

In Rochdale 196 5-year-olds (approximately 50.7% of those sampled) were examined at school by trained and calibrated examiners using the national standard method².

Figure 1: Prevalence of experience of dental decay and mean number of teeth with experience of dental decay in 5-year-olds in Rochdale, other local authorities in the North West and England.

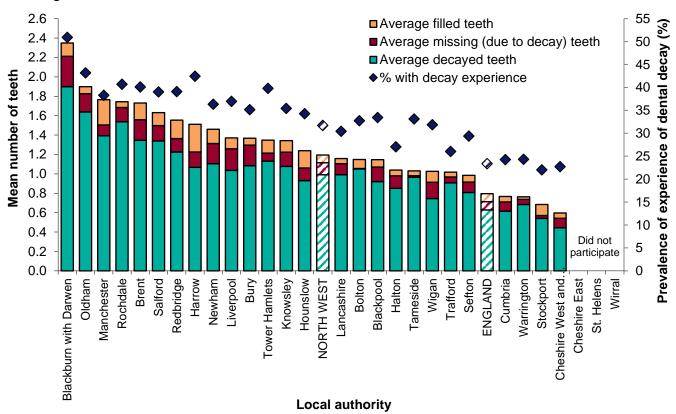


Table 1: Experience of dental decay in 5-year-olds in Rochdale, other local authorities in the North West and England.

Local authority	Prevalence of experience of dental decay (%)	Mean number of teeth with experience of dental decay in all examined children n (95% confidence intervals)	Mean number of teeth with experience of dental decay in children with any decay experience n (95% confidence intervals)
Blackburn with Darwen	50.9	2.3 (1.87 - 2.82)	4.6 (3.94 - 5.29)
Oldham	43.2	1.9 (1.45 - 2.34)	4.4 (3.63 - 5.16)
Rochdale	40.7	1.7 (1.30 - 2.19)	4.3 (3.64 - 4.93)
Salford	39.0	1.6 (1.25 - 2.01)	4.2 (3.48 - 4.88)
Manchester	38.3	1.8 (1.43 - 2.10)	4.6 (3.98 - 5.24)
Liverpool	37.0	1.4 (1.05 - 1.69)	3.7 (3.09 - 4.33)
Knowsley	35.4	1.3 (0.93 - 1.75)	3.8 (2.94 - 4.63)
Bury	35.2	1.4 (1.07 - 1.66)	3.9 (3.35 - 4.44)
Blackpool	33.4	1.1 (0.74 - 1.56)	3.4 (2.50 - 4.35)
Tameside	33.1	1.0 (0.75 - 1.31)	3.1 (2.52 - 3.71)
Bolton	32.7	1.1 (0.84 - 1.45)	3.5 (2.83 - 4.18)
Wigan	31.9	1.0 (0.79 - 1.26)	3.2 (2.70 - 3.74)
NORTH WEST	31.7	1.2 (1.14 - 1.25)	3.8 (3.65 - 3.89)
Lancashire	30.4	1.2 (1.06 - 1.25)	3.8 (3.59 - 4.02)
Sefton	29.4	1.0 (0.67 - 1.30)	3.4 (2.61 - 4.10)
Halton	27.0	1.0 (0.72 - 1.36)	3.8 (3.01 - 4.67)

Local authority	Prevalence of experience of dental decay (%)	Mean number of teeth with experience of dental decay in all examined children n (95% confidence intervals)	Mean number of teeth with experience of dental decay in children with any decay experience n (95% confidence intervals)	
Trafford	26.0	1.0 (0.72 - 1.32)	3.9 (3.05 - 4.77)	
Warrington	24.3	0.8 (0.52 - 1.01)	3.1 (2.43 - 3.85)	
Cumbria	24.2	0.8 (0.67 - 0.86)	3.2 (2.89 - 3.43)	
ENGLAND	23.4	0.8 (0.78 - 0.81)	3.4 (3.36 - 3.44)	
Cheshire West and Chester	22.7	0.6 (0.41 - 0.78)	2.6 (2.07 - 3.19)	
Stockport	22.0	0.7 (0.43 - 0.94)	3.1 (2.21 - 3.99)	
Cheshire East	Did Not Participate			
St. Helens	Did Not Participate			
Wirral	Did Not Participate			

