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## The Child Dental Health Survey New South Wales, 1991

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by

The AIHW Dental Statistics  
and Research Unit

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**The AIHW Dental Statistics and Research Unit (DSRU) is an external unit of the Australian Institute of Health and Welfare and was established in 1988 at The University of Adelaide. The DSRU was funded to improve the range and quality of dental statistics and research on the dental workforce, dental health status, dental practices and use of dental services.**

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## THE CHILD DENTAL HEALTH SURVEY - NEW SOUTH WALES 1991

### Purpose of this report

This report continues the annual series providing descriptive statistics concerning child dental health in New South Wales. The report contains tables and figures. Information listed in the tables includes: the age, sex and country of birth/Aboriginality of children in the sample; their deciduous and permanent caries experience; frequency of fissure sealants; immediate treatment needs; and children's history of school dental service examinations. The figures combine and summarize information from four of the tables.

The data for this report were collected during the 1991 calendar year from patients of the New South Wales School Dental Service by dental therapists and dentists. A random sampling procedure was used to select approximately one in 16 patients. This was achieved by selecting those children whose birthday was on the 3rd or 30th any month. Provision was made for inclusion and numerical weighting of data from all children whose date of birth was unknown. When an individual child was sampled more than once during the calendar year, the information from only the first examination was included in Tables 1 to 7 (inclusive). Table 8 contains data from all examinations of sampled children.

The following sections briefly describe each table and provide a simple, summary statement highlighting differences between the 1991 and 1990 findings. However, no formal hypothesis tests have been undertaken, and descriptions of difference between years are intended as a guide to the reader, rather than an evaluation of trends.

### Table 1: Demographic composition of the sample

The majority of children in the sample (93.9 per cent) were aged between five and 12 years (inclusive). Within that range, eight year olds were the most frequent individual age, while there tended to be smaller numbers of children towards the lower and upper limits of the age range. The age structure within the majority of the sample therefore reflects closely the age range of children who attend primary schools and who constitute the main target group of the School Dental Service. There were very small numbers of children aged more than 15 years or less than four years, and the data from them has been excluded from the subsequent tables describing dental health status (Tables 3 to 8). Children aged four years or between 13 and 15 years were represented in small numbers which results in low reliability of some computed statistics in Tables 3 to 8. Furthermore, they are likely to be less representative of the corresponding age groups of school children than is the case for the majority of the sample aged five to 12 years.

Males constituted 51.4 per cent of children in the full sample, and within individual ages within the range of five to 12 years, the percentage of males varied from 48.5 and 53.9 per cent.

### *Changes since 1990*

The total sample size in 1991 was smaller than the preceding year by some 1,413 children. In 1991, the most frequent individual age was eight years, whereas in 1990 six year olds were the most frequent group, and there were more consistent numbers of children in other individual ages up to 11 years.

## Table 2: Country of birth including Aboriginality

Australian-born non-Aboriginal persons comprised the great majority of both children and mothers. The second most frequent groups were children who were Australian born Aboriginals, and mothers who were born in the Middle East.

### *Changes since 1990*

In 1991 there were greater percentages of children and mothers recorded as Australian (non-Aboriginal). The corresponding decrease was observed for the "Not known" category. Amongst the other known categories, there were very small changes of one per cent or less.

## Table 3: Deciduous teeth: age-specific prevalence

The mean dmft prevalence among children aged 4 to 9 years varied across a narrow range, from 2.04 to 2.19 teeth. The deciduous caries experience of children aged more than 9 years naturally declines as teeth exfoliate. The range in the mean number of decayed deciduous teeth was greater than that observed for dmft, decreasing from 1.84 among four year olds to 0.78 among nine year olds. As a consequence, there was a two-fold difference in the d/dmft percentage which declined from 83.7 per cent among four year olds to 40.1 among nine year olds.

### *Changes since 1990*

There were small reductions of 0.1 to 0.3 in the mean number of decayed deciduous teeth and dmft within some ages, although this was not consistent and seven year olds recorded a small increase of 0.1 in mean dmft. Age related trends were consistent across the two years, and there were inconsequential variations in the age specific d/dmft percentage and the percentage of children with dmft=0.

