This amounts to around **\$245 billion** per year, incurred by the 9 percent of Americans suffering from the disease.

> How can we significantly reduce this level of spending?

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RESOURCES

Douglas B. Berkey and Frank A. Scannapieco, "Medical Considerations Relating to the Oral Health of Older Adults," *Special Care in Dentistry*, Vol. 33, No. 4, August 2013, 164-176.

Marjorie K. Jeffcoat, Robert L. Jeffcoat, Patricia A. Gladowski, James B. Bramson, Jerome J. Blum, "Impact of Periodontal Therapy on General Health: Evidence From Insurance Data for Five Systemic Conditions," *American Journal of Preventive Medicine*, Vol. 47, No. 2, August 2014, 166-174.

Uma Kelekar, PhD, "Economic Costs of Oral Care in the United States in 2014," 2015.

Wenya Yang, Timothy M. Dall, Pragna Halder, Paul Gallo, Stacey L. Kowal, Paul F. Hogan, "Economic Costs of Diabetes in the U.S. in 2012," *Diabetes Care*, Vol. <u>36</u>, No. <u>4</u>, April 2013, 1033-1046.

"Statistics About Diabetes," American Diabetes Association, www.diabetes.org.

All research prepared for the Dental Trade Alliance by Uma Kelekar, Ph.D., Assistant Professor of Healthcare Management, Marymount University, Arlington, Virginia.

The U.S. spends in every 5 health care dollars on diabetes. Diabetes makes the body vulnerable to a host of serious complications, which are very expensive to treat.

Periodontitis, or severe gum disease, is one substantial complication—affecting almost a third of people with diabetes.

ARE SUSCEPTIBLE TO GUM DISEASE. Given their bodies' vulnerability to infection, people with poorly controlled diabetes are highly prone to gum disease: three times more so than those without diabetes.

DIABETICS

Now for some good news:

Given this physical association, regular oral care for diabetics has the potential to drive down diabetes costs. Research shows savings in the thousands for individuals and billions for the entire diabetic population.

> One study shows greatly reduced medical costs when people with diabetes receive periodontal treatment:

\$2,840

SAVINGS PER PATIENT PER YEAR

— or —

40.2%

OF TOTAL DIABETES CARE COSTS

- along with -

39.4%

Another study captures these realities on a broader scale:

If 60 percent of all diabetic adults received periodontal treatment, the U.S. health care system could save more then



Oral care lightens the economic burden of diabetes costs.

Here's how we can promote this cost-effective strategy:

HEALTH CARE ORGANIZATIONS

can better integrate oral care into medical care and design health-maintenance programs for people with diabetes.

INSURANCE PROVIDERS

can make sure dental coverage is integrated into medical coverage.

POLICYMAKERS

can mandate dental coverage, either as standalone insurance or as part of medical insurance, to encourage regular care. They can rethink government programs to extend broader care to diabetic patients.

BUSINESSES

can ensure their employees are covered for oral health and design wellness programs to encourage use of this coverage.

PHYSICIANS

treating people with diabetes can more actively refer patients to dentists and focus on diagnosing diabetes early in the disease process.

DENTISTS

can take measures to make their practices more accessible to elderly and low-income populations, groups for which diabetes is especially pronounced. They can establish specific diabetescare clinics and outreach efforts.

GUM DISEASE EXACERBATES DIABETES.

Gum disease releases certain white blood cells that are said to increase insulin resistance, worsening and advancing diabetic symptoms.