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## The Child Dental Health Survey Northern Territory, 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 - NORTHERN TERRITORY 1991

### Purpose of this report

This report continues the series of annual reports providing descriptive statistics concerning child dental health in the Northern Territory, and follows the 1990 report. The report contains tables describing: the age and sex 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.

These data were collected during the 1991 calendar year from NT School Dental Service patients by dental therapists and dentists. A random sampling procedure was used to select approximately one in two (1:1.9) patients living in the Darwin area. In addition, all examined children from other areas were included. The Darwin sampling procedure was achieved by selecting those children whose birthday was between the 1st and 16th (inclusive) of any month. Provision was made for inclusion and numerical weighting of data from children whose date of birth was unknown. Throughout this report, dental health statistics have been weighted during their computation to reflect the sampling procedure. The weighting procedure corrects for the over-representation of children in the sample with an unknown birth date and from outside the Darwin area.

The following sections briefly describe each table and provide a simple, summary statement highlighting differences between the 1991 and 1990 data. *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

Some 38 per cent of processed records were obtained from the Darwin area. The majority of children in the sample (75 per cent) were aged between 5 and 11 years inclusive, with approximately equivalent numbers in individual ages within this range. However, children aged twelve years or less than five years were also represented in substantial numbers, particularly in the non-Darwin area. Females and males were represented in similar proportions in all ages.

The distribution of the sample is closely related to the main target groups of children served by the school dental service in the NT. The distribution also illustrates that the sample is representative of primary school aged children, rather than all children in the NT. Moreover, the small numbers of children aged and 13 years or more results in less reliability of computed statistics for those ages, and they have been suppressed where indicated in the following tables. It is also important to note that those children who are outside the main school dental service target groups may differ on key characteristics and are likely to be less representative of their respective age groups in the NT population.

*Changes since 1990*

There were no substantial changes in the sampling procedures between the reporting periods.

**Table 2: Country of birth (including Aboriginality)**

Table 2 lists the main categories of birthplace and Aboriginality for the weighted sample. The great majority (79 per cent or more) of children and mothers were Australian born. Mothers were more likely than children to be born outside Australia, with South East Asia being the second most frequent country of birth.

*Changes since 1990*

There were no substantial changes in the distribution of birthplace between the two reporting periods.

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

The mean number of decayed teeth among children aged 5 to 10 years ranges from 0.50 to 1.26 and was lower among older children. There was less variation in mean dmft (1.47 to 2.07) although the prevalence was higher among older children. Mean dmft declined over the age of 9, and this must be interpreted in view of the exfoliation of deciduous teeth as children grow older.

The percentage of caries experience due to decay (d/dmft) shows an age-associated decline, almost halving from 76.5 per cent among 5-year-olds to 37.3 per cent among 10-year-olds. This is the strongest and most consistent age-associated effect for deciduous teeth. By comparison, the percentage of caries-free children (% dmft=0) shows a more modest reduction from 56.3 per cent among 5-year-olds to 50.7 per cent among 10-year-olds. The percentage of caries free children therefore mirrors the mean dmft prevalence.

*Changes since 1990*

Most changes in mean numbers of deciduous teeth with caries experience among 5- to 9-year-olds between 1990 and 1991 were small. There were slight, but consistent reduction in the prevalence of d, and increases in the percentage of children with dmft of zero, and decreases in d/dmf. However, among the key age groups (5 to 10 years) differences in age-specific mean numbers were no greater than 0.1 teeth, and the percentage of children with dmft=0 differed by no more than four per cent. There were both increases and decreases among different age groups.

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

The mean number of decayed permanent teeth was consistently smaller than the mean number of decayed deciduous teeth, and was relatively consistent across the range of 7 to 11 years. However, the mean DMFT increased quite consistently across age groups (up to 13 years), as expected. As a consequence, the percentage of DMFT due to decay (D/DMFT) and the percentage caries free (DMFT=0) declined across age groups. Age-specific D/DMFT percentages were higher than d/dmft percentages in the deciduous dentition below the age of nine. However this phenomenon is due largely to the very low DMFT values which act as the denominator in D/DMFT and drive the percentage upwards. It is noteworthy that more than 50 per cent of children aged 12 or less were caries free.