## Table 4: Permanent teeth: age-specific prevalence

The mean numbers of decayed permanent teeth and DMFT were smaller than the corresponding means for deciduous teeth across the range of 5 to 11 years. In contrast to deciduous caries, the mean number of decayed and DMF teeth increased in a fairly consistent manner across increasing age groups. As a consequence, the percentage of DMFT due to decay (D/DMFT) and the percentage of caries free children (DMFT=0) declined across age groups. It is noteworthy that more than 50 per cent or more of children aged 12 years or less were caries free (DMFT=0).

Among those aged 13 years or more, the age-associated increase in mean DMFT was greater: the mean numbers of decayed permanent teeth and DMFT for 15 year olds are approximately twice as large as the corresponding means for 13 year olds. In part, this pattern probably reflects more rapid progression of caries, particularly after eruption of second molars. However, in view of the apparently less-representative nature of these older ages, it is likely that part of the differences could be related to other characteristics of older patients within the School Dental Service other than a simple ageing effect.

### *Changes since 1990*

The mean DMFT of individual ages was virtually to the corresponding figures for 1991 within the age range six to 11 years. The 12 year old mean DMFT in 1991 was 0.13 lower than the 1990 figure. The mean figure for 13 year olds decreased, but for 14 year olds it increased. Within the main age groups of six to 12 years, the mean number of decayed permanent teeth

remained virtually identical in 1991, and there were only small and inconsistent variations in the D/DMFT percentage and the percentage of children with DMFT=0;

### Table 5: All teeth: age-specific prevalence

Untreated decay in the combined deciduous and permanent dentitions ( $d+D=1, 2, 3$  or  $4+$ ) existed for between 30 to 46 per cent of children in the age range five to 12 years. The greatest likelihood of untreated decay within that age range occurred for 7-year-olds, although the most extensive levels of untreated decay ( $d+D=4$  or more) occurred in children aged 6 years or less.

In most ages, more than 95 per cent of children had no deciduous or permanent teeth missing due to caries. The greatest likelihood of missing teeth was observed for eight year olds, where 6.3 per cent had one or more missing teeth. Much smaller percentages of children avoided fillings, and this was associated with age. There was a reasonably consistent decline in the percentage of children with no caries experience in either deciduous or permanent dentition ( $dmft+DMFT=0$ ), from 54.9 per cent at age five to 35.5 per cent at age 10. The percentage fluctuated around 40 per cent among most older ages, reflecting the pattern of exfoliation of deciduous teeth. This statistic serves to demonstrate that more than one third of children at any of the key primary school ages (five to 12 years) have no experience of dental caries.

#### *Changes since 1990*

Within the age range of five to 12 years there were some small increases (up to four percentage points) in the percentage of children with no untreated decay ( $d+D=0$ ). There appeared to be corresponding reductions in percentage of children with four or more decayed teeth. However, these patterns were not observed among all age groups within the range 5 to 12 years. For example, seven year olds registered a 2.7 per cent decrease in the percentage with  $d+D=0$ . Within the age range of five to 12 years, the percentages of children with no missing or filled teeth did not vary substantially between 1990 and 1991. There was an increase of some six per cent in the percentage of 12 year old children with no caries experience ( $dmft+DMFT=0$ ), while in younger age groups small increases and some decreases were observed.

### Table 6: Fissure sealants: age-specific prevalence

Fissure sealants were prevalent among children aged 7 years or more, and in the range of seven to 12 years, the mean number of fissure sealants exceeded the mean number of teeth with untreated caries (mean D - Table 4). In most ages there is a tendency for children with some permanent caries experience ( $DMFT=1+$ ) to have a higher likelihood of sealants than children without caries experience ( $DMFT=0$ ). However the differential use of sealants appears to be limited. For example, 19.5 per cent of 12 year olds with  $DMFT=1+$  had one or more fissure sealants, while 17.0 per cent of 12 year olds with  $DMFT=0$  had fissure sealants.

#### *Changes since 1990*

There were small increases in the mean number of fissure sealants within some individual age groups. For example, the figure for 12 year olds increased from 0.50 to 0.65 among 12 year olds. However there were insubstantial changes in the percentage with sealants among children with  $DMFT=0$  and  $DMFT=1+$ .

