

Iechyd y geg ymhlith plant 5 oed yng Nghymru 2024/25

Oral health of 5-year-old children in Wales in 2024/25

Swyddogaeth Gwybodaeth Iechyd Geneuol, Tîm Iechyd Deintyddol y Cyhoedd, Iechyd Cyhoeddus Cymru
Oral Health Intelligence function, Dental Public Health Team, Public Health Wales

Ionawr 2026

January 2026

Ein cenhadaeth

Ni yw Iechyd Cyhoeddus Cymru. Ni yw sefydliad iechyd cyhoeddus cenedlaethol Cymru. Rydym yn bodoli i helpu pawb yng Nghymru i fyw bywydau hirach, iachach

Gyda'n partneriaid, ein nod yw cynyddu disgwyliad oes iach, gwella iechyd a llesiant, a lleihau anghydraddoldebau i bawb yng Nghymru, nawr ac ar gyfer cenedlaethau'r dyfodol

Gyda'i gilydd, mae ein timau'n gweithio i atal clefyd, diogelu iechyd, darparu arweinyddiaeth systemau, gwasanaethau arbenigol ac arbenigedd iechyd cyhoeddus

Ni yw'r brif ffynhonnell o wybodaeth, ymchwil ac arloesedd iechyd cyhoeddus, i helpu pawb yng Nghymru i fyw bywydau iachach

Gweithio gyda'n gilydd ar gyfer Cymru iachach

Our Mission

We are Public Health Wales. We are the national public health organisation for Wales. We exist to help all people in Wales live longer, healthier lives

With our partners, we aim to increase healthy life expectancy, improve health and wellbeing, and reduce inequalities for everyone in Wales, now and for future generations

Together, our teams work to prevent disease, protect health, provide system leadership, specialist services and public health expertise

We are the primary source of public health information, research and innovation, to help everyone in Wales live healthier lives

Working together for a healthier Wales

Ein gweledigaeth

Erbyn 2035, byddwn wedi cyflawni dyfodol iachach i Gymru. Rydym yn gweithio tuag at Gymru lle mae pobl yn byw bywydau hirach, iachach a lle mae gan bawb yng Nghymru fynediad teg a chyfartal at y pethau sy'n arwain at iechyd a llesiant da

Our Vision

By 2035, we will have achieved a healthier future for Wales. We are working towards a Wales where people live longer, healthier lives and where all people in Wales have fair and equal access to the things that lead to good health and well-being

Cyflwyniad

Dyma grynodeb o arolygiad Rhaglen Epidemiolegol Deintyddol GIG Cymru o blant blwyddyn ysgol un (5 oed) a gynhaliwyd ledled Cymru yn 2024-25

Casglwyd data gan dimau Gwasanaeth Deintyddol Cymunedol y GIG ym mhob Bwrdd Iechyd Lleol a'u dadansoddi gan Uned Gwybodaeth Iechyd Geneuol Cymru ym Mhrifysgol Caerdydd ar y cyd â Gwybodaeth Iechyd y Geg yn Iechyd Cyhoeddus Cymru

Ceir rhagor o wybodaeth yn Adroddiad Technegol 'Darlun o Iechyd y Geg 2026', a gyhoeddwyd gan Uned Gwybodaeth Iechyd Geneuol Cymru, Prifysgol Caerdydd

Mae arolygon o blant 5 oed (blwyddyn ysgol un) yn darparu data manwl ar anghenion iechyd y geg ar gyfer gwyliadwriaeth, cynllunio gwasanaethau a gwerthuso.

Introduction

This is a summary of the NHS Wales Dental Epidemiological Programme's inspection of school year one (5-year-old) children undertaken across Wales in 2024-25

Data was collected by the NHS Community Dental Service teams within each Local Health Board and analysed by the Welsh Oral Health Information Unit at Cardiff University in conjunction with Oral Health Intelligence at Public Health Wales

Further information can be found in the Technical Report 'Picture of Oral Health 2026', published by the Welsh Oral Health Information Unit, Cardiff University

Surveys of 5-year-old (school year one) children provide detailed data on oral health need for surveillance, service planning and evaluation

Methodoleg

Yn debyg i'r blynyddoedd blaenorol, dilynodd yr arolwg ganllawiau'r Gymdeithas Brydeinig ar gyfer Astudio Deintyddiaeth Gymunedol.

