

Poster Communication 33

## Oral health and systemic diseases in older adults: Impact on quality of life – A study in Porto

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### Abstract

**Background:** Population ageing is associated with an increased prevalence of chronic diseases and oral conditions, such as caries, edentulism and periodontal disease. Oral health (OH) is an integral component of general health and directly influences quality of life (QoL), affecting dimensions such as mastication, speech, body image, and social interaction. In institutionalised older adults (OA), factors such as polypharmacy, low health literacy and difficulties in accessing care further aggravate these conditions [1,2]. **Objective:** To assess the most frequent pathologies in OA and analyse their relationship with OH and their impact on QoL. **Methods:** An observational, cross-sectional and descriptive study was conducted with 67 OA (65-98years). Data were collected through sociodemographic questionnaires, medical history, assessment of oral hygiene habits, O'Leary Plaque Index, OHIP-14, and GOHAI [3]. Descriptive and inferential statistical analyses were performed, with a significance level set at  $p < 0.05$ . **Results:** Most participants presented systemic pathologies (62.7%) and were taking regular medication. The most frequent conditions included hypertension, diabetes, cardiovascular diseases, and respiratory disease. These conditions are often associated with changes in OH, such as increased dental plaque accumulation, xerostomia, and a higher prevalence of periodontal disease [4]. Individuals with chronic diseases showed poorer oral hygiene indicators, with a high plaque index (65%), suggesting a relationship between multimorbidity and reduced self-care capacity. Polypharmacy, which was common in this population, contributed to salivary alterations, favouring the development of dental caries and oral discomfort. The QoL questionnaires revealed a significant negative impact, including limitations in mastication, pain, psychological discomfort and difficulties in daily activities. OA with associated pathologies showed worse QoL scores on the GOHAI, reinforcing the relationship between general health, OH and QoL [3,4]. **Conclusions:** Common systemic pathologies in OA are closely related to OH, potentiating a negative impact on QoL [1,4]. The presence of chronic diseases, combined with inadequate oral hygiene habits and barriers to accessing care, contributes to the worsening of oral conditions. It is therefore essential to implement multidisciplinary strategies focused on prevention, OH education, and the integration of medical and dental care in geriatric institutions [2]. The promotion of OH is fundamental for active and healthy ageing and for improving QoL.

**Keywords:** oral health; older adults; quality of life; systemic pathologies

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