Africa has increasing numbers of deaths caused by HIV/AIDS. To make things worse, South Africa, though still one of the Black Continent's most advanced nations, remains a deeply divided and troubled nation with problems that even the best organised World Cup will not be able to erase from the political and social landscape any time soon. The lack of oral health care is just one of the minor problems in the country.

According to the latest figures from UNAIDS, almost 6 million of 12 percent of the South African population is living with HIV/AIDS. The mortality rate linked to the disease has doubled from slightly over 50,000 in 1997 to over 100,000 in 2006. Half of these deaths are within the most productive age groups, which significantly affects the country's economic structure, maintenance, and development. To make things worse, South Africa has increasing numbers of tuberculosis infections (TB).

The government in Pretoria has announced a National Strategic Plan to fight the spread of HIV/AIDS and TB and to increase testing as well as HIV/AIDS awareness amongst the population until 2011. For the success of this campaign, the country will also need support from outside its borders. The tournament can help raise awareness, but only if the world is willing to not only watch for the winning goal, but also look beyond the pitch and at the millions of people suffering in the townships of Durban, Cape Town, and Johannesburg.

We will try to keep our eyes open.

Yours sincerely,

Daniel Zimmermann
Group Editor
Dental Tribune International

Oral health and care in South Africa

Despite great achievements in the oral health of populations globally, problems remain in many communities around the world. The decline of oral diseases in industrial countries means that the burden of oral diseases can be prevented and controlled with fairly simple interventions. Advances in knowledge and technology and preventive interventions in oral health can virtually eliminate the pain, suffering and loss of quality of life that accompany oral diseases. In South Africa, the availability of such advances is not universal. The distribution and severity of oral disease varies in different parts of the country.

A recent survey found that almost a fifth of the South African population reported oral-health problems and this relatively high level of perceived oral-health problems implies that oral health should be of greater priority. Furthermore, levels of edentulousness are unacceptably high and of concern, not only as dental caries and periodontal disease are preventable and treatable conditions, but also because of the increased risk regarding blood-borne infections such as HIV/AIDS and hepatitis in a region where these conditions are rife. A shift from the endemic curative philosophy to an approach to oral health care that is more promotive and integrated, both amongst the public and health-care professionals, is urgently required.

In general, there is a low utilisation of oral-health services and this may be due to economic and cultural factors, as well as the changing population demographics, affect the delivery of oral-health services. Reducing disparities requires far-reaching, wide-ranging approaches that target at-risk populations regarding specific oral diseases, and involves improving access to existing care.

“Optimal intervention in relation to oral disease is not universally available.”

Contact Info
Sudeshni Naidoo is Professor at the Department of Community Oral Health, Faculty of Dentistry, University of the Western Cape, in Cape Town in South Africa. She can be contacted at sureshnai@uwc.ac.za.

"Finally, our rotten teeth are good for something.”