Amcanion arolygiad Rhaglen Epidemioleg Ddeintyddol GIG Cymru o blant blwyddyn ysgol un (5 oed):

1-Cofnodi data, o sampl o blant blwyddyn ysgol un yng Nghymru yn y tymhorau ysgol, Gaeaf 2024/2025 a Gwanwyn 2025;

2-Cael amcangyfrifon dilys o gyffredinrwydd a difrifoldeb pydredd dannedd plant blwyddyn ysgol un i'w cymharu â'r arolygon blaenorol

Cydnabyddiaethau: Hoffai Iechyd Cyhoeddus Cymru a Phrifysgol Caerdydd ddiolch i'r holl ysgolion a gytunodd i gymryd rhan a hwyluso'r arolwg. Yn yr un modd, hoffem ddiolch hefyd i'r timau Gwasanaethau Deintyddol Cymunedol ym mhob Bwrdd Iechyd am eu holl waith caled yn cysylltu â'r ysgolion a chasglu'r data

Methodology

As in previous years, the survey followed the guidance from the British Association for the Study of Community Dentistry

The objectives of the NHS Dental Epidemiology Programme for Wales inspection of school year one (5-year-old) children:

1-Record data, from a sample of school year one children in Wales in the school terms, Winter 2024/2025 and Spring 2025;

2-Obtain valid estimates of caries prevalence and severity in school year one children to compare to previous surveys

Acknowledgements: Public Health Wales and Cardiff University would like to extend our gratitude to all the schools that agreed to participate and facilitate the survey. Equally, we would also like to thank the Community Dental Service teams in each Health Board for all their hard work in contacting the schools and collecting the data

Crynodeb

Archwiliwyd 8,526 o blant o 655 o ysgolion gwladol prif ffrwd, sy'n cynrychioli 27.4% o gyfanswm poblogaeth blwyddyn ysgol un mewn ysgolion gwladol prif ffrwd.

Mesurwyd dau fesur o brofiad pydredd dannedd: cyffredinrwydd a difrifoldeb

Mae cyffredinrwydd yn cofnodi faint o blant oedd â dannedd wedi'u pydru, ar goll neu wedi'u llenwi. Mae difrifoldeb yn disgrifio nifer cyfartalog y dannedd yr effeithiwyd arnynt gan bydredd dannedd fesul plentyn

Cwblhawyd cwestiynau Ansawdd Bywyd yn ymwneud ag Iechyd y Geg gan 7,988 o blant

Dylid trin data o Fae Abertawe a Chwm Taf Morgannwg yn ofalus oherwydd y newidiadau a wnaed i ffiniau'r byrddau iechyd hyn yn 2019.

Summary

8,526 children from 655 state-maintained mainstream schools were examined, which represents 27.4% of the total school year one population in mainstream state-maintained schools

Two measures of dental caries experience were measured: prevalence and severity

Prevalence records how many children had decayed, missing or filled teeth, whilst severity describes the average number of teeth affected by tooth decay per child

Oral Health related Quality of Life questions were completed by 7,988 children

Data from Swansea Bay and Cwm Taf Morgannwg should be treated with caution due to the repatriation of Bridgend County Council

Crynodeb

Yn 2007/8, roedd bron i un o bob dau blentyn wedi cael profiad o bydredd a byddai dau ddant wedi cael eu heffeithio. Yn 2024/25, mae hyn wedi gostwng i bron i un o bob pedwar plentyn gydag un dant wedi pydru.

At ei gilydd, roedd gostyngiad ystadegol arwyddocaol o ran cyffredinrwydd a difrifoldeb pydredd dannedd rhwng 2022/23 a 2024/25. Effeithiwyd ar dros dri dant plant â chlefyd

Effeithiwyd ar iechyd y geg bron i un o bob pum plentyn a samplwyd

Mae anghydraddoldebau iechyd y geg yn parhau (h.y. mae'r rhai o gefndiroedd tlotach yn profi mwy o afiechyd). Nid yw mynegai llethr o anghydraddoldeb wedi newid yn sylweddol (2007/8 i 2023/24)

Summary

In 2007/8, approaching one in two children had decay experience and two teeth would be affected. In 2024/25, this has reduced to approaching one in four children with one carious teeth

Overall, there was a statistically significant reduction in the prevalence and severity of dental caries across from 2022/23 to 2024/25. Children with disease had over three teeth affected

Oral health impacted approaching one in every five children sampled

Oral health inequalities remain (i.e. those from poorer backgrounds experience more disease). The slope index of inequality has not significantly changed (2007/8 to 2023/24)