*Changes since 1990*

Changes in the mean number of decayed permanent teeth were inconsequential, and for most ages, the mean DMFT differed by less than 0.1 teeth. The percentage of caries free children (DMFT=0) appears to be stable across the two years. Indeed, the only notable variations were observed for the D/DMFT percentage. As discussed with regard to the deciduous teeth, this presumably can be attributed to the sensitivity of the statistic when the denominator values (mean DMFT) are small.

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

Untreated caries in the combined deciduous and permanent dentitions existed for between 23 and 42 per cent of children in the age range 5 to 12 years. The greatest likelihood of untreated decay occurred for 6-year-olds. Based on observations from previous tables, much of this untreated decay can be attributed to the deciduous dentition. Furthermore, it is noteworthy that the most extensive levels of untreated decay (4 or more deciduous or permanent teeth) occur in the younger age groups, with 10 per cent or more of children aged 8 years or less being affected to this extent. This age distribution suggests that the greatest contribution comes from the deciduous dentition.

While more than 96 per cent of children had no deciduous or permanent teeth missing due to caries, smaller percentages avoid fillings, and there is an age-associated decline. Similarly, there is a decline in the percentage of children with no caries experience in either deciduous or permanent dentition, from 52 per cent at age five to 42 per cent at age 12. Above the age of 9, the percentage is relatively constant at around 40 per cent. This serves to demonstrate that more than one third of children survive primary school with no experience of dental caries.

*Changes since 1990*

The earlier observations of only small changes in deciduous and permanent caries experience carry through to this table which shows minimal changes compared with the 1991 data. While some individual age-specific percentages differ by more than five per cent (for example, percentage with no decayed teeth among 9- and 12-year-olds), these comprise both increases and decreases and they do not appear to reflect specific trends.

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

Fissure sealants are prevalent in children aged 7 to 12 years, and at those ages the mean number of fissure sealants exceeds the mean number of decayed teeth, and is close to the mean number of filled teeth. There is clear evidence of preferential use of fissure sealants

among those with caries experience: children aged 8 to 12 years with some caries experience (DMFT=1+) were about 50 per cent more likely to have fissure sealants as children with DMFT equal to zero.

*Changes since 1990*

The mean number of fissure sealants in 1991 is greater than that observed in 1990; among those aged 7 to 12 years, the mean number is at least 0.1 teeth greater. While the percentage of children with fissure sealants is greater among those with caries experience than those without, the differential between the two groups was similar during both years.

**Table 7: Immediate treatment needs**

Immediate treatment needs for existing or imminent pain or infection were infrequent in the key age groups (5 to 12 years). Fewer than five per cent of children required immediate treatment, with the greatest percentage occurring among the youngest ages. This correlates with the peak in mean dmft and may suggest that most forms of immediate treatment are due to disease in deciduous teeth. Certainly the small group of children with immediate treatment needs have a very high mean dmft prevalence.

*Changes since 1990*

The percentage of children with immediate treatment needs, and their levels of caries experience, are similar to the 1990 estimates. However there were some small increases (of two or three per cent) among 5- and 6-year-olds. These 1991 figures for 5- and 6-year-olds are probably better estimates than the earlier figures (since they are based on larger numbers of sampled children), and so it is likely that the small increase relates primarily to a slight underestimate from 1990.

**Table 8: School Dental Service examinations**

The left hand side of this table describes the percentage of children who are new patients (having had no previous dental examination) in the NT School Dental service. As expected, the figure is highest for the youngest ages (6 years or less) with fewer than 10 per cent of those aged 7 years or more having 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. Over one half of children in the key age range received examinations within 7 to 12 months of their previous examination, while approximately one quarter occurred within 13 to 24 months. Very few children were re-examined after two years. There was a fairly consistent pattern of shorter re-examination intervals among younger children.

*Changes since 1990*

There was a tendency for a higher percentage of children to have a repeat exam within 12 months, and a lower percentage to have a lower percentage to be examined between 13 and 24 months.



