

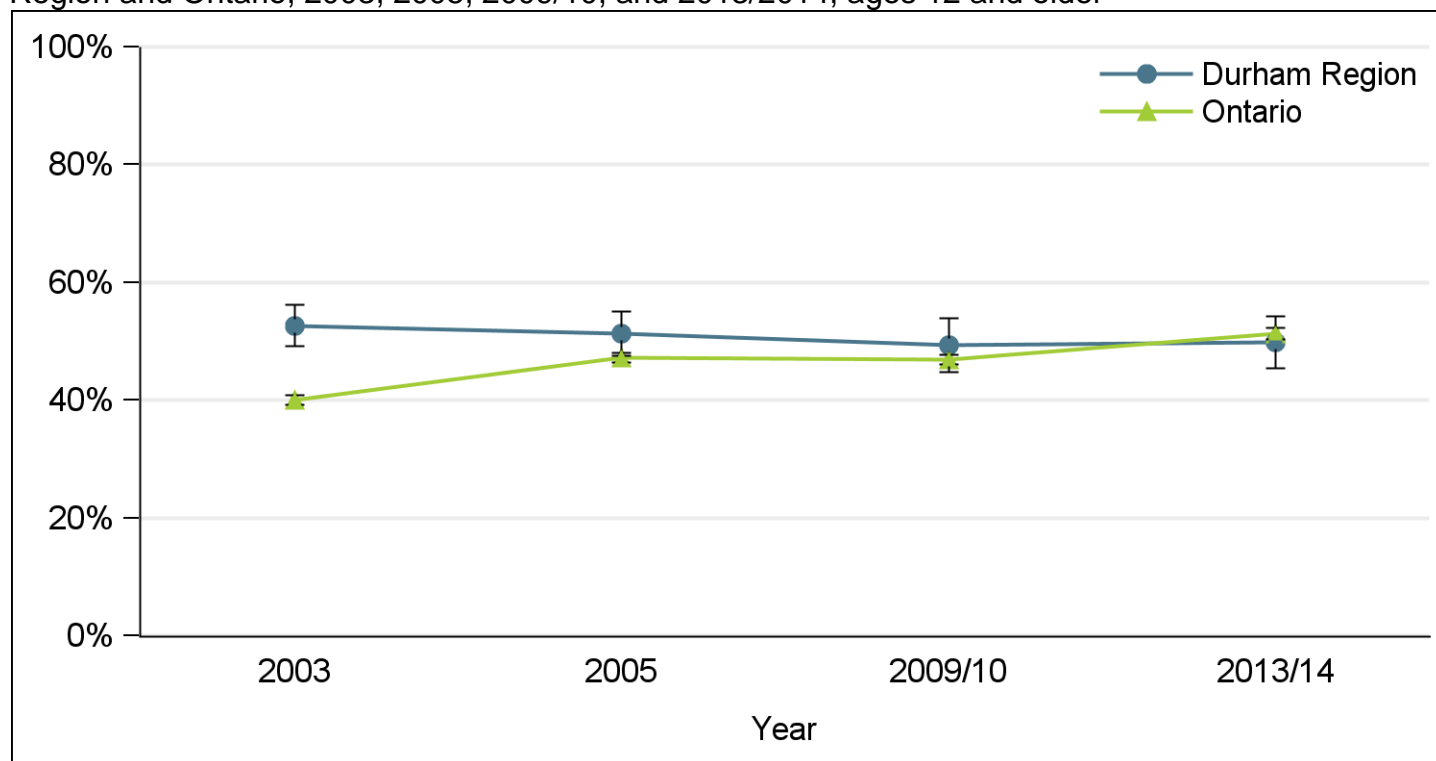
November 2016

Highlights

- In 2013/14, half (50%) of Durham Region residents 12 and older experienced oral/facial pain or discomfort in the past month. This rate was unchanged for Durham Region and increased in Ontario since 2003.
- Among the 36 Ontario public health units, the proportion of respondents who experienced oral/facial pain or discomfort ranged from 40% to 59%.
- Those most likely to report oral/facial pain or discomfort were females, those aged 18-24 years old, those in low-income, and those with less than a secondary school diploma.

