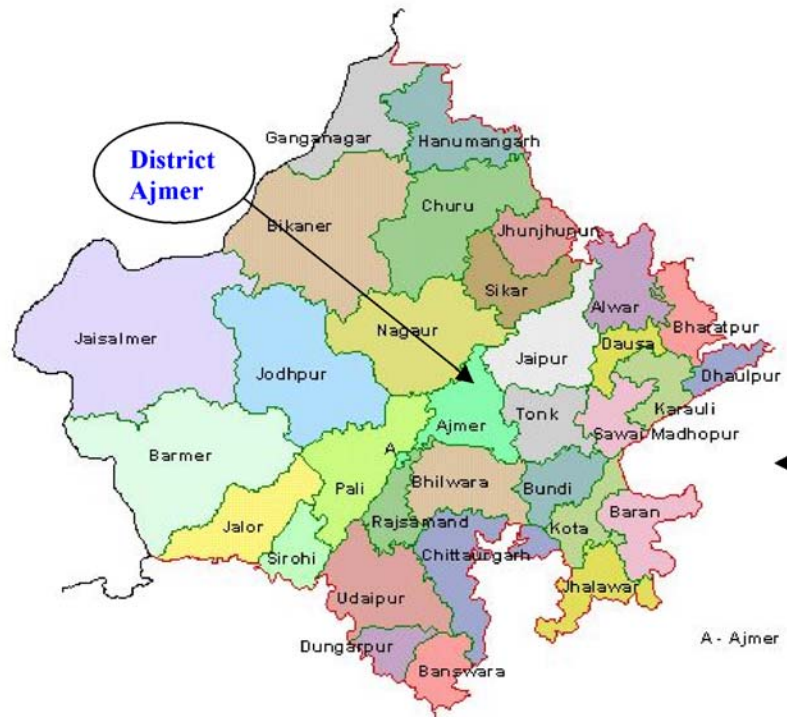


Site specific reports

7.6 Rajasthan – District Ajmer



Indicators (Rajasthan)	
Total Population	55,507,188
Population – Male	29,420,011
Population – Female	27,087,177
Sex-ratio	921
Total Literacy Rate	60.4%
Literacy Rate – Male	75.7%
Literacy Rate – Female	43.9%

As per 2001 Census

Sample Area (Ajmer)		
	Rural	Urban
1	Gegal	Kishangarh
2	Gagwara	Beawar
3	Saradhana	Nasirabad
4	Ghoogra	Puskar

Introduction

The state of Rajasthan is situated in the north–west border sharing international border with Pakistan. This state has the biggest desert in the country. It has an unusual diversity in its entire forms– people, customs, culture, costumes, music, manners, dialects, cuisine and physiography. The land is endowed with invincible forts, magnificent palace havelis, rich culture and heritage, beauty and natural resources. The population of the state is more than 57 millions and is spread in an area of about 342,000 sq. km. The gender ratio is little less than national average (927) of about 921 females for 1000 males. Due to its proximity to national capital, the state is undergoing rapid urbanization, industrialization and overall infrastructural development during the last few years especially in the districts close to Delhi.

There are 6 medical colleges in the Govt. sector and all 27 Districts have District hospitals in the state. The overall health facilities are poor with lack of adequate infrastructure and manpower in remote rural areas. The number of dental surgeons in Govt. service is about 108 in the periphery. All District hospitals have at least one dental surgeon's post and about 70% of the Community Health Centres also have dental surgeons. Most of the Govt. Dental Services are suffering from lack of equipment, machinery and materials and they are unable to provide basic services to the patients. There are about 12 dental teaching institutions in the state; most of them were developed during last 5 years and under private control. Rajasthan has very poor health indicators and IMR and MMR and among the lowest in the country.