	Rochdale	Statistical neighbour within North West: Oldham	Statistical neighbour comparator 1: Oldham	North West	England
Prevalence of experience of dental decay	40.7%	43.2%	43.2%	31.7%	23.4%
Mean number of teeth with experience of dental decay	1.7	1.9	1.9	1.2	0.8
Mean number of teeth with experience of decay in those with experience of dental decay	4.3	4.4	4.4	3.8	3.4
Mean number of decayed teeth in those with experience of dental decay	3.6	3.8	3.8	3.0	2.7
Proportion with active decay	37.6%	41.0%	41.0%	29.0%	20.4%
Proportion with experience of tooth extraction ⁱⁱ	3.0%	4.5%	4.5%	2.9%	2.2%
Proportion with dental abscess	1.8%	1.7%	1.7%	1.2%	1.0%
Proportion with teeth decayed into pulp	9.2%	12.3%	12.3%	5.5%	3.3%
Proportion with decay affecting incisors ⁱⁱⁱ	11.4%	12.6%	12.6%	7.7%	5.2%
Proportion with high levels of plaque present on upper front teeth ^{iv}	5.2%	1.7%	1.7%	2.2%	1.2%

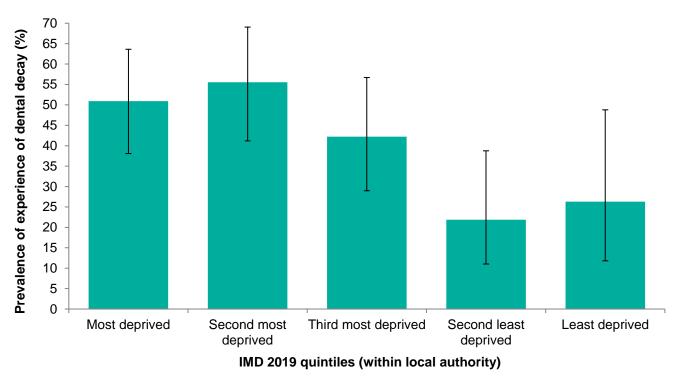
¹ generated by the children's services statistical neighbour benchmarking tool, the neighbour within the North West has "Very Close" comparator characteristics and the national neighbour 1 has "Very Close" comparator characteristics³.

ii experience of extraction of one or more teeth on one or more occasions.

iii dental decay involving one or more surfaces of upper anterior teeth.

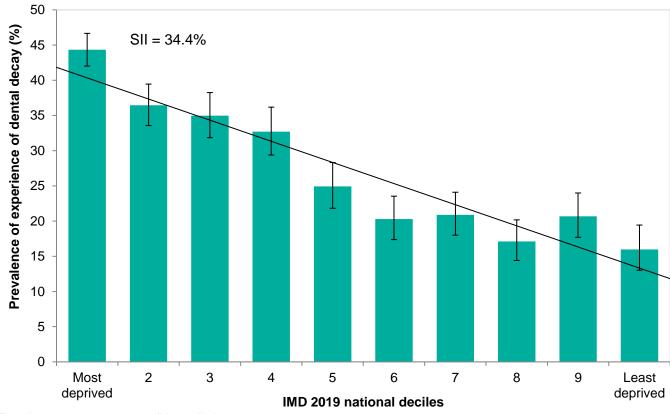
iv indicative of poor tooth brushing habits.

Figure 2: Prevalence of experience of dental decay in 5-year-olds in Rochdale, by local authority Index of Multiple Deprivation (IMD) 2019 quintiles.



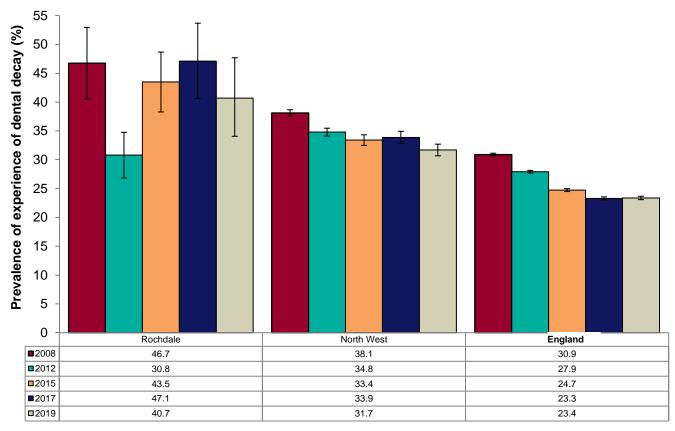
Error bars represent 95% confidence limits

Figure 3: Slope index of inequality in the prevalence of experience of dental decay in 5-year-olds in the North West.