**Table 7: Immediate treatment needs**

Immediate treatment needs were recorded when, in the judgement of the clinical examiner, there was existing pain or infection or the likelihood of pain or infection developing within a four week period. Immediate treatment needs could also be recorded for life threatening conditions.

Between 12 and 20 per cent of children in the key age range of five to 12 years had immediate treatment needs. The percentage tended to be highest among younger ages. Those with immediate treatment needs had substantially higher mean dmft values than the overall sample (Table 3). For example, among six year olds with immediate treatment needs, the mean dmft of 4.67 was approximately twice as large as the overall sample mean of 2.05. There was a similar trend for permanent DMFT, with approximately two-fold differentials between those with immediate treatment needs and the sample mean. Consistent with this overall picture was the relatively high percentages of children with four or more decayed teeth (d+D=4+).

*Changes since 1990*

The percentage of children with immediate treatment needs and their pattern of deciduous and permanent caries experience was very similar to the figures for 1990.

**Table 8: School Dental Service examinations**

The left hand side of this table describes the percentage of children who were new patients (having had no previous dental examination) in the New South Wales School Dental service. The figure was highest for the youngest ages (less than six years) while fewer than five per cent of those aged 9 years or more had no previous examination. This pattern is expected, and indicates that most patients are enrolled during their early school years.

The right hand side of the table refers to children with previous examinations, and indicates their distribution according to time since last dental examination. Between one third and one half of children in most ages received examinations within 7 to 12 months of their previous examination. Periods of less than six months and 13-24 months were the other predominant re-examination intervals, and they occurred with similar frequency for most ages. However, there was a tendency for younger age groups to have shorter re-examination intervals. Very few children were re-examined after a period of two or more years, and the percentage was highest (greater than 10 per cent) among the oldest children aged 13 years or more.

*Changes since 1990*

There was a general tendency for larger percentages of children to be registered as having previously had a School Dental Service examination, with most of the corresponding reduction observed for the "Unknown" category. Among those with previous examinations, the re-examination intervals tended to be shorter. For example, among those aged six to 12 years the percentage with a prior examination within six months increased by three per cent (12 year olds) through to 11 per cent (six year olds).

**Figure 1: Percentage of children with dmft=0, DMFT=0 and d+D=4+**

This figure presents data contained in tables 3, 4 and 5 to summarize the extent of dental health (represented by percentage with no caries experience) and the extent of more extensive untreated decay (represented by the percentage with d+D=4 or more).

**Figure 2: Time since last dental examination**

This figure draws on information from table 8, and selects 6- and 12-year-olds to demonstrate the variation in time since last examination.

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**TABLE 1: DEMOGRAPHIC COMPOSITION OF THE SAMPLE**

Data for the Child Dental Health Survey are collected from a stratified random sample of children in all Australian States and Territories. In New South Wales the sampling is 1:15.9. The following table describes the number of records processed from children in New South Wales.

State/Territory: **New South Wales**

Sampling Ratio: **1:15.9**

Data for period **January-December 1991**

Date of Report: **4th June 1993**

Age (years)	UNWEIGHTED NUMBER OF RECORDS PROCESSED						WEIGHTED NUMBER OF CHILDREN IN SAMPLE <sup>1</sup>		
	TYPE OF SAMPLING								
	Known date of birth			Age only known			Males	Females	Persons
	Males	Females	Persons	Males	Females	Persons			
2	3	5	8	0	0	0	3	5	8
3	0	3	3	0	0	0	0	3	3
4	32	36	68	1	1	2	32	36	69
5	234	243	477	6	1	7	237	245	482
6	336	306	642	6	7	13	340	309	649
7	341	331	672	4	4	8	345	334	679
8	340	361	701	4	0	4	344	365	708
9	332	306	638	1	5	6	335	309	645
10	366	313	679	3	3	6	370	316	686
11	307	275	582	3	1	4	310	278	588
12	156	138	294	0	1	1	158	139	297
13	58	50	108	0	0	0	59	50	109
14	43	40	83	0	1	1	43	40	84
15	13	14	27	0	0	0	13	14	27
16	0	2	2	0	0	0	0	2	2
17	3	0	3	0	0	0	3	0	3
18	0	1	1	0	0	0	0	1	1
19	1	0	1	0	0	0	1	0	1
<b>Total</b>	<b>2565</b>	<b>2424</b>	<b>4989</b>	<b>28</b>	<b>24</b>	<b>52</b>	<b>2592</b>	<b>2449</b>	<b>5041</b>

