

UK National Screening Committee (UKNSC)

Screening for dental disease in children aged 6 to 9 years

Date: 7 November 2024

Contents

Aim.....	1
Current Recommendation	1
Internal Evidence Summary	2
Consultation	2
Recommendation	3
Criteria for a Population Screening Programme	3
The Test.....	3
The Screening Programme	3
Annex A: List of Organisations Contacted	5
Annex B: Consultation Responses	6

Aim

To ask the UK National Screening Committee (UKNSC) to make a recommendation, based on the evidence presented in this document, whether or not screening for dental disease in children aged 6 to 9 years meets the UKNSC criteria for a systematic population screening programme, and whether or not the recommendation on screening for dental disease in children aged 6 to 9 years should remain the same.

Current Recommendation

The UKNSC currently does not recommend screening for dental disease among children aged 6 to 9 years. This recommendation is based on the results of 2019 UK NSC evidence summary:

1. No new evidence was found (since October 2012) on the effectiveness of screening on reducing dental disease in children 6 to 9 years old.
2. Additionally, two published systematic literature reviews on screening for dental disease were identified. These reviews included studies published before 2012, with one exception from 2014 conducted in a non-comparable country (India). Therefore, they were not included in 2019 evidence summary per protocol. The reviews found no significant differences between screening

and no screening in reducing dental disease, and no evidence was found regarding the effect of screening on untreated dental disease.

Internal Evidence Summary

Dental disease is on UKNSC's list of topics and was scheduled to be reviewed in accordance with the triennial review process. In November 2023, the US Preventative Service Task Force (USPSTF) published a comprehensive systematic review on screening for oral health among children. Therefore, we used this review as the evidence base to evaluate against the UKNSC's criteria for a population screening programme:

- 1) the accuracy of screening tests to identify children with oral health issues (criterion 4);
- 2) the effectiveness of oral health screening programmes in primary care setting (criterion 11), and
- 3) the harms of screening to prevent oral health issues (criterion 13).

We further assessed the quality of the systematic review, and conducted an updated literature search until August 2024.

The assessment with the AMSTAR 2 quality assurance tool demonstrates that the USPSTF systematic review is of very good quality. Based on the USPSTF review, and our most updated systematic search, there is no new evidence found answering our research questions since the last review. Therefore, the conclusion of the 2024 review is that population screening for dental disease in children aged 6 to 9 years should not be recommended.

In 1996, UKNSC recommended that screening for dental disease in children aged 6 to 9 years should be discontinued. Since then, the UKNSC has consistently recommended against screening for dental disease in children in its regular review process. Therefore, we recommend removing dental disease from the list of conditions under regular review.

Consultation

A 6-week consultation (17 September 2024 – 29 October 2024) was hosted on the UKNSC website. Direct emails were sent to 14 stakeholders. (Annex A)

Comments were received from the following one stakeholder (see Annex B for comments):

- School Nursing Service, Hertfordshire community NHS trust

The comment primarily focused on the prevention of dental disease in school aged children, suggesting a one-time dental assessment in School Year 1, along with

annual educational talks on dental hygiene for both children and parents. While the UKNSC evidence team agrees that prevention of dental disease is very important for school children, unfortunately it falls outside the scope of the UKNSC's responsibilities.

Response: UKNSC evidence team conducted a comprehensive review in 2024, which suggested that school-based screening programme is not effective in reducing dental disease in children. Therefore, currently we do not recommend a national screening programme on dental disease in children. The UKNSC will revisit the topic if new evidence emerges that could significantly impact the recommendation. We agree that prevention is essential for maintaining dental health for school children, unfortunately prevention falls outside the scope of UKNSC's responsibility. We will engage in future discussions with colleagues in the prevention policy team to consider some form of preventative measures.

Recommendation

The Committee is asked to approve the following recommendation:

- A systematic population screening for dental disease in children aged 6 to 9 years is not recommended in the UK.
- To remove dental disease from the list of conditions regularly reviewed by the UKNSC. The UKNSC will reopen this topic if new evidence becomes available that is likely to have a significant effect on the recommendation. Stakeholders can also submit an annual call proposal for the UKNSC to reopen this topic if new evidence becomes available.

Criteria for a Population Screening Programme

This section looks at whether certain UKNSC criteria have been met when reviewing a given screening programme. Only the criteria evaluated by the current review have been included below.

The Test

Criterion 4: There should be a simple, safe, precise and validated screening test.

- **Criterion 4 has not been met**

The Screening Programme

Criterion 11: There should be evidence from high quality randomised controlled trials that the screening programme is effective in reducing mortality or morbidity. Where screening is aimed solely at providing information to allow the person being screened to make an "informed choice" (e.g., Down's syndrome, cystic fibrosis carrier screening), there must be evidence from high quality trials that the test

accurately measures risk. The information that is provided about the test and its outcome must be of value and readily understood by the individual being screened.

- **Criterion 11 has not been met**

Criterion 13: The benefit gained by individuals from the screening programme should outweigh any harms for example from overdiagnosis, overtreatment, false positives, false reassurance, uncertain findings and complications.

- **Criterion 13 has not been met**

Annex A: List of Organisations Contacted

1. British Dental Association
2. British Dental Health Foundation
3. Dental Public Health Team, Yorkshire and Humber Public Health England Centre
4. Faculty of General Dental Practice (UK)
5. Faculty of Public Health
6. Institute of Child Health
7. RCS Faculty of Dental Surgery
8. Royal College of General Practitioners
9. Royal College of Paediatrics and Child Health
10. Royal College of Physicians
11. Royal College of Physicians and Surgeons of Glasgow
12. Royal College of Physicians of Edinburgh
13. Royal College of Surgeons
14. The British Association for the Study of Community Dentistry

Annex B: Consultation Responses

Note: Personally identifiable information has been redacted from certain comments, where individuals have chosen not to have personal details made public.

Name:	XXXX XXXX	Email address:	XXXX XXXX
Organisation (if appropriate):	School Nursing		
Role:	XXXX XXXX		
Do you consent to your name being published on the UKNSC website alongside your response? No			
Section and / or page number	Text or issue to which comments relate	Comment	
6	Early detection of dental disease and timely intervention can prevent pain, tooth loss, and harm to permanent teeth.	<p><i>Please use a new row for each comment and add extra rows as required.</i></p> <p>One off assessment in schools by dental service KS 1 – parents informed if decay is detected. Important to detect any decay – early intervention. Parents required to attend group session on importance of teeth cleaning and how to clean children’s teeth.</p>	
7	Guidance in the UK is focused on prevention with an emphasis on effective interventions for improving dental health.	<p>Presently there is no preventative intervention (in my area). Every year a service should be in schools talking to children and parents regarding cleaning teeth and the importance of this (hard hitting)</p>	
		Yes	No