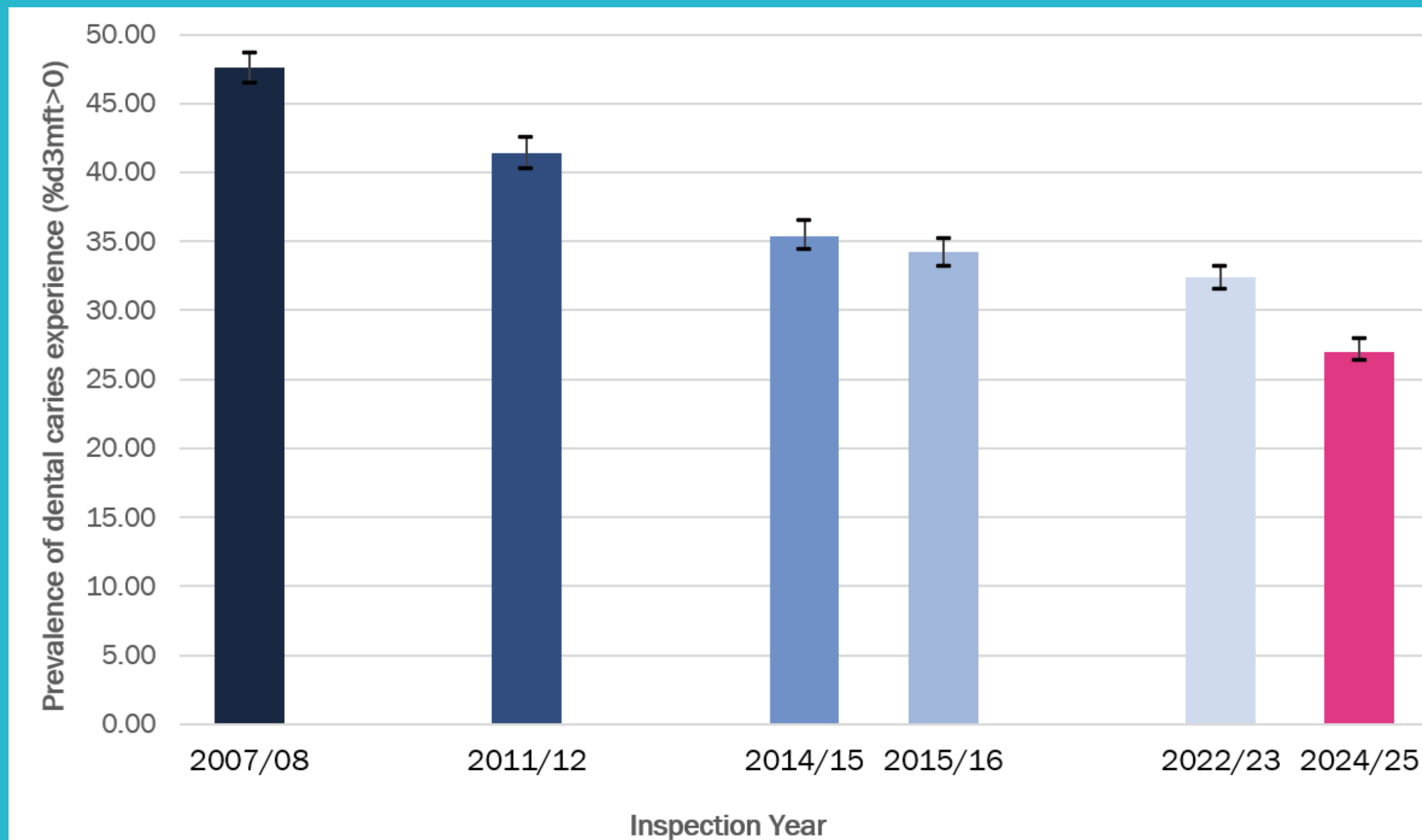
Cyffredinrwydd pydredd dannedd Prevalence of dental caries

Mae **cyffredinrwydd** pydredd dannedd wedi gostwng ymhellach yn 2024/25

Roedd y gyfradd o ran profiad o bydredd dannedd yn 27.2% (95%CI 26.3-28.0) **gostyngiad ystadegol arwyddocaol** o'i gymharu â 2022/23 (32.4% (95%CI 31.5-33.2))

The **prevalence** of dental caries has reduced further in 2024/25

Dental caries experience was 27.2% (95%CI 26.3-28.0) **a statistically significant decrease** from 2022/23 (32.4% (95%CI 31.5-33.2))



Difrifoldeb pydredd dannedd Severity of dental caries

Mae **difrifoldeb** y clefyd (nifer y plant â d3mft) wedi gostwng ymhellach yn 2024/25