### Tables S1 and S2: Deciduous teeth of non-Aboriginal and Aboriginal children

These supplementary tables describe the age-specific indexes of deciduous caries experience for non-Aboriginal and Aboriginal children. For those aged 4 to 10 years, Aboriginal children had a higher prevalence of decayed and dmft teeth. Consequently, fewer Aboriginal children had no caries experience. In addition, the percentage of the dmft index attributed to decay (d/dmft) was substantially higher among Aboriginal children.

#### *Changes since 1990*

There were no clear changes, either in deciduous caries experience of specific groups or differentials among non-Aboriginal and Aboriginal children, between 1990 and 1991.

### Tables S3 and S4: Permanent teeth of non-Aboriginal and Aboriginal children

Differentials in permanent caries experience among non-Aboriginal and Aboriginal children were not identical to the profile of deciduous caries experience. While Aboriginal children had a higher mean number of decayed permanent teeth, there was only minimal differentials in mean DMFT prevalence. As a consequence, Aboriginal children had a higher percentage of caries experience attributed to decay (D/DMFT), and slightly lower percentages of children with no caries experience (DMFT=0).

#### *Changes since 1990*

There were no clear changes, either in permanent caries experience of specific groups or differentials among non-Aboriginal and Aboriginal children, between 1990 and 1991.

### 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. There was a more consistent effect, observable among all children aged 4 to 13 years, of an increase in the percentage receiving re-examinations within a 7 to 12 month period. The corresponding reductions were most apparent for re-examinations within a 0 to 6 month period, although there tended to be additional reductions for the 13 to 24 month period.

### 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 recall. The bars, using data from those children who received a subsequent examination by the School Dental Service during 1991, indicate that more than 50 per cent of 6-year-olds received a subsequent examination within 12 months of the previous School Dental Service examination, while for 12-year-olds, the figure was 29.4 per cent.

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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. The sampling procedure selects a constant proportion of children for whom date of birth is known by selecting only those children born on particular dates. Within the Darwin region, the sampling ratio for children whose date of birth is known is 1:1.9. This ratio is achieved by selecting children whose data of birth is between the 1st and 16th (inclusive) of any month. For children with an unknown date of birth, and for those outside the Darwin region, all children are included in the sample.

The following table describes the number of records processed from children in the Northern Territory, as well as the number of children in the sample. The latter figure is weighted to attach more weight to those records which are sampled, and less weight to those records which are fully enumerated. The weighting corrects for the over-representation in the sample of children for whom date of birth is unknown.

State/Territory: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	NUMBER OF RECORDS PROCESSED						NUMBER OF CHILDREN IN SAMPLE <sup>1</sup>		
	Darwin region, known date of birth			Non-Darwin or age only known			Males	Females	Persons
	Males	Females	Persons	Males	Females	Persons			
0	1	0	1	4	0	4	4	0	4
1	3	0	3	20	27	47	19	20	39
2	4	1	5	37	25	62	33	20	53
3	19	14	33	61	52	113	72	59	131
4	300	315	615	453	419	872	762	758	1520
5	349	391	740	638	554	1192	969	966	1935
6	403	397	800	596	623	1219	1014	1026	2040
7	392	371	763	611	595	1206	1010	968	1978
8	381	388	769	618	628	1246	999	1017	2016
9	367	387	754	621	548	1169	982	956	1938
10	401	352	753	558	566	1124	983	920	1903
11	398	393	791	555	543	1098	977	961	1937
12	287	229	516	423	393	816	721	617	1338
13	52	52	104	196	179	375	220	207	426
14	3	11	14	85	124	209	68	108	175
15	2	14	16	69	43	112	54	52	106
16	2	10	12	12	14	26	12	25	36
17	3	6	9	4	4	8	7	11	19
18	1	5	6	5	4	9	5	10	15
19	0	2	2	1	0	1	1	3	4
20	0	0	0	0	1	1	0	1	1
21	0	0	0	0	1	1	0	1	1
<b>Total</b>	<b>3368</b>	<b>3338</b>	<b>6706</b>	<b>5567</b>	<b>5343</b>	<b>10910</b>	<b>8913</b>	<b>8703</b>	<b>17616</b>

<sup>1</sup> The number of children included in the sample equals the number of records sampled where date of birth is known plus the product of the number of records of children with unknown birthdate and sampling ratio. Second and subsequent examinations of children within the reporting period are eliminated. These are rounded numbers of children.