<sup>1</sup> Processed records are weighted to reflect the sampling scheme. Records from children with a known date of birth are weighted up, while records from children for whom age only is known are weighted down. The sum of the weighted records is equivalent to the number of children sampled for the survey. The number of cases have been rounded to the nearest integer.



**TABLE 2: COUNTRY OF BIRTH (INCLUDING ABORIGINALITY)**

The country of birth of children is determined from information concerning birthplace of the child and mother. The number and percentage of children in each group is provided in this State-specific report.

State/Territory: New South Wales

Sampling Ratio: 1:15.9

Data for period January-December 1991

Date of Report: 4th June 1993

COUNTRY OF BIRTH	CHILDREN		MOTHERS	
	Number <sup>1</sup>	%	Number	%
Australia (non-Aboriginal)	4514	89.5	3771	74.8
Australia (Aboriginal or TSI)	79	1.6	74	1.5
United Kingdom and Eire	40	0.8	148	2.9
Other English speaking	43	0.9	87	1.7
Southern Europe	16	0.3	145	2.9
Other Europe	16	0.3	57	1.1
Middle East	32	0.6	202	4.0
South East Asia	57	1.1	102	2.0
Other Asia	38	0.8	78	1.5
Other	30	0.6	73	1.4
Not known	175	3.5	304	6.0
Total	5041	100.0	5041	100.0

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<sup>1</sup> Data are weighted to reflect the sampling scheme by correcting for the over-representation in the sample of children with an unknown date of birth and children from outside the Darwin region. Data relating to second or subsequent examinations of children within this reporting period are eliminated.

**TABLE 3: DECIDUOUS TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>**

This table uses Statewide data to describe the dmft index and its components for individual (year of birth) ages. Indices are calculated from data collected over a 12 month period. Where children received more than one examination during this period, the information derived from examinations other than the first is excluded. Age-specific indices denoted with an asterisk (\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these indices are statistically unreliable.

State/Territory: New South Wales

Sampling ratio: 1:15.9

Data for period January-December 1991

Date of report: 4th June 1993

Age (years)	Number of children in sample	decayed		dmft		d/dmf %	Children with dmft=0 %
		mean	sd	mean	sd		
4	69	1.84	3.19	2.09	3.28	83.7	52.9
5	482	1.67	2.92	2.04	3.30	83.2	55.9
6	649	1.33	2.25	2.05	2.94	66.5	49.8
7	679	1.22	2.10	2.19	2.88	54.4	42.7
8	708	.92	1.69	2.06	2.65	45.9	43.9
9	645	.78	1.39	2.05	2.46	40.1	41.1
10	686	.52	1.06	1.62	2.38	35.5	49.2

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<sup>1</sup> Legend:           d - decayed deciduous teeth  
dmft - decayed, missing or filled deciduous teeth  
sd - standard deviation

**TABLE 4: PERMANENT TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>**

This table uses Statewide data to describe the DMFT index and its components for individual (year of birth) ages. Indices are calculated from data collected over a 12 month period. Where children received more than one examination during this period, the information derived from examinations other than the first is excluded. Age-specific indices denoted with an asterisk (\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these indices are statistically unreliable.