Trend Over Time

Figure 1. Proportion that experienced oral/facial pain or discomfort in the past month, Durham Region and Ontario, 2003, 2005, 2009/10, and 2013/2014, ages 12 and older

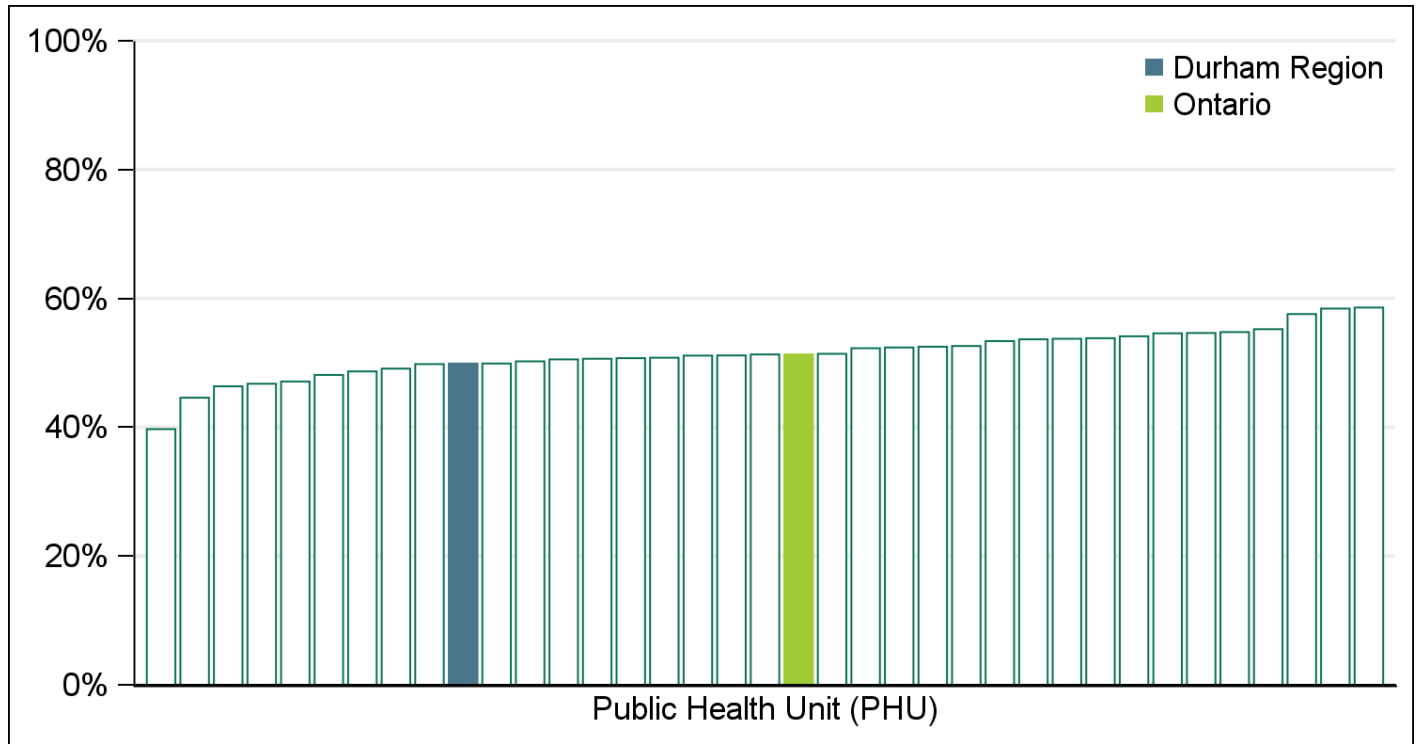


Place of residence	2003	2005	2009/10	2013/14
Durham	53%	51%	49%	50%
95% CI (Durham)	49-56%	48-55%	45-54%	45-54%
Ontario	40%	47%	47%	51%
95% CI (Ontario)	39-41%	46-48%	46-48%	50-52%

In 2013/14, 50% of Durham Region residents aged 12 and older experienced oral/facial pain or discomfort in the past month. This rate is similar to the rate observed for Ontario of 51%. Figure 1 shows that rates for Durham Region were unchanged and the rate for Ontario increased since 2003.