**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 coding scheme is described in Appendix A. The number and percentage of children in each group is provided in this Territory-wide report.

State/Territory: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

COUNTRY OF BIRTH	CHILDREN		MOTHERS	
	Number <sup>1</sup>	%	Number	%
Australia (non-Aboriginal)	11188	63.5	9129	51.8
Australia (Aboriginal or TSI)	4875	27.7	4778	27.1
United Kingdom and Eire	105	0.6	815	4.6
Other English speaking	266	1.5	563	3.2
Southern Europe	83	0.5	285	1.6
Other Europe	40	0.2	190	1.1
Middle East	11	0.1	32	0.2
South East Asia	406	2.3	903	5.1
Other Asia	82	0.5	165	0.9
Other	86	0.5	202	1.1
Not known	458	2.6	525	3.0
Blank	17	0.1	28	0.2
<b>Total</b>	<b>17616</b>	<b>100.0</b>	<b>17616</b>	<b>100.0</b>

<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 Territory-wide 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	decayed		dmft		d/dmf %	Children with dmft=0 %
		mean	sd	mean	sd		
2	53	1.78	3.90	1.90	3.99	94.4	65.0
3	131	1.39	2.73	1.55	2.86	87.7	63.3
4	1520	1.13	2.42	1.29	2.63	87.4	68.0
5	1935	1.26	2.25	1.67	2.74	76.5	56.3
6	2040	1.24	2.22	1.96	2.85	62.7	48.2
7	1978	0.95	1.69	2.01	2.62	49.7	44.1
8	2016	0.86	1.59	2.07	2.57	41.5	42.0
9	1938	0.71	1.46	1.91	2.42	37.2	43.2
10	1903	0.50	1.10	1.47	2.09	37.3	50.7

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

<sup>2</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 4: PERMANENT TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>**

This table uses Territory-wide 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	DECAYED		DMFT		D/DMFT	Children with DMFT=0
		mean	sd	mean	sd	%	%
6	2040	0.04	0.37	0.06	0.43	71.1	96.2
7	1978	0.12	0.47	0.19	0.60	64.1	88.1
8	2016	0.13	0.48	0.29	0.75	49.2	83.2
9	1938	0.14	0.53	0.36	0.88	35.5	79.6
10	1903	0.18	0.61	0.58	1.08	31.7	69.7
11	1937	0.20	0.68	0.72	1.25	27.3	63.3
12	1338	0.36	1.25	1.26	1.91	23.7	50.6
13	426	0.56	1.41	1.49	2.17	34.6	47.9
14	175	0.82	2.25	1.78	2.79	38.3	44.3
15	106	0.71	1.34	1.96	2.68	39.5	43.0

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

<sup>2</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 5: ALL TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>**

This table uses Territory-wide 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	% of children with d+D=					% of children with		
		0	1	2	3	4+	m+M=0	f+F=0	dmft+DMFT=0
2	53	65.0	*	14.0	*	15.4	98.6	97.2	65.0
3	131	65.5	6.7	10.0	*	15.0	98.3	92.8	62.7
4	1520	69.9	7.0	7.0	3.7	12.3	98.8	94.1	67.8
5	1935	61.3	10.6	9.4	4.8	13.9	96.8	86.0	55.9
6	2040	58.3	14.0	9.3	6.0	12.4	97.1	72.4	47.3
7	1978	58.9	15.7	9.9	4.7	10.8	96.7	62.7	41.0
8	2016	59.5	17.9	9.3	4.7	8.5	95.3	54.9	37.6
9	1938	64.4	15.8	9.3	4.7	5.8	95.7	52.2	37.4
10	1903	66.4	18.5	7.3	3.1	4.7	96.8	53.2	38.1
11	1937	74.5	15.4	6.1	2.1	1.9	98.3	54.8	44.1
12	1338	76.6	12.5	5.9	2.8	2.2	97.5	51.9	41.7
13	426	72.6	13.6	6.2	2.6	5.0	94.2	61.3	45.8
14	175	71.3	11.8	6.7	4.2	5.9	92.9	60.8	43.8
15	106	68.2	12.5	7.5	5.5	6.2	91.7	59.6	40.9