State/Territory: New South Wales

Sampling ratio: 1:15.9

Data for period January-December 1991

Date of report: 4th June 1993

Age (years)	Number of children in sample	DECAYED		DMFT		D/DMFT	Children with DMFT=0
		mean	sd	mean	sd	%	%
6	649	0.08	0.46	0.09	0.50	89.2	95.8
7	679	0.18	0.64	0.24	0.72	74.9	86.3
8	708	0.23	0.65	0.34	0.84	67.2	80.5
9	645	0.24	0.72	0.48	1.06	48.9	75.5
10	686	0.28	0.71	0.73	1.24	39.2	65.1
11	588	0.28	0.76	0.83	1.38	36.8	62.9
12	297	0.52	1.40	1.18	1.97	40.4	58.2
13	109	0.67	1.19	1.64	2.33	41.0	43.5
14	84	1.49	2.66	2.90	3.35	41.6	28.9
15	27	1.81	3.28	3.63	3.52	39.5	22.2

<sup>1</sup> Legend: D - decayed permanent teeth  
DMFT - decayed, missing or filled permanent teeth  
sd - standard deviation

TABLE 5: ALL TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>

This table uses Statewide data to describe the combined dmft and DMFT indices and their components for individual (year of birth) ages. Indices are calculated from data collected over a 12 month period. Where children received more than one examination during this period, the information derived from examinations other than the first is excluded. Age-specific indices denoted with an asterisk (\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these indices are statistically unreliable.

State/Territory: New South Wales

Sampling ratio: 1:15.9

Data for period January-December 1991

Date of report: 4th June 1993

Age (years)	Number of children in sample	% of children with d+D=					% of children with		
		0	1	2	3	4+	m+M=0	f+F=0	dmft+DMFT=0
4	69	55.9	11.7	10.4	4.4	17.6	97.1	89.7	51.5
5	482	58.0	10.7	7.3	5.9	18.1	95.8	87.6	54.9
6	649	56.5	13.2	9.8	5.3	15.1	96.6	75.4	48.3
7	679	54.0	14.6	9.7	8.4	13.4	96.3	63.1	39.9
8	708	56.6	16.1	11.6	6.0	9.7	93.7	59.8	39.5
9	645	58.4	16.3	10.5	6.4	8.3	95.6	52.0	35.9
10	686	63.2	16.5	10.2	4.3	5.9	95.3	51.1	35.5
11	588	67.4	16.0	7.2	5.2	4.3	96.7	57.0	41.7
12	297	69.7	13.6	8.5	3.7	4.4	95.9	62.9	46.2
13	109	66.7	10.2	11.1	6.5	5.6	93.5	55.6	38.9
14	84	56.6	15.7	6.0	7.2	14.5	91.5	45.7	27.7
15	27	59.3	*	14.8	*	14.8	100.0	33.3	22.2

<sup>1</sup> Legend:

- d - decayed deciduous teeth
- D - decayed permanent teeth
- m - deciduous teeth missing due to caries
- M - permanent teeth missing due to caries
- f - deciduous teeth restored due to caries
- F - permanent teeth restored due to caries
- dmft - decayed, missing or filled deciduous teeth
- DMFT - decayed, missing or filled permanent teeth

**TABLE 6: FISSURE SEALANTS: AGE-SPECIFIC PREVALENCE<sup>1</sup>**

This table uses Statewide data to describe the distribution of fissure sealants for individual (year of birth) ages, along with the caries experience of those who have fissure sealants and those who do not. Indices are calculated from data collected over a 12 month period. Where children received more than one examination during this period, the information derived from examinations other than the first is excluded. Age-specific indices denoted with an asterisk (\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these indices are statistically unreliable.

State/Territory: New South Wales

Sampling ratio: 1:15.9

Data for period January-December 1991

Date of report: 4th June 1993

Age (years)	Number of children in sample <sup>2</sup>	Number of sealants		CHILDREN WITH DMFT=0		CHILDREN WITH DMFT=1+	
		mean	sd	number	% with F/S=1+	number	% with F/S=1+
6	649	*	*	622	2.4	27	11.1
7	679	0.16	1.21	586	3.6	93	9.8
8	708	0.35	1.33	570	9.4	138	14.6
9	645	0.46	1.69	487	11.6	158	15.4
10	686	0.38	1.23	447	11.3	239	18.1
11	588	0.44	1.17	370	14.2	218	16.7
12	297	0.65	1.88	173	17.0	124	19.5
13	109	0.66	1.51	47	14.9	62	26.2
14	84	0.87	2.54	24	25.0	60	22.0
15	27	0.74	1.26	6	16.7	21	38.1

