follows the guidelines of the CNS/MS Resolution 196/96. Results: regarding the hygiene of the oral cavity, 100% of the sample responded to perform oral hygiene. However, 57.5% (23) said they no longer have any teeth in the mouth, and 12.5% (5) reported missing an average of 24 teeth. Of these, 53.32% (8) responded still having at least four restored teeth in their mouth. Around 67.5% (27) of respondents said they are not happy with the current conditions of their oral health, however 87.5% (35) said they can feed themselves without any problems and 95% (38) reported never having felt inferior because of the condition of their oral health. Regarding dentist visits, 80% (32) of the respondents claimed not to be going to the dentist often, but 95% (38) had received guidance on how to sanitize and how to take better care of their teeth. Conclusion: the oral health conditions of the elderly people represented in this study are not satisfactory and reflects the need to develop programs to promote health and rehabilitation services for this population.

**KEYWORDS:** Elderly. Oral health. Prevention.

## EVALUATION DES CONDITIONS DE SANTÉ BUCCALE EN DES PERSONNES AGÉES DANS LA ECOLE CLINIQUE DE PHYSIOTHÉRAPIE DE LA FIP – MUNICIPALITÉ DE PATOS À L'ETAT DE PARAIBA.

### RESUMÉ

INTRODUCTION: Cependant qu'on a enregistré un accroissement de la taux de personnes âgées au Brésil, l'occurrence des problèmes de santé buccale par rapport à la carie a aussi augmenté. Les chercheurs sont d'accord sur le besoin des études contribuant à la vérification de l'application des indices et des indicateurs de la santé buccale, principalement chez des personnes âgées. OBJECTIF: Vérifier les conditions de la santé buccale dans un group de 40 personnes âgées dans la École Clinique de Physiothérapie des Facultés Intégrées de Patos. MÉTHODOLOGIE: C'est une étude descriptive avec une approche quantitative. Les données ont été récoltées au mois de mai 2011, par moyen d'entrevue structurée, et après analysées d'une façon descriptive et puis présentées sous la forme de tableaux. La recherche a suivi les directrices de la Résolution 196/96 du CNS/MS. RÉSULTATS: Tous les interviewés ont affirmé que ils font l'hygienization de la cavité buccale. Tandis que 57,5% (23) disent n'avoir plus aucun dent dans la bouche, 12,5% (05) affirment l'absence d'environ 24 dents, d'entre eux 53,32% (08) ont dit qu'ils ont au moins 04 dents avec réparation. Dentre les interviewés 67,5% (27) ne sont pas satisfaits avec ses conditions de santé buccale, cependant que 87,5% (35) disent n'avoir pas des problèmes de mastication, bien aussi n'ont pas des sentiments d'infériorité à cause de ses conditions de santé buccale. Dentre les interviewés 80% (32) ne sont pas allés au dentiste, néanmoins 95% (38) ont déjà reçu renseignement sur les soins qui doivent entretenir par rapport à leurs santé bucale. CONCLUSION: Les conditions de santé buccale des personnes âgées dans cette étude ne sont pas satisfactoires et reflètent la nécessité de programmes de promotion de la santé et de réhabilitation pour cette classe de la population.

**MOTS-CLÉS:** personnes âgées, santé buccale, prévention.

## DIAGNÓSTICO DE LAS CONDICIONES DE SALUD BUCAL EN ANCIANOS EN LA CLÍNICA ESCUELA DE FISIOTERAPIA DE LAS FIP PATOS (PB – BRASIL)

### RESUMEN

Introducción: Con el aumento en la proporción de ancianos en Brasil, aumenta también la aparición de problemas de salud bucal vinculadas a la caries. Investigadores afirman que estudios que contribuyan a la verificación de la aplicación de índices e indicadores de salud bucal deben realizarse, principalmente en la población anciana. Objetivo: verificar las condiciones de salud bucal en un grupo de ancianos de la Clínica de Fisioterapia de las Facultades Integradas de Patos. Metodología: estudio descriptivo con abordaje cuantitativo, realizado con 40 ancianos en la Clínica Escuela de Fisioterapia de las Facultades Integradas de Patos (PB, Brasil). Se analizó los datos de forma descriptiva, presentados en tablas. La investigación sigue las directrices de la resolución 196/96 del CNS/MS. Resultados: respecto a la higienización de la cavidad bucal, 100% de la muestra respondió que higienizan. Sin embargo, 57,5% (23) afirmaron que ya no tienen dientes y un 12,5% (05) relataron que faltan en media 24 piezas dentales. De estos, el 53,32% (08) respondieron que aún tienen por lo menos 4 dientes restaurados en la boca. Veintisiete entrevistados (67,5%) dijeron no sentirse satisfechos de las condiciones encontradas en la actualidad acerca de la salud bucal, aunque el 87,5% afirmaron alimentarse sin problema y el 95% (38) nunca se sintieron inferiores debido a sus condiciones de salud bucal. Sobre la ida al dentista, el 80% (32) de los entrevistados asumieron que a menudo no van al dentista, pero el 95% (38) recibieron orientaciones sobre la higienización y cuidado de los dientes. Conclusión: las condiciones de salud bucal de los ancianos representados en este estudio no son satisfactorias y se refleja la necesidad de elaboración de programas de fomento de la salud y rehabilitación para este segmento de la población.

**PALABRAS CLAVE:** Ancianos. Salud bucal. Prevención.

## AVALIAÇÃO DAS CONDIÇÕES DE SAÚDE BUCAL EM IDOSOS NA CLÍNICA ESCOLA DE FISIOTERAPIA DAS FIP PATOS – PB

### RESUMO

Introdução: Com o aumento na proporção de idosos no Brasil, aumenta também a ocorrência de problemas de saúde bucal relacionado à cárie. Pesquisadores afirmam que estudos que contribuam com a verificação da aplicação de índices e indicadores de saúde bucal devem ser realizados, principalmente na população idosa. Objetivo: verificar as condições da saúde bucal em um grupo de idosos da Clínica de Fisioterapia das Facultades Integradas de Patos. Metodologia: estudo descritivo com abordagem quantitativa, realizado com 40 idosos na Clínica Escola de Fisioterapia das Facultades Integradas de Patos-PB. Os dados foram coletados durante o mês de maio de 2010 através de um roteiro de entrevista estruturado. Os dados foram analisados de forma descritiva e apresentados em tabela. A pesquisa segue as diretrizes da Resolução 196/96 do CNS/MS. Resultados: quanto à higienização da cavidade bucal, 100% da amostra responderam que higienizam. Porém, 57,5% (23) afirmaram que já não tem mais nenhum dente na boca e que 12,5% (05) relataram que faltam em média de 24 dentes. Destes, 53,32% (08) responderam que ainda existem ao menos 4 dentes restaurados na sua boca. Os entrevistados em torno de (27), 67,5% afirmaram que não se sentem felizes com as condições encontradas na atualidade acerca da sua saúde bucal, entretanto

87,5% (35) afirmaram que conseguem se alimentar sem problemas e 95% (38) nunca se sentiram inferiores por conta das suas condições de saúde bucal. Na questão de ir ao dentista 80% (32) entrevistados assumiram que não vão ao dentista freqüentemente, mas 95% (38) receberam orientações de como higienizar e de como cuidar melhor de seus dentes. Conclusão: as condições da saúde bucal dos idosos representados neste estudo não são satisfatórias e reflete a necessidade de se elaborar programas de promoção de saúde e de reabilitação para este segmento da população.

**PALAVRAS-CHAVE:** Idosos. Saúde bucal. Prevenção.