

## **Differences in the Oral Health Status and Oral Hygiene Practices According to Post Stroke Sequelae**

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### **Introduction**

Oral health and hygiene are crucial parameters in stroke patients. However, few studies has evaluated the oral health status and oral hygiene practices according to the level of function in stroke patients. The aim of the present study was to evaluate the oral health status and oral hygiene practices according to ambulation and personal hygiene levels in patients with stroke.

### **Methods**

Data from the fifth (2010-2012) and sixth (2013-2015) editions of the Korea National Health and Nutrition Examination Survey (KNHANES) for 6 years combined. 700 stroke patients were enrolled in our study. The patients' general characteristics are presented in Table 1. Table 2, 3 shows the Results of hierarchical logistic regression analysis adjusted for certain variables (age, gender, monthly household income, living arrangement, diabetes, stroke duration) that was performed to identify the effects of the ambulation level and functional independence on the oral health status and oral hygiene practices.

### **Results**

Subjective oral health was significantly poorer in patients who experienced a moderate problem with walking [adjusted OR (AOR), 1.68; 95% CI, 1.21-2.33] and bed-bound patients (AOR, 2.92; 95% CI, 1.01-8.44) than in patients who could walk without difficulty. Patients who were unable to bathe or dress independently exhibited a significantly higher risk of dental caries than did those who could perform the same activities unassisted. The probability of brushing teeth  $\geq 2$  times daily was 69% lower in bed-bound patients (AOR, 0.31; 95% CI, 0.11-0.87) than in patients who could walk without difficulty, and 76% lower in patients who were unable to bathe or dress independently (AOR, 0.24; 95% CI, 0.09-0.62) than in those who could perform the same activities without difficulty.

### **Conclusion**

There were differences in oral health status and oral hygiene practices, according to ambulation level and functional independence, in the stroke patient group. These Results indicate the need for oral care for stroke patients who exhibit ambulatory and functional limitations.

Table 1. General characteristics of patients with stroke

	Study subjects <sup>†</sup>	
	Unweighted (n) <sup>†</sup>	Weighted (%) <sup>†</sup>
All <sup>†</sup>	700	100.0
Sex <sup>†</sup>		
Men <sup>†</sup>	363	54.8
Women <sup>†</sup>	337	45.2
Age (years) <sup>†</sup>		
20-29 <sup>†</sup>	4	0.6
30-39 <sup>†</sup>	8	1.1
40-49 <sup>†</sup>	24	3.4
50-59 <sup>†</sup>	97	13.9
60-69 <sup>†</sup>	243	34.8
70+ <sup>†</sup>	323	46.2
Monthly household income <sup>†</sup> (10,000 won) <sup>†</sup>		
<100 <sup>†</sup>	327	45.6
≥100 - < 200 <sup>†</sup>	153	21.4
≥200- <300 <sup>†</sup>	119	16.6
≥300 <sup>†</sup>	96	16.4
Living arrangement <sup>†</sup>		
Living with family <sup>†</sup>	578	83.5
Living alone <sup>†</sup>	122	16.5
Ambulation level <sup>†</sup>		
No problem <sup>†</sup>	358	54.6
Moderate problem <sup>†</sup>	320	42.3
Unable <sup>†</sup>	22	3.1
Self care <sup>†</sup>		
No problem <sup>†</sup>	522	74.6
Moderate problem <sup>†</sup>	149	21.3
Unable <sup>†</sup>	29	4.1

Table 2. Variations in the oral health status according to the level of ambulation and functional independence in patients with stroke

	Subjective oral health <sup>†</sup>		Number of decayed teeth <sup>‡</sup>	
	Model 1 <sup>†</sup>	Model 2 <sup>†</sup>	Model 1 <sup>†</sup>	Model 2 <sup>†</sup>
	AOR (95% CI) <sup>†</sup>	AOR (95% CI) <sup>†</sup>	$\beta(t)$ <sup>‡</sup>	$\beta(t)$ <sup>‡</sup>
<b>Ambulation level<sup>‡</sup></b>				
No problem <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>
Moderate problem <sup>‡</sup>	1.68 (1.21-2.33)** <sup>‡</sup>	1.68 (1.21-2.33)** <sup>‡</sup>	0.018(0.45) <sup>‡</sup>	0.022(0.53) <sup>‡</sup>
Unable <sup>‡</sup>	3.59 (1.27-10.12)* <sup>‡</sup>	2.92 (1.01-8.44)* <sup>‡</sup>	0.078(1.99) <sup>‡</sup>	0.073(1.83) <sup>‡</sup>
Model test <sup>‡</sup>	0.679 <sup>a</sup> <sup>‡</sup>	0.483 <sup>a</sup> <sup>‡</sup>	2.830 <sup>b</sup> <sup>‡</sup>	2.329 <sup>b</sup> <sup>‡</sup>
<b>Self care<sup>‡</sup></b>				
No problem <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>
Moderate problem <sup>‡</sup>	1.58 (1.07-2.33)* <sup>‡</sup>	1.54 (1.04-2.27)* <sup>‡</sup>	0.027(0.70) <sup>‡</sup>	0.027(0.68) <sup>‡</sup>
Unable <sup>‡</sup>	1.25 (0.57-2.77)	1.29 (0.57-2.93)	0.157(4.08)*** <sup>‡</sup>	0.173(4.43)*** <sup>‡</sup>
Model test <sup>‡</sup>	0.912 <sup>†</sup> <sup>‡</sup>	0.750 <sup>†</sup> <sup>‡</sup>	5.000 <sup>†</sup> <sup>‡</sup>	4.408 <sup>†</sup> <sup>‡</sup>