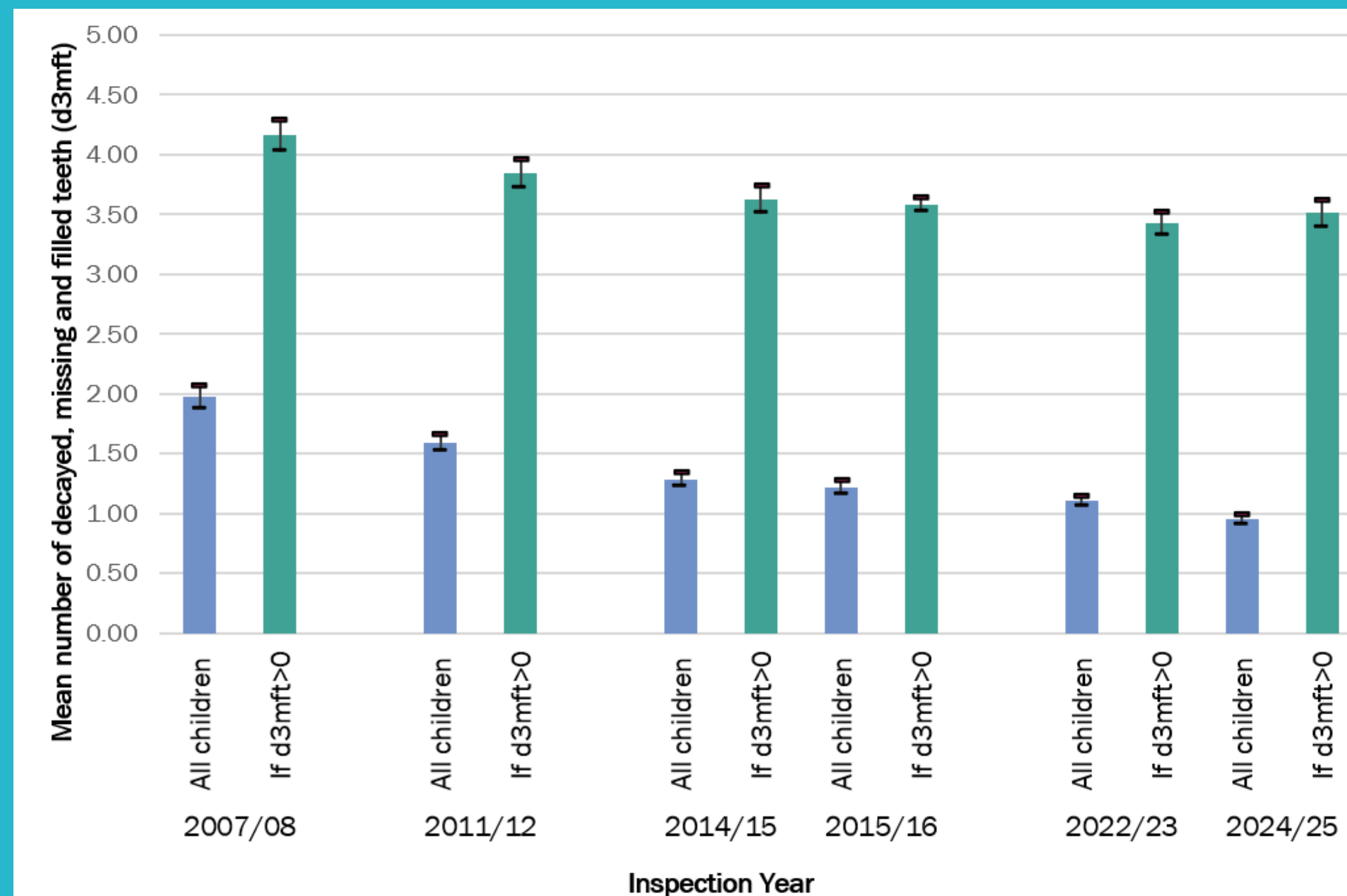
Roedd y gyfradd o ran **difrifoldeb** pydredd dannedd yn 0.95 ar gyfer pob plentyn (95%CI 0.91-0.99), sy'n ostyngiad ystadegol arwyddocaol o'i gymharu â 2022/23 (1.11 (95%CI 1.07-1.15))

Fodd bynnag, pan fo gan blant glefyd, maent yn profi nifer uchel o ddannedd wedi pydru, ar goll neu wedi'u llenwi 3.51 (95%CI 3.39-3.62)

Disease **severity** (number of children with d3mft) has reduced further in 2024/25

Dental caries **severity** was 0.95 for all children (95%CI 0.91-0.99) a statistically significant decrease on from 2022/23 (1.11 (95%CI 1.07-1.15))

However, when children have disease, they experience a high number of decayed, missing or filled teeth 3.51 (95%CI 3.39-3.62)