Profile of Ajmer District

It is spread on 8,481 sq.kms. (2.48% of the State) and is situated in the center of Rajasthan. Due to its proximity to the desert, the summer temperature may go upto 46.0 degrees Celsius. However, normal annual rainfall is only 60.18 cms. The district is divided into four sub–divisions viz., Ajmer, Beawar, Kekri and Kishangarh. The sub–divisions are further divided into six sub–divisions

Health and Family Welfare Service in the Ajmer district is managed by Dy. Director (Health) who is the district Health authority. The District Hospital, Sub Divisional Hospitals, CHC, PHC etc. all are under his control. There is also one medical college in the District HQ which is administered by The Principal of the institution. The office of Deputy Director is supported by Chief Medical and

Health Officer and supporting staff that is assisting in implementation of various National Health Programmes.

The District has one district hospital and three sub divisional hospitals in which 7 dental surgeons are posted. There are 3 more dental surgeons in community health centres in the district. The medical college also has dental wing with 5 dental surgeons.

Profile of the Study Population

Occupation

35–44 years

40.7% were housewives, 14.7% were non–skilled workers/farmers and approx. 30% were skilled workers/professional. More number of professionals/skilled workers/businessmen were found in urban than in rural area. (34.8% vs. 24.8%) Only 4.6% of these were women. Conversely, non–skilled workers were more in rural than urban area (20.9% vs. 8.5%)

65–74 years:

About 37.4% people of this group were not working, 40.6% were housewives, 11.7% were non–skilled worker/farmers and 7.9% were skilled workers/professional. Though the urban: rural difference was small (more skilled workers in urban and unskilled workers in rural area) there were striking gender differences. 15.2% men as compared to only 0.5% women were skilled workers.

Educational level

Parents of 12 years old:

Almost 40% of parents/guardians were non–respondents. Of the remaining, 36% had less than primary level, 34% had less than secondary special level and 30% had secondary special to graduation level education. Surprisingly, the higher level education was found more in rural than urban area (32.5 vs. 28.1% respectively) and more in women compared to men (40.9% vs. 13.6% respectively)

15 years

Only 10% of parents/guardians were non–respondents. Of the remaining, 21%

had less than primary level, 52% had less than secondary special level and 25.4% had secondary special to graduate level education.

35–44 years

In this group, a very large proportion of persons i.e. 57% had less than primary level education, 26% had less than secondary special level and only 17% had more than secondary special to graduation level education. Only 6% of rural population and 8% of women were in higher education group.

65–74 years

More than 83% of persons examined in this age group (95.4% women vs. 70.9% men) had less than primary level education. Higher than secondary special to graduate level comprised only 4.0% in this group. There were vast differences in urban: rural and male: female education level. Urban and males had much higher percentage of higher education level than rural and females (7.0 vs. 1.1% and 7.2 vs. 0.8 % respectively)

Results of Children (12 and 15 years)

Oral Health Perception

Status of teeth and gums

12 years

6.7% urban and 10% rural respondents rated health of their gums and teeth as excellent or very good, 77.8% urban and 70% rural rated it as good or average and 15.5% urban and 19.3% rural respondents rated it as poor or very poor. 11% males and 4.5% female respondents rated health of their gums and teeth as excellent or very good, 69.9% males and 81% females as good or average and 19% males and 15% female respondents rated it as poor or very poor.

15 years

6.4% urban and 10.6% rural respondents rated health of their gums and teeth as excellent or very good, 84.8% urban and 73% females as good or average and 8.7% males and 16% female respondents rated it as poor or very poor. 9.8% males and 7% female respondents rated health of their gums and teeth as excellent or very good, 76.6% males and 81% females as good or average and 13.7% males and 11% female respondents rated them as poor or very poor.

Most of the respondents in both the age groups rated the health of teeth and gums as Good or Average,

Pain in teeth during past one year

12 years

57.7% urban and 43% rural respondents reported of toothache occasionally. 53.2% males and 51.3% females reported of toothache occasionally.

15 years

44.5% urban and 49% rural respondents reported of toothache occasionally. 48.1% males and 45% female respondents reported of toothache occasionally.

50 % of the respondents of both the sexes and in both the populations reported of toothache and/or discomfort during the past 12 months.