<sup>1</sup> Legend: DMFT - decayed, missing or filled permanent teeth

<sup>2</sup> Legend: F/S - number of fissure sealed teeth  
sd - standard deviation

**TABLE 7: IMMEDIATE TREATMENT NEEDS: AGE-SPECIFIC DISTRIBUTION<sup>1</sup>**

This table, based on Statewide data, describes the number and proportion of children in immediate need of dental treatment. This classification is accorded to children who have, or who are likely to develop within four weeks, oral pain or infection. The dental caries experience of this group of children is also described. Indices are calculated from data collected over a 12 month period. Where children received more than one examination during this period, the information derived from examinations other than the first is excluded. Age-specific indices denoted with an asterisk (\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these indices are statistically unreliable.

State/Territory: New South Wales

Sampling ratio: 1:15.9

Data for period January-December 1991

Date of report: 4th June 1993

CHILDREN IN NEED OF IMMEDIATE TREATMENT												
Age (years)	Number of children in sample		% of all children	dmft		DMFT		% with d+D=				
	No.			mean	sd	mean	sd	0	1	2	3	4+
4	69	14	20.5	6.00	4.33	*	*	0.0	21.4	21.4	*	50.0
5	482	85	17.6	5.86	4.12	*	*	*	11.9	11.9	10.7	63.2
6	649	123	19.0	4.67	3.41	0.15	0.64	*	19.6	21.3	10.6	46.0
7	679	136	20.0	4.46	3.21	0.49	1.04	*	23.9	15.6	21.0	37.3
8	708	137	19.4	4.03	2.97	0.57	0.91	6.6	26.4	25.7	13.3	28.0
9	645	95	14.8	3.54	2.52	1.18	1.48	*	36.2	21.3	13.9	26.5
10	686	95	13.8	2.79	2.92	1.36	1.62	14.9	34.0	23.4	10.6	17.0
11	588	84	14.3	1.97	2.21	1.63	1.72	20.5	30.1	20.5	12.0	16.9
12	297	35	11.9	1.08	1.58	2.51	2.91	14.3	39.9	14.4	8.6	22.8
13	109	10	9.3	*	*	4.10	3.18	0.0	*	40.0	*	*
14	84	15	18.1	*	*	7.05	3.91	0.0	*	*	19.9	60.2
15	27	6	22.2	*	*	4.83	3.71	*	0.0	50.0	0.0	*

<sup>1</sup> Legend: dmft - number of decayed, missing or filled deciduous teeth  
 DMFT - number of decayed, missing or filled permanent teeth  
 d - number of decayed deciduous teeth  
 D - number of decayed permanent teeth

**TABLE 8: SCHOOL DENTAL SERVICE EXAMINATIONS:  
AGE-SPECIFIC DISTRIBUTION**

This table describes the percentage distribution of children who have received initial and subsequent dental examinations in the School Dental Service. Data from all examinations of children who were examined during the report period are included in this table; percentage estimates denoted with an asterisk (\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these percentages are statistically unreliable.

