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FDI POLICY STATEMENT

Lifelong Oral Health

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3 **CONTEXT**

4 Maintaining lifelong oral health, encompassing functional, psychosocial, and structural
5 integrity of the mouth and teeth, is fundamental to the improvement of quality of life,
6 overall health, well-being, and full participation in society across the life course^{1,2}.
7 Globalization, urbanization, evolving social norms, and technological advancements
8 are shaping health behaviors and influencing the prevalence and management of oral
9 and general health conditions³. The public health response should take these
10 emerging challenges into account to inform policies that promote lifelong, person-
11 centered oral health and its integration within overall health⁴.

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13 **SCOPE**

14 Oral health should be embedded within comprehensive healthy-life strategies as an
15 essential determinant of quality of life. Implementation requires adaptable health
16 systems, integrated long-term care structures, and coordinated action among
17 stakeholders across sectors and government levels to ensure accessible, equitable,
18 and sustainable healthcare for all^{4,5}.

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20 **DEFINITION**

21 Lifelong oral health aims to maintain good oral health and optimal quality of life through
22 health promotion, risk assessment, disease prevention, early diagnosis, and
23 intervention at all stages of life. The goal of reaching advanced age with a functional
24 dentition is feasible if preventive measures and oral healthcare are accessible
25 throughout life.

26 **PRINCIPLES**

27 This policy statement calls for the integration of oral health into general health and
28 the promotion of a sustainable and universal health-coverage system at each stage
29 of life. This approach includes prioritizing disease prevention and improving access
30 to equitable health care, contributing greater well-being for all.

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32 **POLICY**

33 FDI advocates educating, promoting, and raising awareness of oral health and its
34 impact on general health and well-being throughout life⁴⁻⁶. FDI also supports political,
35 legislative, and decision-making processes that enhance oral health promotion and
36 care⁷. The risk of developing caries, periodontal disease, or oral cancer in adulthood
37 is influenced not only by prevailing risk factors, but also by exposures during the
38 prenatal period, childhood, and adolescence^{8, 9}.

39 Governments, non-governmental organizations, National Dental Associations,
40 communities, and individuals should therefore create supportive environments,
41 supported by adequate resources and sustainable financing¹⁰, for advancing oral
42 health and well-being at all stages of life, for example by:

- 43 • **Public policies:** Considering oral health in all public policies— including
44 nutrition, tobacco control, sugar reduction, and healthy ageing policies.
- 45 • **Disease prevention:** Strengthening the prevention of non-communicable
46 diseases by integrating oral health promotion into general health initiatives
47 and addressing shared risk factors such as tobacco use, unhealthy diet, and
48 harmful alcohol consumption.
- 49 • **Community settings:** Promoting lifelong prevention in key community
50 settings such as public health centers, schools, workplaces, and long-term
51 care facilities.
- 52 • **Accessibility:** Urging national insurance providers and non-governmental
53 funders to support regular access to care for people of all ages.
- 54 • **Special healthcare:** Supporting people with special healthcare needs by
55 preserving or enhancing their oral function through training professional and
56 family caregivers responsible for daily oral hygiene.
- 57 • **Primary oral healthcare:** Ensuring that essential oral health services are
58 integrated within primary health care systems, promoting interdisciplinary
59 collaboration and prevention-oriented approaches adapted to national
60 contexts.
- 61 • **Dentist and dental team leadership:** Recognizing and strengthening the
62 leadership role of dentists and the dental team in advocating for oral health,
63 delivering preventive and therapeutic care, and contributing to health system
64 planning and policy development.

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66 **KEYWORDS**

67 Lifelong oral health, quality of life, health promotion, primary health care.

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69 **DISCLAIMER**

70 The information in this Policy Statement was based on the best scientific evidence
71 available at the time. It may be interpreted to reflect prevailing cultural sensitivities,
72 socio-economic realities, and evolving international public health strategies.

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74 **REFERENCES**

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