- <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

- <sup>2</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 6: FISSURE SEALANTS: AGE-SPECIFIC PREVALENCE<sup>1</sup>**

This table uses Territory-wide 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 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	2040	0.06	0.39	1964	2.3	77	11.2
7	1978	0.27	0.84	1743	9.5	235	25.3
8	2016	0.57	1.21	1677	18.8	339	37.0
9	1938	0.78	1.36	1542	26.7	395	41.3
10	1903	0.83	1.38	1326	28.4	577	42.1
11	1937	0.87	1.51	1225	26.5	712	43.8
12	1338	1.02	1.69	678	29.6	660	46.9
13	426	0.88	1.70	204	24.3	222	37.7
14	175	0.50	1.41	78	9.5	98	22.8
15	106	*	*	46	8.2	60	7.4

<sup>1</sup> Legend DMFT - decayed, missing or filled permanent teeth  
F/S - number of fissure sealed teeth  
sd - standard deviation

<sup>2</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.

**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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

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CHILDREN IN NEED OF IMMEDIATE TREATMENT												
Age (years)	Number of children in sample	No.	% of all children	dmft		DMFT		% with d+D=				
				mean	sd	mean	sd	0	1	2	3	4+
3	131	2	*	7.67	2.54	-	-	0.0	0.0	0.0	0.0	100.0
4	1520	34	2.3	6.35	4.38	-	-	0.0	12.6	14.8	*	68.3
5	1935	68	3.5	4.70	2.98	*	*	*	14.2	21.5	11.0	50.1
6	2040	81	4.0	5.15	3.61	*	*	*	21.5	9.0	16.2	49.8
7	1978	83	4.2	4.50	2.99	0.54	0.83	*	17.7	22.0	12.4	43.6
8	2016	82	4.1	4.81	2.96	1.14	1.48	*	16.0	14.3	21.2	44.9
9	1938	73	3.7	4.23	3.07	1.29	1.47	*	22.2	15.0	9.2	50.6
10	1903	60	3.1	3.14	2.95	1.41	1.79	8.5	31.9	13.7	*	40.9
11	1937	43	2.2	1.72	2.25	2.09	2.30	13.6	36.2	12.1	12.1	26.0
12	1338	40	3.0	0.67	1.14	4.02	4.59	*	29.1	25.6	18.3	23.5
13	426	31	7.3	*	*	3.26	2.26	14.0	23.1	21.0	*	30.2
14	175	23	13.0	-	-	4.73	5.08	*	35.5	25.7	*	*
15	106	19	17.8	-	-	3.84	3.66	*	38.7	34.4	*	*

<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<sup>1</sup>**

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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children examined	Previous examination in School Dental Service (%)			CHILDREN WITH PREVIOUS EXAMINATION Months since last examination <sup>2</sup> (%)			
		No	Yes	Unknown	0-6	7-12	13-24	25+
2	61	73.0	24.5	*	*	60.0	*	0.0
3	133	66.4	21.0	12.6	18.4	63.3	*	*
4	1673	66.5	22.2	11.3	59.9	35.2	4.9	0.0
5	2152	26.5	57.0	16.5	24.9	58.7	15.9	0.5
6	2282	11.9	74.7	13.4	18.6	61.9	18.0	1.5
7	2223	6.6	80.2	13.2	15.5	60.2	22.2	2.1
8	2293	4.9	83.1	11.9	17.8	53.1	26.2	2.9
9	2174	4.0	87.1	8.9	15.9	53.1	26.8	4.3
10	2164	4.2	84.7	11.1	16.1	56.6	23.7	3.7
11	2182	3.4	88.2	8.4	16.6	55.7	23.5	4.1
12	1959	3.1	89.5	7.5	23.7	56.1	17.4	2.8
13	544	4.1	86.0	9.9	15.5	46.7	29.2	8.6
14	183	6.5	60.1	33.4	10.8	34.8	38.2	16.2
15	116	*	63.0	33.2	23.1	36.0	19.8	21.0

<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.