State/Territory: New South Wales

Sampling ratio: 1:15.9

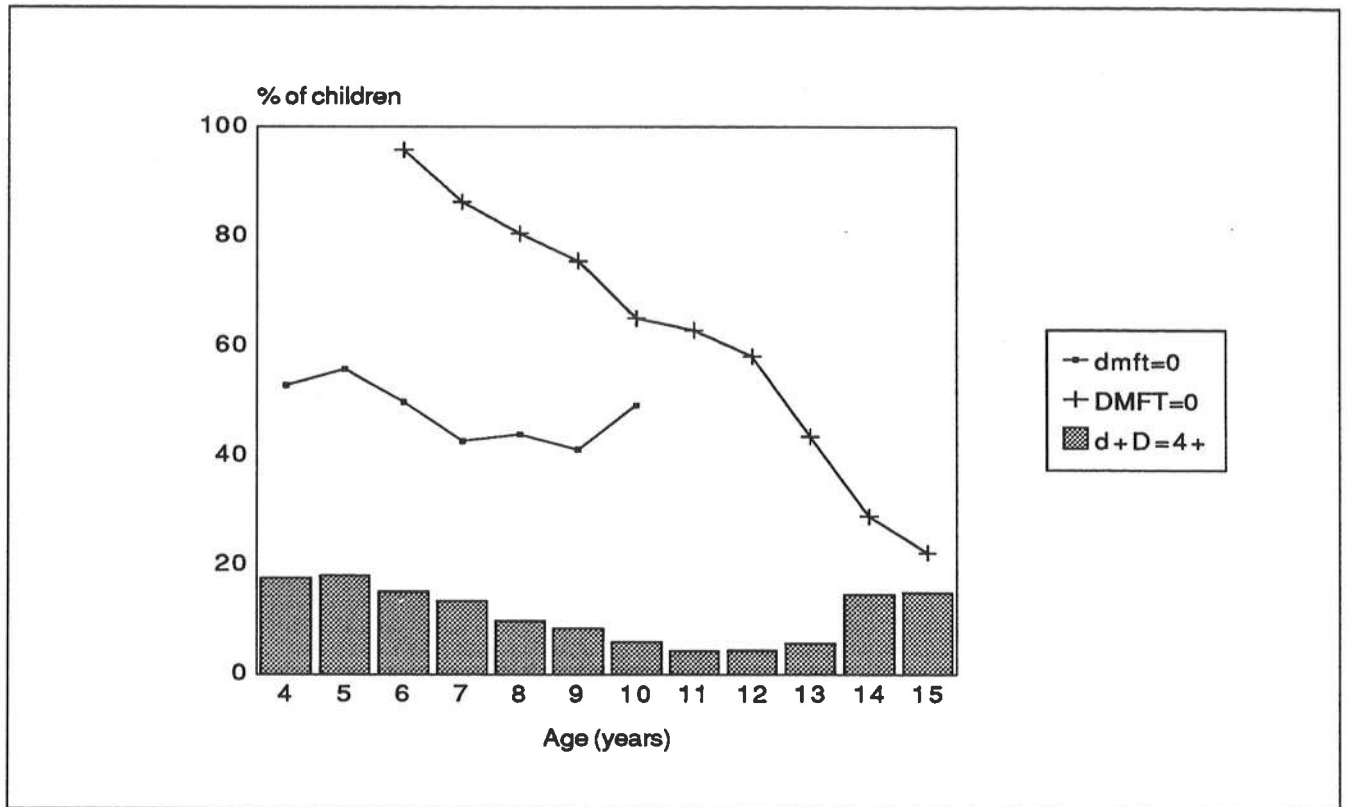
Data for period January-December 1991

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Age (years)	Number of children examined	Previous examination in School Dental Service (%)			CHILDREN WITH PREVIOUS EXAMINATION			
		No	Yes	Unknown	Months since last examination <sup>1</sup> (%)			
					0-6	7-12	13-24	25+
4	72	66.3	21.1	12.7	*	26.7	40.0	26.7
5	647	52.4	34.4	13.2	56.4	33.2	9.1	*
6	929	20.2	71.0	8.8	34.3	41.9	22.9	0.9
7	977	10.8	81.6	7.6	30.6	42.9	24.1	2.4
8	967	7.6	84.6	7.7	21.9	45.3	25.7	7.1
9	898	5.0	87.5	7.6	22.9	46.4	24.4	6.3
10	944	3.3	88.3	8.4	26.8	39.4	27.4	6.3
11	799	2.8	89.1	8.1	24.4	37.9	30.3	7.4
12	421	3.1	90.6	6.2	19.9	44.0	29.7	6.4
13	123	3.3	83.6	13.1	9.8	34.3	45.1	10.8
14	85	4.8	75.0	20.3	9.6	46.0	28.5	15.9
15	34	*	85.3	8.8	*	55.2	27.6	13.8

<sup>1</sup> Excludes those with no previous examination and where the date of previous examination is unknown.

**FIGURE 1: PERCENTAGE OF CHILDREN WITH dmft=0, DMFT=0 and d+D=4+**



**FIGURE 2: TIME SINCE LAST DENTAL EXAMINATION**