Oral Health Seeking Behaviour

Reason of last visit to the dentist

12 years

Only 8.4% 12-year olds responded to this question. 57.6% urban and rural respondents had visited a dentist with the complaint of pain and 42.4% urban and rural respondents visited had visited for check up in the last 12 months. 45.8% males and 61% females visited dentist with the complain of pain in teeth or gums whereas 54.2 % males and 39% females had visited dentist for check up in last 12 months.

15 years

Only 10.8% 15-year olds responded to this question. 78% urban and rural respondents had visited a dentist with the complaint of pain and 21.9% urban and 23% rural respondents had visited dentist for check up in last 12 months. 44.9% males and 48% females had visited the dentist with the complaint of pain and 55.1 % males and 52% females had visited dentist for check up in last 12 months.

Approximately 86% of the respondents in both the populations and sexes visited the dentist when in pain. It was observed that though 50 % of the population had dental problems, only 11% had visited.

Visit to dentist in last one year

12 years

11.7% urban and 12.8% rural respondents visited dentist 1–3 times in last 12 months. 16.5% males and 5.8% female respondents visited a dentist 1–3 times in last 12 months.

15 years

8.1% urban and 12% rural respondents visited dentist 1–3 times in last 12 months. 11.2% males and 7% females visited dentist 1–3 times in last 12 months.

In spite of 50% of the respondents of both the sexes and in both the populations reporting of tooth ache and/or discomfort during past 12 months, it was seen that, only 24% had visited a dentist in the past one year.

Oral Health Practices

Frequency of teeth cleaning

12 years

58.3% urban respondents cleaned their teeth once a day, 41.5% twice or more times a day. 60.1% rural respondents cleaned their teeth once a day, 37.4% of the respondents twice or more times a day and 2.4% of the respondents cleaned less than once a day. 61.1% of males and 57.3% females cleaned their teeth once a day, 37.2% of males and 41.8% of females cleaned twice or more times a day, 1.5% of males and 0.9% of females cleaned less than once a day.

15 years

50% of the urban respondents cleaned their teeth once a day, 48% twice or more times a day and 1.9% cleaned not even once a day. 50% of the urban and 59.3% of rural respondents cleaned their teeth once/day.

59.3% of the rural respondents cleaned their teeth once a day, 40.3% twice or more times a day, whereas 0.6% of the respondents cleaned less than once a day. 58.5% of males and 50.8% females cleaned their teeth once day, 40.5% of males and 47.8% of females twice or more times a day, 1.1% of males and 1.3% of females cleaned less than once a day.

Approx. 97% of the total respondents cleaned their teeth at least once a day, though the number of respondents cleaning twice a day was also very significant in both the populations (Approx. 40%) and more so by females.

Use of tooth paste containing fluoride

12 years

27.3% urban and 25% female respondents used fluoridated tooth paste, whereas 21.7% urban and 23.5% rural respondents did not use tooth paste at all. 39.7% males and 43% females used fluoride tooth paste, whereas 24.1% males and 20% females did not use tooth paste for cleaning their teeth.

15 years

15.7% urban and 30% rural respondents used fluoridated tooth paste, whereas 11.4% urban and 17% rural respondents did not use tooth paste at all. 29.8% males and 18% females used fluoride tooth paste, whereas 16.8% males and 12% females did not use tooth paste for cleaning their teeth.

The use of fluoridated tooth paste was more in the rural population than in the urban. It was surprising to see that a large percentage of populations (Approx. 40%) did not use tooth paste at all.

Methods of teeth cleaning

12 years

91.8% urban and 99% rural respondents cleaned their teeth with tooth brush, 1.3% rural respondents used charcoal/chew sticks or Miswak to clean their teeth. 95.2% of males and 95.8% females cleaned their teeth with tooth brush, 1.6% of males used wooden or plastic tooth picks to clean their teeth.

15 years

95.5% of males and 97.5% females cleaned their teeth with tooth brush, 2.6% of males and 3% of females used wooden or plastic tooth picks to clean their teeth.