Provincial Comparison

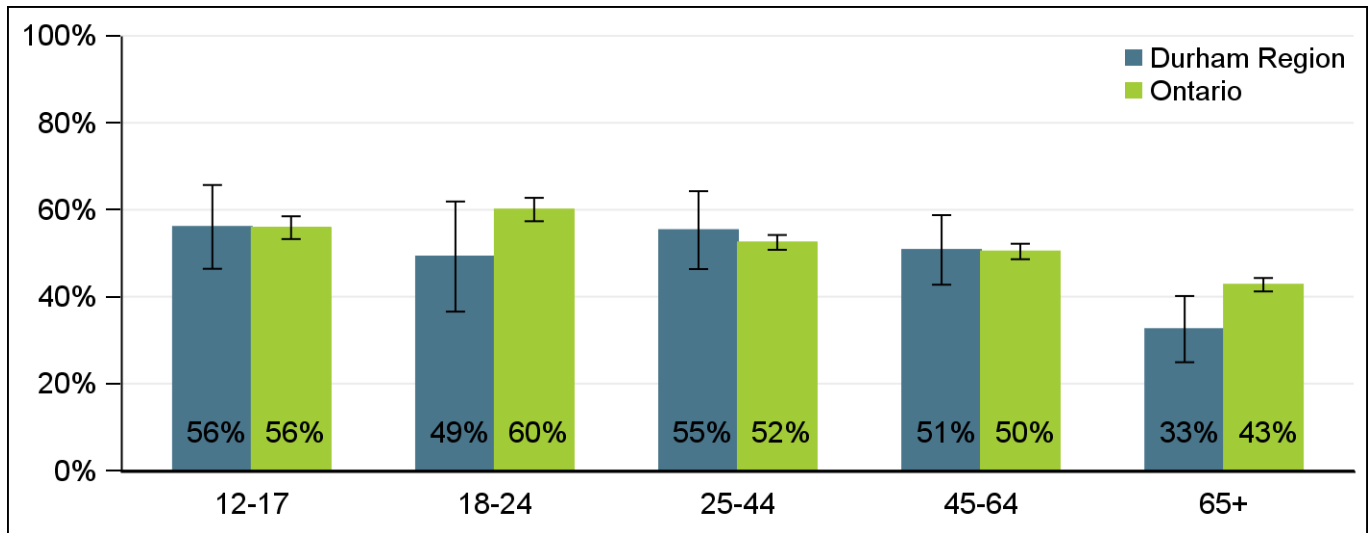
Figure 2. Proportion that experienced oral/facial pain or discomfort in the past month, by public health unit, 2013/2014, ages 12 and older



For 2013/14, the proportion of respondents who experienced oral/facial pain or discomfort in the past month ranged by public health unit from 40% to 59%. The rate for Durham Region was in the lower end of this range at 50% (See Figure 2 above).

Oral and Facial Pain and Discomfort and the Determinants of Health

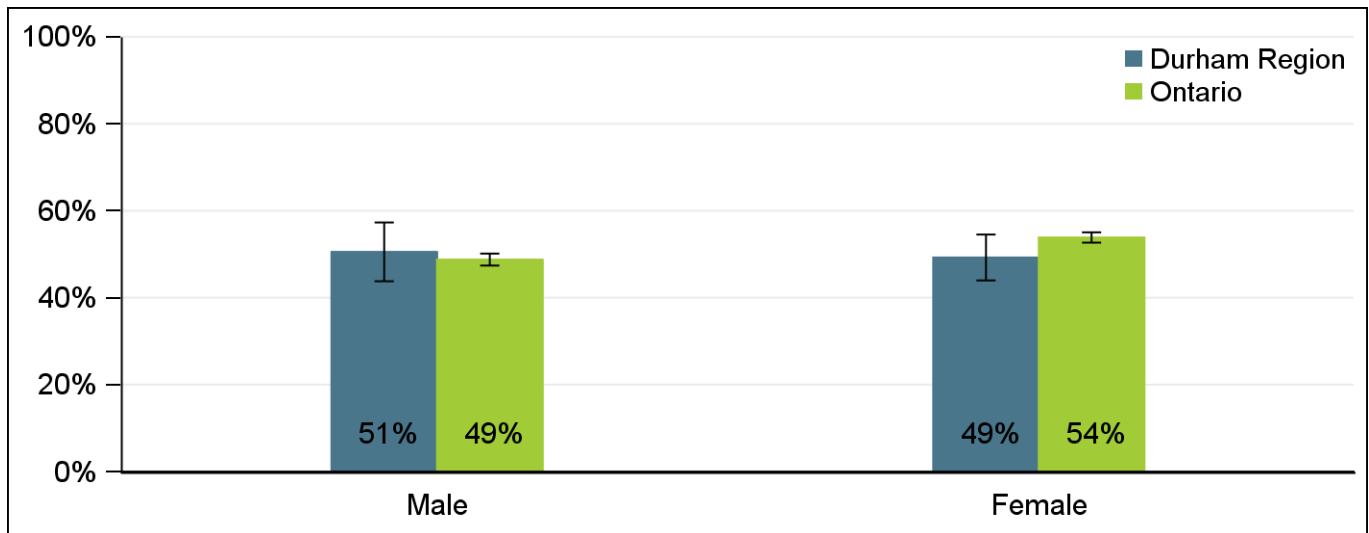
Figure 3. Proportion that experienced oral/facial pain or discomfort in the past month by age, Durham Region and Ontario, 2013/2014, ages 12 and older



Association between age and oral and facial pain and discomfort is significant for both Durham Region and Ontario.

