

DMS • 6: All new !

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Is it still relevant for dental students to learn how to make complete dentures and bend clasps for interim prosthetics as the first part of their preclinical training? And is it still appropriate to stop carrying out prophylaxis in kindergartens and schools because caries in children has been conquered?

It would certainly be interesting to hear the answers to these deliberately pointed questions from representatives of university teaching or the public health sector. A key contribution to such discussions will be made by the 6th German Oral Health Study (DMS • 6), a study conducted by the Institute of German Dentists (IDZ) with the support of other scientists, and now published. The DMS • 6 is intended to kick-start the discourse on the needs-based development of dental care in Germany.

The new German Oral Health Study DMS • 6

With this supplement of Quintessence International, you are holding the latest research findings on the oral health situation in Germany. We present a comprehensive picture of the oral health profile of the population in Germany – from early mixed dentition to dentition in the elderly population. We, the IDZ and 12 university professors from the German-speaking European region, dedicate our professional lives to dental research and education. These experts cover the most important fields of dentistry, including cariology, orthodontics, pediatric dentistry, oral medicine, periodontology, dental prosthetics, and implantology, as well as geriatric dentistry. A particular honor for all of us is that this important study is funded solely by the German dental profession. We are deeply grateful to all dentists in Germany. We also thank the German Dental Association (Bundeszahnärztekammer) and the National Association of Statutory Health Insurance Dentists (Kassenzahnärztliche Bundesvereinigung) for their valuable sponsorship and ongoing support. The group of dental experts has been significantly expanded to include researchers and university professors who explore the connections with general medicine, nutritional and behavioral sciences, health economics, social sciences, quality of life research, medical geography, migration, prevention, social medicine,

and health services research, making the DMS • 6 a best-practice example of modern social epidemiology.

We also invited all relevant German dental societies to participate in the study planning. Therefore, the DMS • 6 is the most comprehensive oral epidemiology study ever conducted in Germany. Moreover, in addition to a population-representative sample that can be used to assess the current prevalence of oral diseases in the population, participants from the DMS V study were also reexamined for the first time 8 years after their first examination as part of a panel. The development from a purely cross-sectional study is a milestone. Due to the additional longitudinal component, it is now possible to address questions about causal relationships scientifically: For example, what effect does regular participation in individualized prevention have from childhood through adulthood? How are so-called “chalky teeth” (hypomineralization) treated in dental practice? What is the significance of laboratory-made restorations in the age of (self-)adhesive dentistry?

The impressive effectiveness of systematic prevention-oriented dental life-long care are clearly seen in the development of caries in children since the introduction of group and individual prophylaxis in the late 1980s. This paradigm shift has reduced the caries burden in this age group by 90%. But how long does prevention that starts in (early) childhood remain effective? Answers can be derived from the DMS • 6, in which we had the unique opportunity to study the generation that was involved in group and individual prophylaxis during their childhood, now as adults. For example, we found that that fissure sealants can last into adulthood, that tooth loss begins only in the second half of life, and that the prevalence of edentulism has been in a virtual free fall for the past 20 years. These are morbidity dynamics that few would have dreamed of back then. Probably no other chronic disease has seen such large-scale prevention success as dental caries, the most common chronic disease in humans. At the same time, initial scientific data from Andalusia show how quickly the disease returns once caries prevention programs, after their great success, are reduced under the assumption that they are no longer needed.



The significant decline in caries and tooth loss does not, however, imply a diminished role for the dental profession. In DMS V, it was already shown that the treatment burden shifts to older age as a result of morbidity compression. With increasing tooth retention, this process is further intensified: the more teeth that remain in the mouth, the more teeth can or will develop problems as people age (teeth at risk concept).

From a socio-medical perspective, it is noteworthy that the rapid decline in caries in children appears to have stalled. It is conceivable that the COVID-19 pandemic and the resulting disruption of group prophylaxis may have played a role, or it could be a reflection of a changing social structure. Perhaps the law of diminishing marginal utility, when applied to dentistry, can help explain this: The efficacy of current efforts to prevent caries in children may have reached its maximum.

From the perspective of health services research, it will be interesting to observe how effective new population-wide preventive measures for the avoidance of early childhood caries will be after inclusion in the service catalog of statutory health insurance, as individual and group prophylaxis in childhood and adolescence has already influenced caries development in Germany robustly.

This supplement from Quintessence International summarizes the key results of the DMS • 6 in concise thematic units. If you would like to know more, you can access additional results and analyses through the DMS • 6 online portal: <https://www.Deutsche-Mundgesundheitsstudie.de>.

We hope that this will help pass the time until the next wave of publications on the additional longitudinal results in spring 2026!

With best regards

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