93.3% urban and 99.8% rural respondents cleaned their teeth with tooth brush, whereas 4.3% urban and 1.3% rural respondents used charcoal/chew sticks or Miswak to clean their teeth.

It was observed that irrespective of the sex, age and location, approximately all the respondents used tooth brush for cleaning their teeth. The use of Miswak, charcoal and chew sticks was almost negligible (Approx 1%)

Dietary Habits

12 and 15 year old children

Bakery products were consumed once or more than once a day by only 11% and 5% of the 12 and 15 year old children respectively. On an average about 38% of the children in both age groups reported use of candies. Fresh fruit consumption was relatively low: only 32% and 13% of 12 and 15 years consumed fresh fruits. An average of 6% of both the age groups was chewing gums. There were no significant differences in the eating habits between male: female and urban: rural population in both the age groups.

Tobacco Habits

Smoking cigarettes, cigars or pipe

12 years

Only 225 respondents responded to this question, out of which 92 smoked occasionally, whereas 133 were regular smokers. It was observed that more of the males (224) were smoking than the females (1). There were no significant differences between urban: rural population.

15 years

In this age group, 23 respondents responded, out of which 15 smoked occasionally, and 8 regularly. All the smokers were males in the rural area.

Chewing tobacco or snuff

12 years

Of the studied population, 179 respondents responded; of which 15 chewed tobacco occasionally, whereas 164 were regular chewers. It was observed that more of the males were chewing tobacco than the females.

15 years

In this age group, 136 respondents responded, out of which 31 chewed tobacco

occasionally, whereas 105 chewed regularly. It was observed that more of the males were chewing tobacco than the females and more in the urban than in the rural areas.

Results for Adults (35–44 and 65–74 years)

Oral Health Perception

Self-reported number of natural teeth present

35 – 44 years

As per self-reported number of natural teeth present, 99% urban and 97% rural respondents had more than 20 natural teeth present, 0.8% urban and 1.8% rural respondents had 10–19 natural teeth. 98% males and females had more than 20 natural teeth present, 1.3% of males and females had 10–19 natural teeth present, and 0.5% males and 0.3% females were completely edentulous

65 – 74 years

65% urban and 56% rural respondents had more than 20 natural teeth present, 10% urban and 14% rural respondents had 10–19 natural teeth. 57% males and 63% females had more than 20 natural teeth present, 12% of males and females had 10–19 natural teeth present. 17.9% males and 14.6% females were completely edentulous.

Pain in teeth during past one year

35 – 44 years

35% urban and 40% rural respondents complained of pain in teeth and gums in the past 12 months. 32% of males and 42% females complained of pain in teeth and gums in the past 12 months.

65 – 74 years

43% urban and 45% rural respondents complained of pain in teeth and gums in the past 12 months. 45% of males and 43% females complained of pain in teeth and gums in the past 12 months.

Use of removable prosthesis

35–44 years

1.3% urban and 1.5% rural respondents had a partial denture. 1.8 % of males and 1% of females had a partial denture, 0.5% of males had a full upper denture and 0.5% of males had a full lower denture.

65–74 years

3.1% urban and 1.6% rural respondents had a partial denture, 5% urban and 2% rural respondents had full upper and lower dentures. 1.90% of males and 3% of females had a partial denture, 5.4% of males and 2.2% of females had a full upper denture, and 5.1% of males and 2.2% of females had a full lower denture.

Status of teeth and gums

35–44 years

2.3% urban and 0.8% rural respondents rated health of their gums and teeth as excellent or very good, 83% urban and 90% rural as good or average and 15% urban and 9.2% rural respondents rated them as poor or very poor. 2% male and 3.4% female respondents rated health of their gums and teeth as excellent or very good, 87% males and 86% females as good or average and 11% males and 13% female respondents rated them as poor or very poor.

65 – 74 years

2.2% urban and 3% rural respondents rated health of their gums and teeth as excellent or very good, 68% urban and 53% rural as good or average and 31% urban and 45% rural respondents rated them as poor or very poor. 3.3% males and 1.7% female respondents rated health of their gums and teeth as excellent or very good, 61% males and 59% females as good or average and 36% males and 40% female respondents rated them as poor or very poor.