Figure 3 shows a decrease in the proportion that experienced oral/facial pain or discomfort in the past month with increasing age beyond the 25-44 year old age group. This relationship was observed for both Durham Region and Ontario.

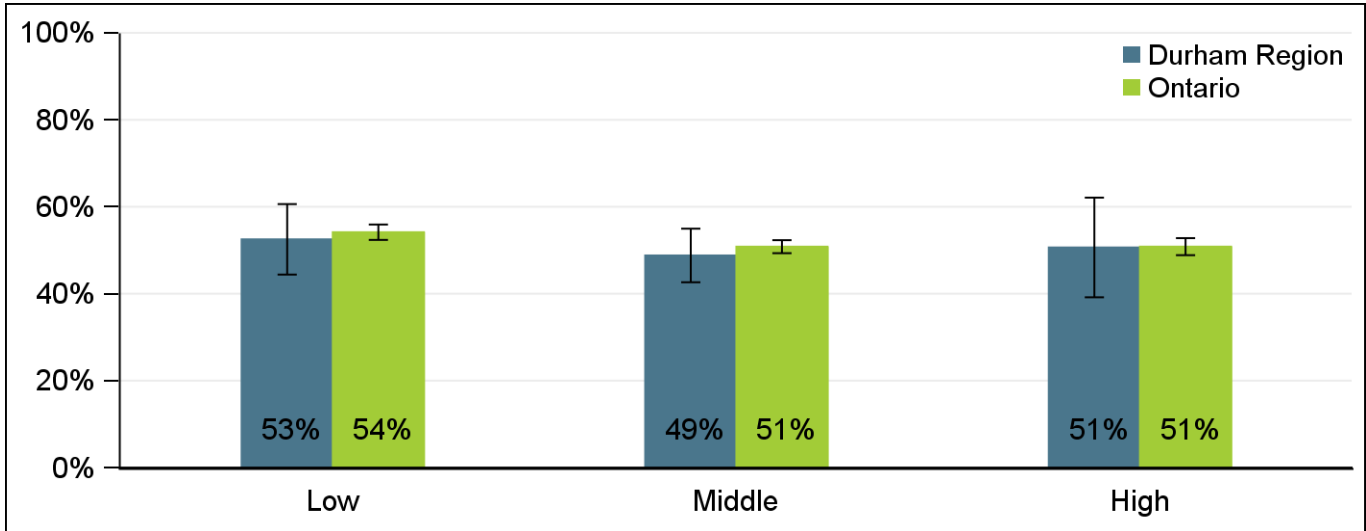
Figure 4. Proportion that experienced oral/facial pain or discomfort in the past month by sex, Durham Region and Ontario, 2013/2014, ages 12 and older



Association between sex and oral and facial pain and discomfort is significant for Ontario only.

As shown in figure 4 above, females in Ontario were more likely to report oral/facial pain or discomfort than their male counterparts. No association was observed for Durham Region.