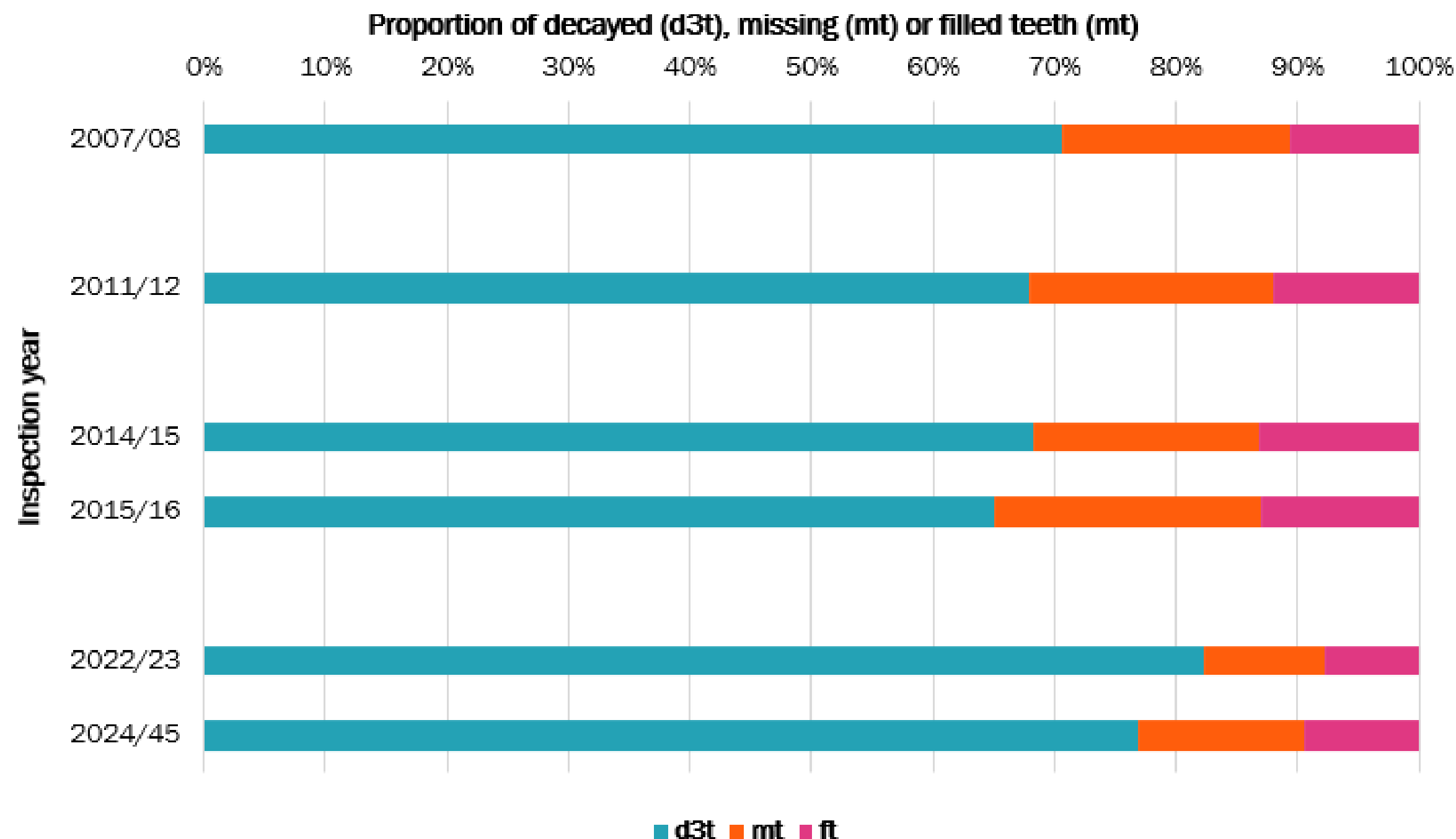
Cyfansoddiad d3mft Composition of d3mft

Pydredd dannedd heb ei drin yw'r elfen fwyaf cyffredin o d3mft

Fel cyfran o gyfanswm y d3mft, mae'r elfen hon wedi cynyddu yn arolygon 2022/23 a 2024/25 (ar ôl COVID)

Untreated dental caries is the most common element of d3mft

As a proportion of total d3mft, this element has increased in the 2022/23 and 2024/25 surveys (post-COVID)



Ansawdd bywyd Quality of Life

Ymhlith yr holl rieni a samplwyd, nododd 17.7% effaith ar ansawdd bywyd eu plentyn. Yn y grŵp hwn, poen oedd yr effaith fwyaf cyffredin (10.0%)

Ymhlith rhieni plant â d3mft, nododd 38.7% o rieni effaith ar ansawdd bywyd eu plentyn. Yn y grŵp hwn, poen oedd yr effaith fwyaf cyffredin (23.8%)

Across all parents sampled, 17.7% reported an impact on their child's quality of life. In this group, pain was the most common impact (10.0%)

Across parents of children with d3mft, 38.7% of parents reported an impact on their child's quality of life. In this group, pain was the most common impact (23.8%)

ECOHIS oral health-related quality of life impacts		Prevalence of one or more oral health-related quality of life impacts over the child's life (%)		
		All children (%) (n=7,988)	In those without dental caries experience (d3mft=0) (%) (n=5,839)	In those with dental caries experience (d3mft>0) (%) (n=2,149)
Child impacts	Pain	10.0	5.2	23.8
	Difficulty drinking hot or cold beverages	1.8	0.6	5.2
	Difficulty eating some foods	3.9	1.2	11.5
	Difficulty pronouncing any words	1.9	1.2	3.7
	Missed preschool, day-care or school	2.1	0.6	6.5
	Had trouble sleeping	2.2	0.8	6.4
	Been irritable or frustrated	3.0	1.2	8.2
	Avoided smiling or laughing	0.9	0.5	2.1
	Avoided talking	0.4	0.2	1.2
Family impacts	Been upset	4.0	1.4	11.6
	Felt guilty	5.8	2.2	16.4
	Taken time off from work	3.0	1.2	8.0
	Financial impact on the family	1.1	0.4	3.4
ANY DOMAIN		17.7	10.1	38.7