Oral Health Behavior

Frequency of teeth cleaning

35 – 44 years

62.7% of urban and 46.5% of the rural respondents cleaned their teeth once a day, 35.5% urban and 42% of the rural respondents cleaned their teeth twice or

more times a day, and 1.8% urban and 10% rural respondents cleaned their teeth not even once a day. 56% of males and 53.2% females cleaned their teeth once a day, 35.9% of males and 41.7% of females cleaned their teeth twice or more times a day, 7.9% of males and 4% females were not cleaning their teeth daily.

65–74 years

50% urban and 35% rural respondents cleaned their teeth once a day, 33.8% urban and 27.2% rural respondents cleaned their teeth twice or more times a day, and 15% urban and 36% rural respondents did not clean their teeth even once a day. 40.8% of males and 43.9% females cleaned their teeth once a day, 30.9% of males and 30.5% of females cleaned their teeth twice or more times a day, 26.3% of males and 24.6% of females reported brushing not even once a day.

Methods of teeth cleaning

35 – 44 years

75% urban and 62% rural respondents used a tooth brush. 68% of males and 68.5% females used a tooth brush for cleaning their teeth.

65 – 74 years

42 % urban and 23% rural respondents used a tooth brush, 1.2% urban and 2.7% rural respondents used chew sticks or Miswak to clean their teeth. 39% of males and 25% females used a tooth brush, 1.2% of males and 2.7% of females used chew sticks or Miswak to clean their teeth.

Use of tooth paste containing fluoride

35 – 44 years

Only 36.3% subjects responded to this question. Of these 18% urban and 2.2% rural respondents used fluoride tooth paste, whereas 18% urban and 5% rural respondents did not use tooth paste at all. 10% of males and 6% females used fluoride tooth paste, whereas 7% of males and 13% of females did not use tooth paste for cleaning their teeth.

65–74 years

Only 47% subjects responded to this question. 6% urban and 1% rural respondents used fluoride tooth paste, whereas 38% urban and rural respondents did not use tooth paste at all. 5% of males and 1.6% females used fluoride tooth paste, whereas 35% of males and 42% of females did not use tooth paste for cleaning their teeth.

Oral Health Seeking Behaviour

Last visit to a dentist

35–44 years – 74% of the respondents had never received any dental care, 13% of the respondents had seen a dentist more than five years ago and another 3.1% had visited a dentist more than 2 years ago. 4.2% had visited a dentist more than one year ago and 6% of the respondents had visited a dentist in the past one year. The difference between the urban and rural populations not receiving the dental care was significant (84 vs. 64), but there was no significant difference between male and female population.

65–74 years – In this age group, 76% of the respondents had never received any dental care, 16% had visited a dentist more than 5 years ago, 4% had visited more than 2 years ago, 1.2% had visited more than one year ago and 3% had visited a dentist in the past one year. The difference between the urban and rural populations not receiving the dental care was significant (64 vs. 88). There was no significant difference between male and female populations.

Dietary habits

35–44 years and 65– 74 years

Among the adult and geriatric age groups, the use of bakery product was popular and about 52% of 35–44 year olds and 77% of the 65–74 year olds were found to be having habit of using bakery foods daily. Once or more than once use of candies and sweets was reported by more than 90% of the respondents both age group. About 27% of the adults and 48% of the geriatric population used colas and beverages once of more times a day. There were no significant differences in dietary habits among males, females and urban: rural population in both age groups.

Tobacco Habits

Smoking cigarettes, cigars or pipe

35 –44 years

Of the studied population, 0.4% respondents were occasional smokers whereas 40% were regular smokers. 44.5% respondents in urban area and 33.4% in rural area were regular smokers. 51.9% of males and 27.5% of females were regular smokers.

65 – 74 years

In this age group, 0.5% respondents were occasional smokers whereas 31% were regular smokers.