<sup>2</sup> Excludes those with no previous examination and where the date of previous examination is unknown.

**TABLE S1: DECIDUOUS TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>  
NON-ABORIGINAL CHILDREN**

This table uses Territory-wide data to describe the dmft index and its components for individual (year of birth) ages among non-Aboriginal children. Indices are calculated from data collected over a 6 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	decayed		dmft		d/dmf %	Children with dmft=0 %
		mean	sd	mean	sd		
2	59	1.92	4.08	2.03	4.18	95.9	62.7
3	112	1.18	2.68	1.36	2.84	83.6	68.9
4	1219	0.97	2.25	1.13	2.50	85.9	71.4
5	1464	1.00	2.02	1.43	2.68	72.5	62.5
6	1444	0.97	1.95	1.73	2.73	56.1	52.8
7	1418	0.72	1.41	1.85	2.56	42.1	47.7
8	1352	0.60	1.15	1.93	2.50	33.3	44.9
9	1359	0.52	1.10	1.85	2.35	29.2	43.9
10	1254	0.36	0.84	1.58	2.19	24.8	50.1

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

<sup>2</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 S2: DECIDUOUS TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>  
ABORIGINAL CHILDREN**

This table uses Territory-wide data to describe the dmft index and its components for individual (year of birth) ages among Aboriginal children. Indices are calculated from data collected over a 6 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	decayed		dmft		d/dmf %	Children with dmft=0 %
		mean	sd	mean	sd		
2	9	*	*	*	*	83.3	62.5
3	25	2.32	2.75	2.41	2.90	98.2	40.2
4	257	2.40	3.39	2.60	3.51	92.9	44.1
5	438	2.46	2.91	2.82	3.10	85.9	30.6
6	555	2.14	2.85	2.74	3.19	77.9	33.1
7	549	1.78	2.26	2.64	2.79	69.1	32.0
8	676	1.54	2.23	2.48	2.77	60.7	34.8
9	585	1.29	2.11	2.15	2.66	57.9	39.6
10	625	0.85	1.56	1.29	1.92	67.2	50.7

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

<sup>2</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 S3: PERMANENT TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>  
NON-ABORIGINAL CHILDREN**

This table uses Territory-wide data to describe the DMFT index and its components for individual (year of birth) ages among non-Aboriginal children. 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: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	DECAYED		DMFT		D/DMFT	Children with
		mean	sd	mean	sd	%	DMFT=0 %
5	1464	*	*	*	*	83.3	99.6
6	1444	0.03	0.20	0.04	0.28	67.9	97.3
7	1418	0.11	0.45	0.18	0.59	59.6	88.6
8	1352	0.09	0.40	0.24	0.69	40.3	85.2
9	1359	0.11	0.47	0.35	0.86	29.2	80.0
10	1254	0.14	0.52	0.58	1.07	26.5	69.0
11	1321	0.15	0.49	0.70	1.18	21.5	63.2
12	866	0.29	1.14	1.24	1.88	18.7	51.5
13	176	0.33	0.97	1.61	2.02	19.4	44.0
14	59	*	*	1.68	2.12	6.8	44.1
15	58	0.40	1.12	2.05	3.01	20.5	46.6

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

<sup>2</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 S4: PERMANENT TEETH: AGE-SPECIFIC PREVALENCE<sup>1</sup>  
ABORIGINAL CHILDREN**

This table uses Territory-wide data to describe the DMFT index and its components for individual (year of birth) ages among Aboriginal children. 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 9\*) are those in which the relative standard error exceeds 40 per cent, and population estimates of these indices are statistically unreliable.