<sup>†</sup>P<0.05, \*\*P<0.01, \*\*\*P<0.001<sup>†</sup>

AOR: adjusted odds ratio<sup>†</sup>

95% CI: confidence interval<sup>†</sup>

<sup>†</sup>Hosmer-Lemeshow test<sup>†</sup>

<sup>†</sup>F-test<sup>†</sup>

Model 1: Adjusted for sex, age, monthly household income, and living arrangement<sup>†</sup>

Model 2: Adjusted for sex, age, monthly household income, living arrangement, diabetes, and stroke duration<sup>†</sup>

Table 3. Variations in oral hygiene practices linked with ambulation ability and functional independence

	Tooth brushing <sup>†</sup>		Oral exam <sup>†</sup>		Use of dental service <sup>†</sup>	
	Model 1 <sup>‡</sup>	Model 2 <sup>‡</sup>	Model 1 <sup>‡</sup>	Model 2 <sup>‡</sup>	Model 1 <sup>‡</sup>	Model 2 <sup>‡</sup>
	AOR (95% CI) <sup>‡</sup>	AOR (95% CI) <sup>‡</sup>	AOR (95% CI) <sup>‡</sup>	AOR (95% CI) <sup>‡</sup>	AOR (95% CI) <sup>‡</sup>	AOR (95% CI) <sup>‡</sup>
<b>Ambulation level<sup>‡</sup></b>						
No problem <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>
Moderate problem <sup>‡</sup>	0.72 (0.15-1.03) <sup>‡</sup>	0.75 (0.45-1.22) <sup>‡</sup>	1.01(0.60-1.68) <sup>‡</sup>	1.00 (0.59-1.68) <sup>‡</sup>	0.66 (0.43-1.00) <sup>‡</sup>	0.69 (0.45-1.06) <sup>‡</sup>
Unable <sup>‡</sup>	0.40 (0.15-1.03) <sup>‡</sup>	0.31 (0.11-0.87) <sup>*‡</sup>	0.33 (0.04-2.61) <sup>‡</sup>	0.34 (0.04-2.84) <sup>‡</sup>	0.65 (0.23-1.83) <sup>‡</sup>	0.47 (0.15-1.50) <sup>‡</sup>
Model test <sup>‡</sup>	0.761 <sup>*‡</sup>	0.842 <sup>*‡</sup>	0.433 <sup>*‡</sup>	0.256 <sup>*‡</sup>	0.370 <sup>*‡</sup>	0.215 <sup>*‡</sup>
<b>Self care<sup>‡</sup></b>						
No problem <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>	1.00 <sup>‡</sup>
Moderate problem <sup>‡</sup>	0.72 (0.43-1.19) <sup>‡</sup>	0.72 (0.43-1.19) <sup>‡</sup>	0.97 (0.51-1.82) <sup>‡</sup>	0.98 (0.52-1.83) <sup>‡</sup>	0.98 (0.60-1.57) <sup>‡</sup>	1.01 (0.62-1.63) <sup>‡</sup>
Unable <sup>‡</sup>	0.23 (0.09-0.59) <sup>**‡</sup>	0.24 (0.09-0.62) <sup>**‡</sup>	0.58 (0.14-2.35) <sup>‡</sup>	0.35 (0.66-1.86) <sup>‡</sup>	0.60 (0.22-1.61) <sup>‡</sup>	0.71 (0.25-2.06) <sup>‡</sup>
Model test <sup>‡</sup>	0.925 <sup>*‡</sup>	0.242 <sup>*‡</sup>	0.873 <sup>*‡</sup>	0.904 <sup>*‡</sup>	0.435 <sup>*‡</sup>	0.154 <sup>*‡</sup>

<sup>†</sup>P<0.05, <sup>\*\*</sup>P<0.01, <sup>\*\*\*</sup>P<0.001<sup>‡</sup>

AOR: adjusted odds ratio<sup>‡</sup>

95% CI: confidence interval<sup>‡</sup>

<sup>†</sup>Hosmer-Lemeshow test<sup>‡</sup>

Model 1: Adjusted for sex, age, monthly household income, and living arrangement<sup>‡</sup>

Model 2: Adjusted for sex, age, monthly household income, living arrangement, diabetes, and stroke duration<sup>‡</sup>