Chew tobacco or snuff

35 –44 years

Of the studied population, 1% were occasional tobacco chewers whereas 27% were regular tobacco chewers. There were no significant differences between urban: rural population. 41.5% males and 9.8% females were regular tobacco chewers.

65 – 74 years

In this age group, 1% were occasional tobacco chewers whereas 23% were regular tobacco chewers. There were no significant differences between urban: rural population. 33.4% males and 12% females were regular tobacco chewers.

Oral Health Status

Extra oral appearance

12 years

In 7.4% extra oral lesions were recorded. Most of these were in the form of ulcer/erosion/fissures. In 1.2%, enlarged lymph nodes of head and neck region was found.

15 years

Only 3.6% had few ulcers/erosions in the extra-oral area.

35–44 years

In this group, except 0.3% who had enlarged cervical lymph nodes, no other abnormality was detected

65–74 years

No abnormal findings were recorded except some minor ulceration/erosion in 0.3%

Oral mucosal condition

12 years

No pathology was recorded in this group.

15 years

Only 1.8% of examined subjects had intra oral ulcers.

35–44 years

95% had normal mucosa. 4% had oral ulcerations, 0.4% had leukoplakia and 0.3% had candidiasis. No case of oral cancer was seen in the examined population.

65–74 years

Only 2.3% had minor intra oral ulcers and 0.4% had candidiasis. Surprisingly, no case of leukoplakia/ erythroplakia or oral cancer was found in this group.

Denture wear

35–44 years

It was very low, only 0.6% and 0.1% were wearing partial denture and complete denture. There were only very minor differences in urban: rural and male: female population with regard to denture wear.

65–74 years

2.6% were wearing partial dentures and only 1.5% were wearing complete dentures. In this group, more in urban area and more % of men were wearing dentures compared to those in rural area and women (5.7 vs. 1.7% and 5.9 vs. 2.3% respectively.).

Dentition status

12 years

In this group, the striking finding was that though 53.7% had decayed teeth, none had filled teeth, indicating total lack of service availability/utilization. There was no urban: rural difference but more girls had caries compared to boys (53.5 vs. 39%). A total of 53.8% had caries experience since only 0.5 % had missing teeth. Children with more than 4 DMFT constituted approx. 12% of the examined population.

15 years

More than 55% in this group had decayed teeth. There was equal distribution in urban and rural area and there was no gender difference. The filled teeth were found only in 0.1% and missing teeth in 0.5%. Overall caries experience was 55.4% but those with more than 4 DMFT constituted 20% of the examined subjected.

35–44 years

Decayed and missing teeth increased in this group 60% had decayed teeth and 19% had missing teeth. More persons in rural area had decayed teeth compared to urban (70.6 vs. 49.4%) and more women than men had carious teeth (66.7 vs. 53.4%). Missing teeth were also more in women compared to men (21.2 vs. 16.7%). Total caries experience was found to be 66.5% and more than 4 DMFT was recorded in 28% of studied population.

65–74 years

Caries showed declining trend with increase in age, forty one percent had decayed teeth. There was moderate difference between urban: rural and male: female population. Rural persons and women had more caries than men (43.2 vs. 39.2 and 44.7 vs. 37.7% respectively) Total caries experience was recorded in 54% and those with more than 4 DMFT in 27.4%

Average DMFT in only caries affected subjects

12 years

The average DMFT index was 2.6; higher in urban and in boys compared to rural and girl population (2.8 Vs. 2.3 and 2.6 vs. 2.5), though the difference was small.

15 years

The average DMFT score of 3.2 was found. In this age group, rural children had higher DMFT score compared to urban children (3.5 vs. 2.8). There was no sex difference in DMFT score.

35–44 years

DMFT score was 3.7. Higher score was in rural compared to urban group (3.8 vs. 3.5).