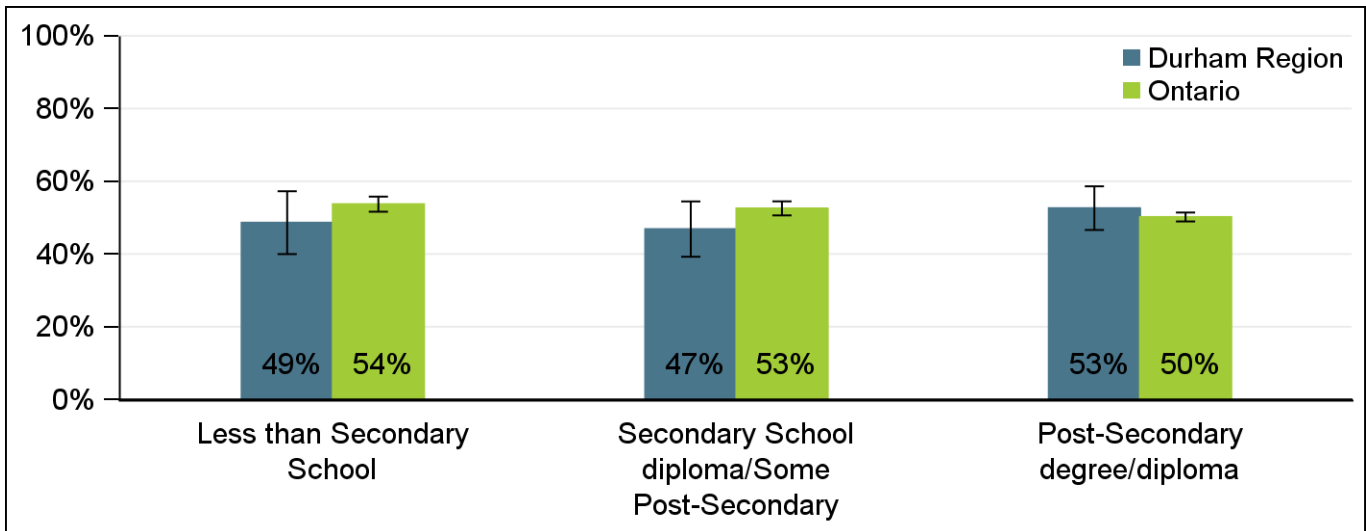
Figure 5. Proportion that experienced oral/facial pain or discomfort in the past month by household income, Durham Region and Ontario, 2013/2014, ages 12 and older



Association between household income group and oral and facial pain and discomfort is significant for Ontario only.

In 2013/2014, there was no observed association between those who experienced oral/facial pain or discomfort and household income for Durham Region. Within Ontario, respondents in the lowest income group were more likely to experience oral/facial pain or discomfort in the past month (see Figure 5).

Figure 6. Proportion that experienced oral/facial pain or discomfort in the past month by education level, Durham Region and Ontario, 2013/2014, ages 12 and older



Association between education level and oral and facial pain and discomfort is significant for Ontario only.

Figure 6 shows an increase in the rate of oral/facial pain or discomfort in the past month with increasing educational attainment in Ontario. No association between oral/facial pain or discomfort and education was found for Durham Region.

Data Notes

Data Source: The Canadian Community Health Survey (CCHS) is a cross-sectional survey that collects information related to health status, health care utilization and health determinants for the Canadian population. It surveys a large sample of respondents and is designed to provide reliable estimates at the health region level. Since 2007, data are collected on an ongoing basis with annual releases, rather than every two years as was the case prior to 2007. The CCHS data are collected from persons aged 12 and over living in private dwellings, excluding individuals living on Indian Reserves and on Crown Lands, institutional residents, full-time members of the Canadian Forces, and residents of certain remote regions. Interviews are conducted using computer-assisted interviewing, either in person or over the telephone.

Definitions and Survey Questions: Proportion of the population 12 years and older that experienced oral/facial pain or discomfort in the month prior to the survey. Oral and facial pain and discomfort was defined as experiencing any one of the following conditions: toothache, tooth sensitivity to hot or cold, pain in or around the jaw joints, any other pain in the mouth or face, bleeding gums, dry mouth, and bad breath.

Data Analysis: The CCHS share file obtained from the Ontario Ministry of Health and Long-Term Care was used for analysis. Data were analyzed using SAS version 9.4. Estimates were weighted using the final CCHS sampling weight. Error bars in the graphs represent the 95% confidence interval (CI) around the estimate. The true or actual estimate falls within the range of values 95 out of 100 times. For all analyses, response options of 'Refusal', 'Don't Know', 'Not Stated' and 'Not Applicable' were excluded, unless otherwise stated. Also excluded were participants who required the use of a proxy, as this question was not asked to these individuals.

The CCHS 2013/2014 dataset was used for the “Oral/Facial Pain or Discomfort and the Determinants of Health” analysis. Statistical significance was assessed based on a chi-square test with a p-value less than 0.05. A statistically significant difference between groups means that the association is not likely due to chance.

The income categories of low, middle and high were based on a CCHS derived variable which distributed residents according to the adjusted ratio of their total household income to the low income cut-off corresponding to their household and community size. The ten categories in this variable were grouped with “low” income corresponding to the lowest 30%, “middle” including the middle 40%, and “high” corresponding to highest 30% of earners.