

# - Transversal study on french national prevalence of dental decay in children (2006)

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## General

### Identification

Detailed name	Transversal study on french national prevalence of dental decay in children (2006)
CNIL registration number, number and date of CPP agreement, AFSSAPS (French Health Products Safety Agency) authorisation	--

### General Aspects

Medical area	Odontology
Pathology (details)	sociodemographic factors, accidents and injuries, chronic diseases
Health determinants	Social and psychosocial factors
Others (details)	tooth decay
Keywords	tooth decay, DF and DMF indexes, childhood, prevalence, social health inequalities, prevention

### Scientific investigator(s) (Contact)

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## Collaborations

## Funding

Funding status	Public
Details	Ministère de la santé et des solidarités -Direction générale de la santé

## Governance of the database

Sponsor(s) or organisation(s) responsible	Union Française pour la Santé Bucco-Dentaire (UFSBD)
Organisation status	Public

## Additional contact

## Main features

Type of database	Study databases
Study databases (details)	Repeated cross-sectional studies (except case control studies)
Database recruitment is carried out by an intermediary	A population file
Database recruitment is carried out as part of an interventional study	No
Additional information regarding sample selection.	The population of children selected for each age group (1,300) is representative of the French population at this age. The sample is drawn from computer files supplied by the French Education

Ministry's Prospective Evaluation Directorate. These comprise indications on the type of town in which each school is based, as well as the number of children in school in the level.

Each school has a proportional probability of choice to the number of its pupils. Samples will be drawn non-exhaustively and put back once they've been picked (so the same school may possibly be picked several times). Cluster sampling is carried out, for each stratum, from schoolchildren by giving an estimation of the number of children concerned. The sampling is drawn from the 5,000 children necessary per age group. Only 26% of these children will be examined. So as to guarantee a certain safety margin (absent children, difference between the number of children in one age group and the year group to which they should belong...), a third of the age group is selected, i.e. the children born more or less 3 months from the exam date.

Whether or not the school belongs to a priority education zone (ZEP) is also looked into to ensure representativeness. Before analyzing the results, the samples are rectified so that they are strictly representative according to the criteria set at the outset by the stratification method and that the breakdown per stratum is an exact reflection of the structure observed in the sampling base.

## Database objective

### Main objective

Perform reliable and representative studies in France of the dental health of school children from 6 to 12 years old and at regular intervals (every 5 years). Through these studies, it must be possible to assess the health, pathology, care administered and treatment needs of children as well as the trends in the population's dental health.

### Inclusion criteria

children born between 1/07/1999 and 31/12/1999 for 6 year-old children  
children born between 1/01/1994 and 30/06/1994 for 12 year-old children

## Population type

### Age

Childhood (6 to 13 years)

### Population covered

General population

### Gender

Male  
Woman

Geography area	National
Detail of the geography area	stratification on school type and size of town (sampling in clusters)

## Data collection

### Dates

Date of first collection (YYYY or MM/YYYY) 1987

Date of last collection (YYYY or MM/YYYY) 2006

### Size of the database

Size of the database (number of individuals) [1000-10 000[ individuals

Details of the number of individuals 2600

### Data

Database activity Data collection completed

Type of data collected  
Clinical data  
Declarative data  
Administrative data

Clinical data (detail) Medical registration

Declarative data (detail) Face to face interview

Administrative data (detail) age, gender, profession and social category of parents

Presence of a biobank No

Health parameters studied  
Health event/morbidity  
Health care consumption and services  
Others

Care consumption (detail) Medical/paramedical consultation

Other (detail) prevention (habits, screening), social health inequalities

### Procedures

Classifications used For 6 year-old children, the following is listed: ? the

mean DF index: mean number (and standard deviation) of teeth present, decayed teeth and temporarily filled teeth, ? the mixed DMF index: mean number (and standard deviation) of teeth present, decayed teeth, missing teeth and mixed filled teeth, mean, ? the distribution of the DF index. For 6 and 12 year-old children, the following is listed: ? the mean CMF index: mean number (and standard deviation) of teeth present, decayed teeth, missing teeth and permanently filled teeth, ? the results on the first adult molars, ? the results on the other adult teeth, ? the proportions of children with no untreated decayed teeth ( $D = 0$ ) or affected teeth ( $DMF = 0$ ) as well as those without any trace of treatment ( $F = 0$ ), ? the treatment index calculated on children with at least one affected tooth ( $DF \neq 0$ ). It measures the proportion of teeth treated compared to all of the affected teeth - whether they are treated or not, ? the percentage of care needs expressed by the formula  $[F/DF = 0] + [0 < F/DF < 1]$ , ? the good dental health index, ? the other care needs (orthodontics, hygiene, gingivitis, tartar), ? the presence of injuries, ? the presence of crack and pit sealing, ? recourse to a dentist. For social categories and professions: INSEE PCS 2003 nomenclature

Participant monitoring No

Links to administrative sources No

## Promotion and access

### Promotion

Link to the document <http://www.ufsbd.fr/index.php?Itemid>

### Access

Terms of data access (charter for data provision, format of data, availability delay)

The results are analyzed and presented in the form of a listing for each item and index studied. The results' interpretation is subject to a report submitted to the French Directorate General for Health with results tables appended. A monograph of this report is published by the UFSBD and a PDF version of the document put online at [ufsbd.fr](http://ufsbd.fr). The survey is distributed on the database of the World Health Organization, since the UFSBD is the WHO collaborating center for the development of new education concepts and dental health practices.

Access to aggregated data

Access on specific project only

Access to individual data

Access on specific project only