65–74 years

The DMFT score was 4.5. Higher DMFT score was found in urban than rural and in males than in females (4.8 vs. 4.2 and 4.9 vs. 4.1 respectively)

Periodontal status

12 years

Bleeding was recorded in 35% which was slightly higher in rural compared to urban children (38.8 vs. 31.8%)

15 years

The gingival status was similar to that found in 12 years group – 34.6% children had bleeding, higher percentage of rural children and boys more than girls had bleeding gums (37% rural vs. 32% urban and 37.6% boys vs. 31.6% girls)

35–44 years

Bleeding was found in 72% of the studied population, which was markedly more in rural than urban population (85.6 vs. 58%), shallow pockets were found in 48% and deep pockets in 2%. Overall, higher percentage of rural persons had periodontal pockets compared to urban (66% vs. 36%).

Loss of Attachment

35–44 years

Very low values for loss of attachment were recorded in this population. Loss of attachment of 4–5 mm in 2.6%, more than 6 mm in 0.1% and excluded in 5.7% was recorded.

65–74 years:

Loss of attachment of 4–5 mm was found in 7.6% and more than 6 mm in 0.5%, while in 47.7% excluded recordings were made. Loss of attachment in both the age groups were recorded in higher percentage of rural than urban population – 3.5 vs. 2.1 in 35–44 years and 10.8 vs. 5.4% in 65–74 years group.

Fluorosis

12 years

Questionable to very mild fluorosis was recorded in 29.4%, mild to moderate in 6% and severe fluorosis in 0.6% was recorded. Fluorosis, mild, moderate and severe was more in urban than in rural areas (9.4 vs. 4%)

15 years

Questionable to very mild fluorosis in 24.8%, mild to moderate in 8.4% and severe fluorosis in 0.6% was recorded. Again the same urban: rural difference was noted; more in urban than in rural area (13 vs. 5.3%).

35–44 years

Questionable to very mild fluorosis was recorded in 4% and mild to moderate in 2%. The same urban: rural difference was noted; more in urban than in rural area (2.6 vs. 1.3%)

65–74 years

Evidence of fluorosis decreased in this group. Questionable to very mild in 0.5% , mild to moderate in 0.8% and severe in 0.3% fluorosis was higher in urban as compared to rural population.(1.4 vs. 0.6 %).

Summary

The desert state of Rajasthan is situated near north–western border of the country. This state is rich in heritage and culture but the health situation of this state is quite poor due to local conditions and natural calamities affecting the economy drastically. The gender ratio is lower than the national average and the female literacy is one of the lowest in the country (44%). The major occupation of the people is only farming and industrial growth is very slow. A

significant portion of this state fall in the fluoride belt and the some parts of the state skeletal fluorosis is crippling the lives of the people. However, only a minor part of the selected district is considered as high fluoride area.

The perception about own oral health is average or below in about 70% of children and 60% of adults. The oral health service seeking behaviour is poor with an average of 88% of children and 75% of adults have never visited a dentist in life. Despite the fact, that about 30% of children and 40% of adults reported with regular occasional dental pain during last 12 months.

The prevalence of dental caries was found to be in the range of 55% for children, 66% for adults and 54% in elderly. The lower prevalence in elderly may be explained with loss of multiple teeth at that age. The DMFT scores were also within normal range of 1.6 for children 2.45 for adults. About 90% of children and 85% of adults and geriatric age group people reported that they are cleaning their teeth at least once a day. The regular use of bakery sweets was reported by only 8% of schoolchildren and 60% of adults, while other sweet consumption was recored in 40% of children and 97% of adults. The use of cola and beverages was again very low in children (7%) and adults (34%). Most of the children reported use of tooth brush for oral hygiene (98%) but only 68% of adults and 32% of elderly use toothbrush.

As expected prevalence of fluorosis was very high to the tune of about 15.5% in children and 2.3% among adults. Gum bleeding was recorded in about 34% of children and 70% of adults. The attachment loss of more than 3 mm was seen in only 29% of children and 74% of elderly.

There were 38% regular smokers among adults and 23% among elderly. The tobacco chewing practices were reported in 16% of children and about 26% of adults and elderly. The strange finding was that precancerous conditions and sub mucous fibrosis reported in only 1% of subjects.

Overall, this state requires urgent attention towards tobacco cessation and control in children. A makeover is required in oral health care services.