

'Striking' Data Links Periodontal Care to Lower Diabetes Costs

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An insurance industry study, touted as the largest of its kind, shows that medical costs can be reduced by more than \$1,800 a year for each diabetic patient who receives periodontal care.

The study examined medical records from more than 1.6 million people who were covered by both United Concordia Dental and Highmark Inc. and identified about 90,000 Type 2 diabetics. About 25% of those diabetics elected to receive periodontal treatment in 2007 and the study compared their medical costs over the next three years with the 75% of diabetics in the group who declined the oral care.

"The data is striking. In 2007 you had fewer than half the inpatient admissions if the patients had periodontal surgery when compared with the patients who did not," says Marjorie Jeffcoat, DMD, with the University of Pennsylvania, the lead author of the study.

"I also found it striking that this result was carried through for three years," Jeffcoat told reporters at a Monday teleconference. "If you look at the mean number of visits they paid to a physician, again in 2007 they saw half the number of physician visits and this statistically significant result was carried through again for three years."

"If we look at mean medical costs we have a reduction in all three years and if you look at it the mean medical savings was \$1,814 per patient per year. That is a striking number. This affect is apparent two years after the periodontal treatment," Jeffcoat says.

The study's release coincided with United Concordia launch of a diabetes-specific program that provides 100% coverage for surgical procedures, other treatments, and maintenance for patients with gum disease.

"This is the most statistically conclusive study proving the relationship between oral health and medical cost savings. The savings are just the start of what is to come," United Concordia COO/President F.G. "Chip" Merkel told reporters. "We believe that employers will realize reduced medical costs when their employees with diabetes receive appropriate periodontal care."

James Bramson, DDS, chief dental officer for United Concordia, noted that about 25.8 million Americans have diabetes, a number that has doubled since 1999. He says the sheer size and scope of Jeffcoat's study shows "that the results here are not a fluke."

"We did some modeling to look at the ability to take care of these kinds of patients and the cost of doing that and what kinds of savings you'd have on the medical side," Bramson says. "In a group of about 200 members, even as small as that, it would only take about 3% of the diabetics to actually return the savings on the medical side equal to what it would cost to provide these additional treatments. Beyond that all the rest is healthcare savings."

While the study examined diabetics, Bramson says other studies have provided linkage between oral health and coronary artery disease, cerebral vascular disease, and even premature and low-weight infants. "We believe other chronic diseases will show some association, some economic savings medically if those people had periodontal treatment," he says. "So when we know more about the breadth and depth of the accuracy of that savings across those other diseases our hope here is to broaden the coverage we are now starting with diabetes."

"The thought is you don't need to cover everybody in the population," he says. "The better thing to do is cover those targeted populations where we can show savings and where we know an intervention program of information and assistance will help them get in and get the treatment they need."

Bramson says dentistry accounts for about 4% healthcare spending in the United States, while hospital care, physician and clinical services, and drugs account for 63% of all spending. "If we can improve the spending in the dental that is going to affect the three other largest segments of the healthcare spending, so we believe you will have some savings well beyond the \$1,814," he says.

The study did not specifically examine the cause-and-effect relationship between periodontal disease and diabetes, but Jeffcoat says earlier studies have explained the linkage.

"Any sort of infection you have, be it pneumonia, a kidney infection, it makes your diabetes worse," she says. "Periodontal disease is an infection. If we can get that infection under control we tend to get the hemoglobin A1C, the measure of three months of diabetes, under control. It has to do with inflammation and infection and getting it under control."