State/Territory: Northern Territory

Sampling ratio (Darwin): 1:1.9

Data for period January-December 1991

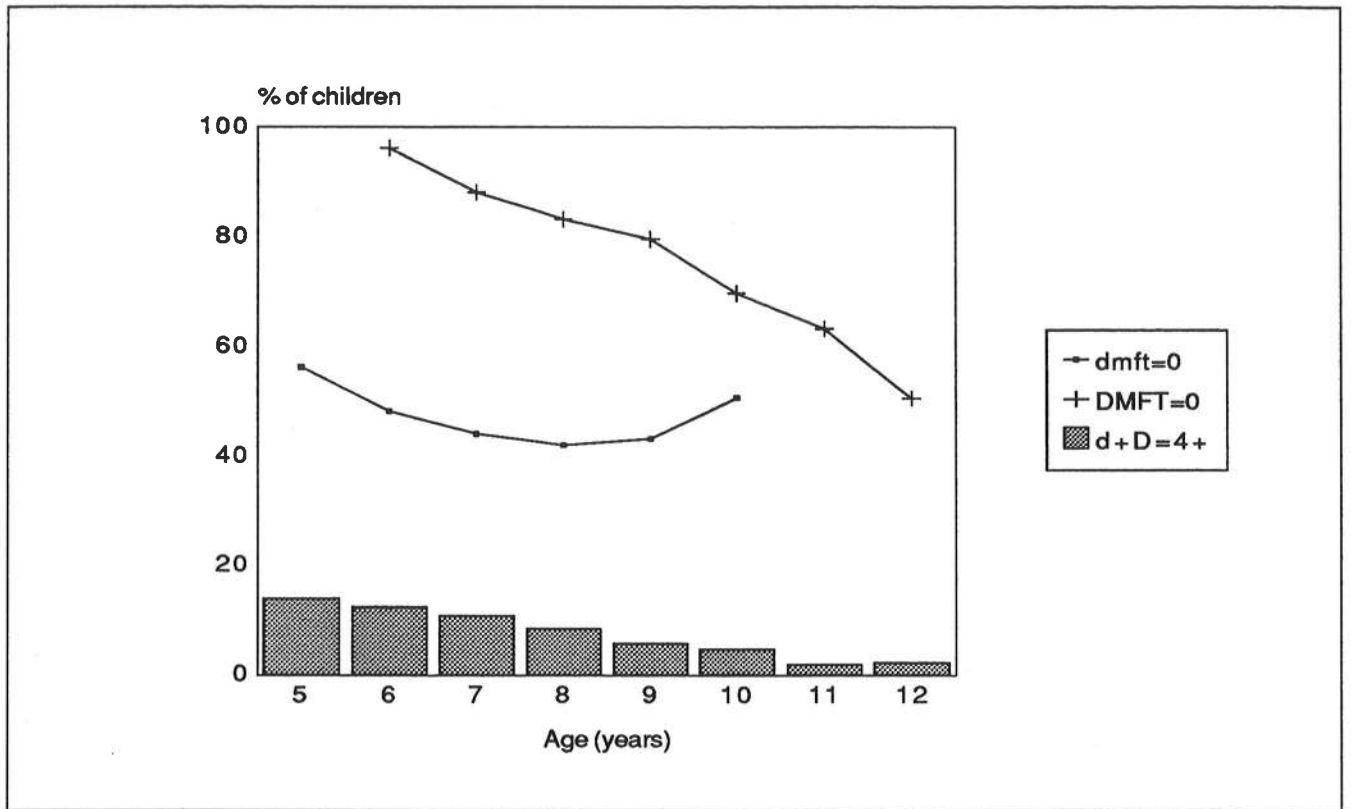
Date of report: 19th May 1993

Age (years)	Number of children in sample <sup>2</sup>	DECAYED		DMFT		D/DMFT	Children with
		mean	sd	mean	sd	%	DMFT=0 %
5	438	0.04	0.26	0.04	0.26	100.0	97.0
6	555	0.09	0.57	0.11	0.65	76.4	94.0
7	549	0.18	0.54	0.23	0.64	77.2	85.2
8	676	0.24	0.65	0.40	0.88	62.6	77.4
9	585	0.22	0.67	0.44	0.94	50.7	76.6
10	625	0.30	0.86	0.60	1.17	46.1	70.7
11	585	0.40	1.09	0.89	1.56	43.8	61.0
12	476	0.50	1.24	1.38	1.89	34.1	45.4
13	309	0.75	1.72	1.51	2.40	43.9	48.4
14	156	0.97	2.32	1.73	2.73	48.6	43.8
15	72	0.89	1.47	1.80	2.28	48.6	40.9

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

<sup>2</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.

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



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