Error bars represent 95% confidence limits

Figure 4: Prevalence of experience of dental decay in 5-year-olds in Rochdale, the North West and England, by year.



Error bars represent 95% confidence limits

Table 3: Experience of dental decay in 5-year-olds in the North West, by ethnic group.

Ethnic group	Number of children examined (N)	Prevalence of experience of dental decay (%)	Mean number of teeth with experience of dental decay among children with any experience of dental decay n (95% CI)	Prevalence of dental decay affecting incisors (%)
Other ethnic background	78	67.9	5.0 (4.05 - 5.98)	30.8
Asian / Asian British	803	50.4	4.7 (4.39 - 5.07)	20.0
Not provided	97	41.2	3.8 (2.59 - 4.96)	9.3
Black / Black British	200	38.5	3.9 (3.25 - 4.62)	12.5
Mixed	223	32.3	3.4 (2.74 - 4.10)	9.0
White	6,753	26.7	3.4 (3.25 - 3.51)	4.9
North West	8,154	31.7	3.8 (3.65 - 3.89)	7.7

Figure 5: Prevalence of experience of dental decay in 5-year-olds in the North West, by ethnic group.

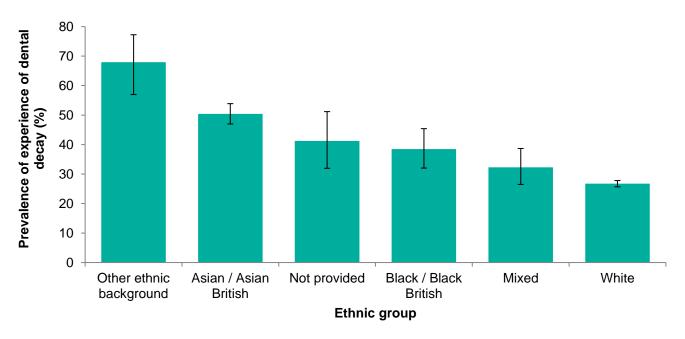


Table 4: Prevalence and severity of experience of dental decay in 5-year-olds in Rochdale, by locality.

Locality	Prevalence of experience of dental decay (%)	Mean number of teeth with experience of dental decay in all examined children n (95% CI)	Mean number of teeth with experience of dental decay in children with any decay experience n (95% CI)
Rochdale	49.4	2.4 (1.89 - 2.89)	4.8 (4.14 - 5.53)
Middleton	44.6	1.2 (0.74 - 1.61)	2.6 (2.04 - 3.24)
Heywood	35.2	1.2 (0.58 - 1.86)	3.5 (2.16 - 4.79)
Pennines	23.7	1.2 (0.25 - 2.12)	5.0 (2.19 - 7.81)

Summary

In Rochdale average levels of dental decay are higher than the average for England. Within Rochdale, the highest levels of experience of dental decay are clustered around the Rochdale and Middleton localities.

The small sample size means it is not possible to provide information at ward level. Future surveys could be commissioned to provide larger samples to facilitate local analysis. Commissioning High Quality Information to Support Oral Health Improvement: A toolkit about dental epidemiology for local authorities, commissioners and partners is available to support the commissioning of oral health surveys⁴.

Public health interventions can improve child oral health at a local level. Local authorities improving oral health: commissioning better oral health for children and young people is available to support local authorities to commission oral health improvement programmes for children and young people aged up to 19 years⁵.

If further local analysis is required, please contact the national dental public health team: DentalPHIntelligence@phe.gov.uk

References

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More information is available at www.gov.uk/government/collections/oral-health Please send any enquiries to DentalPHIntelligence@phe.gov.uk

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