

## The smiling Brazil program and the guidelines for the national oral health policy: Completeness and orientation for care lines for the elderly population

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Development: Throughout its history, the provision of oral health services in Brazil has been characterized as low complexity, with restricted access to treatment, predominantly limited to curative, mutilating and isolated experiences of preventive activities in schools. Adults and the elderly almost exclusively access was for dental mutilation, resulting in a situation of extreme social exclusion. In order to try to reverse this situation, the Smiling Brazil Program was launched in 2004, the main one of which is the reorganization of the practice and qualification of the actions and services offered in dentistry, enhanced by government financial transfers and delivery of equipment for the promotion, protection and recovery of health and prevention of oral diseases, in order to expand access to free dental treatment for Brazilians, through the Unified Health System (SUS), also resulting in an increase in the labor market for dentists in the public sector. And, to give the program north, in the same year of its presentation, the epidemiological survey named SB BRASIL 2003 - first in the SUS was carried out. It should be noted that prior to the establishment of the program, oral health was almost non-existent in the SUS, since actions when existing in terms of non-surgical procedures were in primary care, restricted to prophylaxis and dental restorations. The treatment of canal was performed by less than 5% of the municipalities, taking to the 95% of the municipalities, the extraction as a common situation and without considering the dental loss replacement.

**Purpose:** to describe the reality of Oral Health of the elderly in Brazil presenting the integral care and the care line for the oral rehabilitation of the elderly.

**Results:** this study showed that in 2003, less than 10% of the elderly had 20 or more teeth, and less than 8% of the elderly had healthy gums. The need for a total prosthesis, in at least one arcade, was identified that three out of four elderly patients and those with no functional teeth, more than 36% needed at least one denture. Thus, the oral health situation of the Brazilian elderly was far from the WHO goal for the year 2000, which proposed that at least 50% of the elderly present 20 or more teeth.

**Final considerations:** The great challenge of the Brazilian Government has been to give these elderly people the masticatory functions, promoting self-esteem and sociability. After 15 years, the program needs adjustments and priorities to reach the elderly, which will increase not only the total number of elderly people, but also their participation in the Brazilian population, from 8% in 2000 to almost 19% in the year of 2030, considering also the longevity and the necessary quality of life.

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