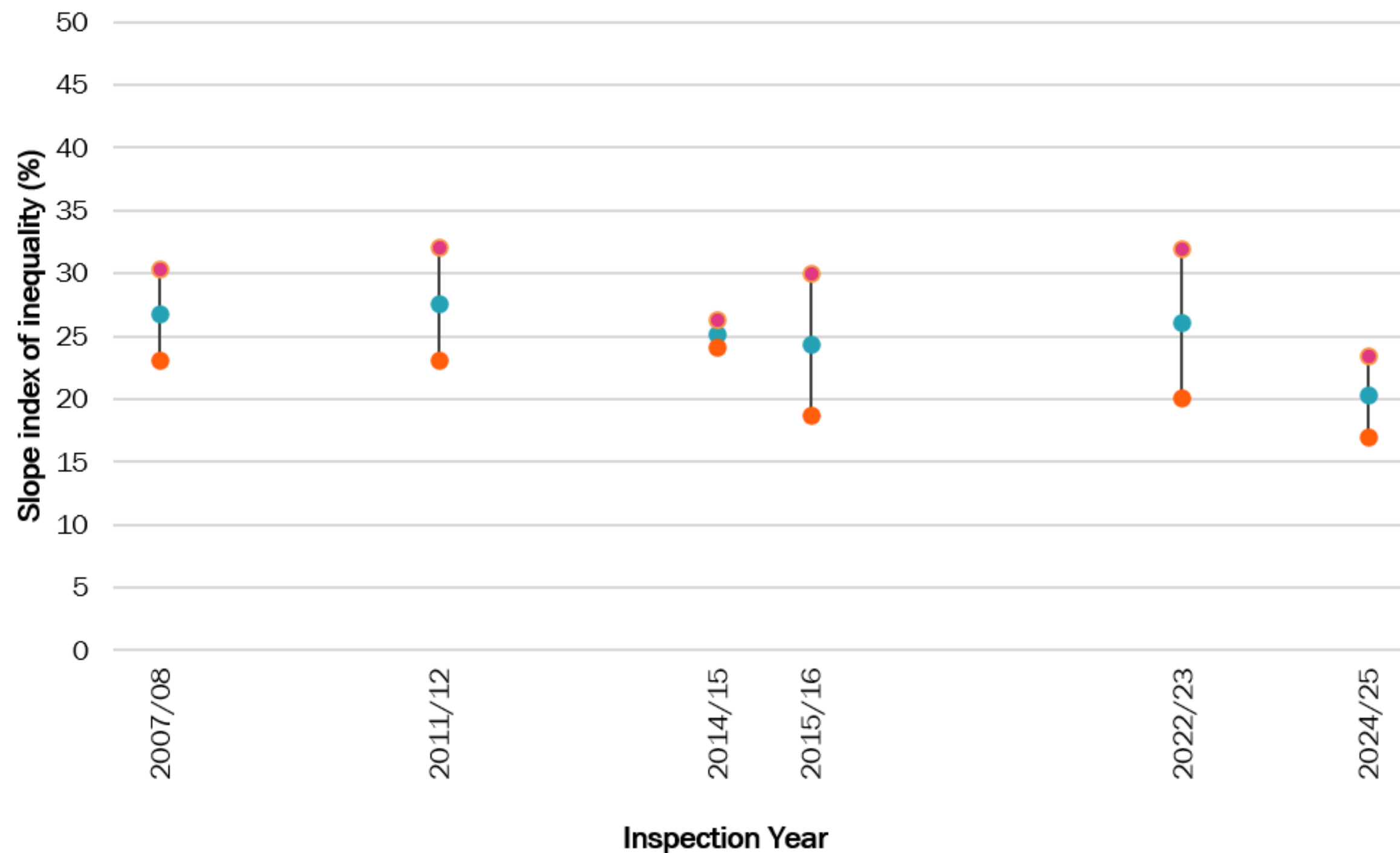
Anghydraddoldeb Inequality

Roedd y plant o'r cymunedau mwyaf difreintiedig yn fwy tebygol o brofi pydredd dannedd a chael mwy o ddannedd sydd wedi cael eu heffeithio. Ers arolwg 2022/23 mae cyffredinrwydd pydredd dannedd wedi gostwng ym mhedwar cwintel mwyaf difreintiedig WIMD 2019

Nid yw'r mynegai llethr o anghydraddoldeb yn seiliedig ar gyffredinrwydd pydredd dannedd wedi newid yn sylweddol rhwng 2007/08 a 2024/25

Children from the most deprived communities were more likely to experience dental caries and have more teeth affected. Since the 2022/23 survey the prevalence of dental caries has fallen in the four most deprived WIMD 2019 quintiles

Slope index of inequality based on caries prevalence has not significantly changed between 2007/08 and 2024/25



Byrddau Iechyd Health Boards

Gostyngiad o ran **cyffredinrwydd** ers 2022/23:

1. Bwrdd Iechyd Prifysgol Caerdydd a'r Fro
2. Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg

Dim newid o ran **cyffredinrwydd** ers 2022/23:

1. Bwrdd Iechyd Prifysgol Aneurin Bevan
2. Bwrdd Iechyd Prifysgol Betsi Cadwaladr
3. Bwrdd Iechyd Prifysgol Bae Abertawe
4. Bwrdd Iechyd Addysgu Powys

Nid yw'r data sydd ar goll o Geredigion yn galluogi cymhariaeth ym Mhrif Iechyd Prifysgol Hywel Dda ers 2022/23

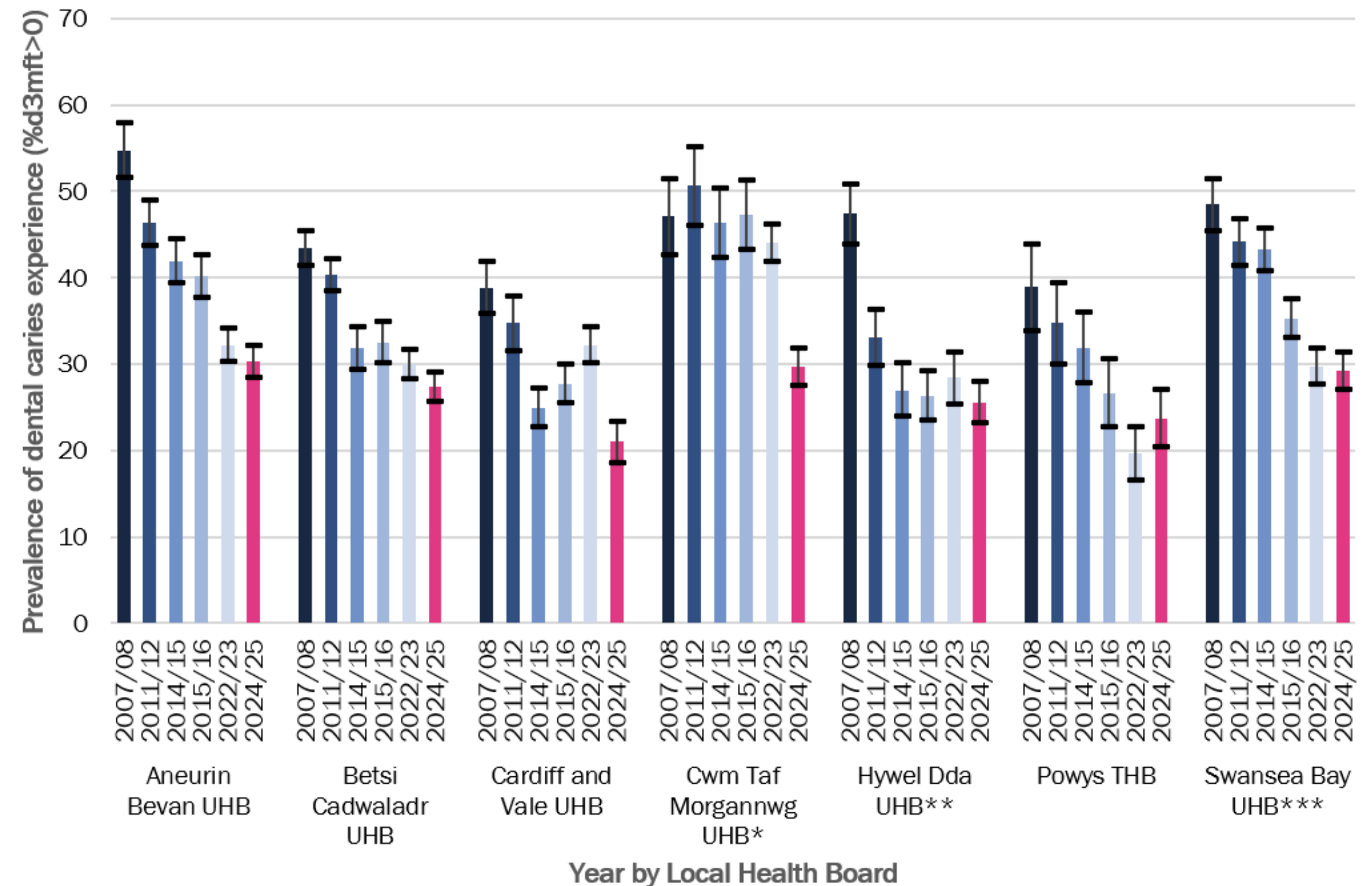
Reduction in **prevalence** since 2022/23:

1. Cardiff & Vale UHB
2. Cwm Taf Morgannwg UHB

No change in **prevalence** since 2022/23:

1. Aneurin Bevan UHB
2. Betsi Cadwaladr UHB
3. Swansea Bay UHB
4. Powys THB

Missing Ceredigion data does not enable a comparison in Hywel Dda UHB since 2022/23



Byrddau Iechyd Health Boards

Gostyngiad o ran **difrifoldeb** ers 2022/23:

1. Bwrdd Iechyd Prifysgol Caerdydd a'r Fro
2. Bwrdd Iechyd Prifysgol Cwm Taf Morgannwg

Dim newid o ran **difrifoldeb** ers 2022/23:

1. Bwrdd Iechyd Prifysgol Aneurin Bevan
2. Bwrdd Iechyd Prifysgol Betsi Cadwaladr
3. Bwrdd Iechyd Addysgu Powys
4. Bwrdd Iechyd Prifysgol Bae Abertawe

Nid yw'r data sydd ar goll o Geredigion yn galluogi cymhariaeth ym Mhrif Iechyd Prifysgol Hywel Dda ers 2022/23

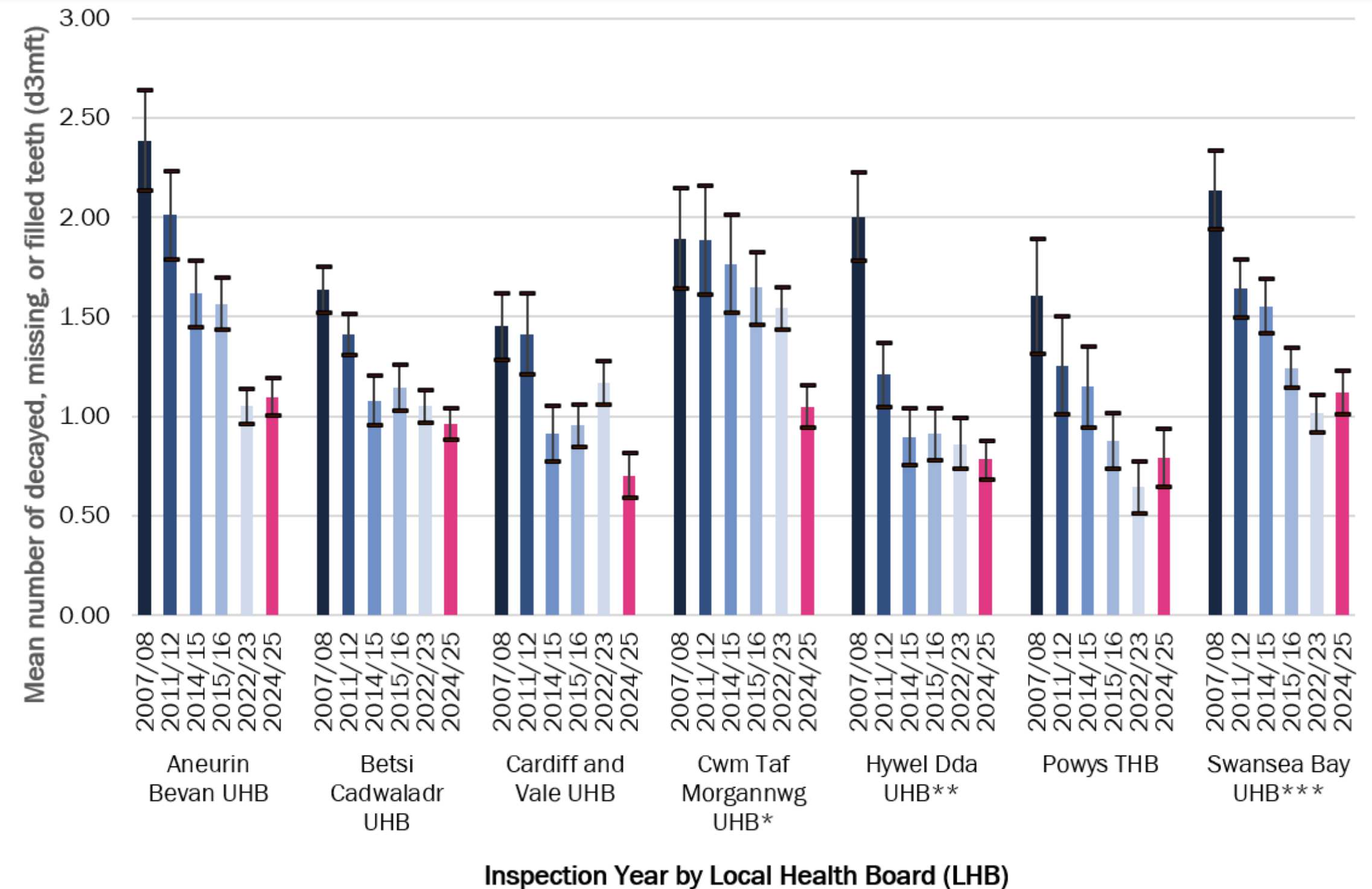
Reduction in **severity** since 2022/23:

1. Cardiff & Vale UHB
2. Cwm Taf Morgannwg UHB

No change in **severity** since 2022/23:

1. Aneurin Bevan UHB
2. Betsi Cadwaladr UHB
3. Powys THB
4. Swansea Bay UHB

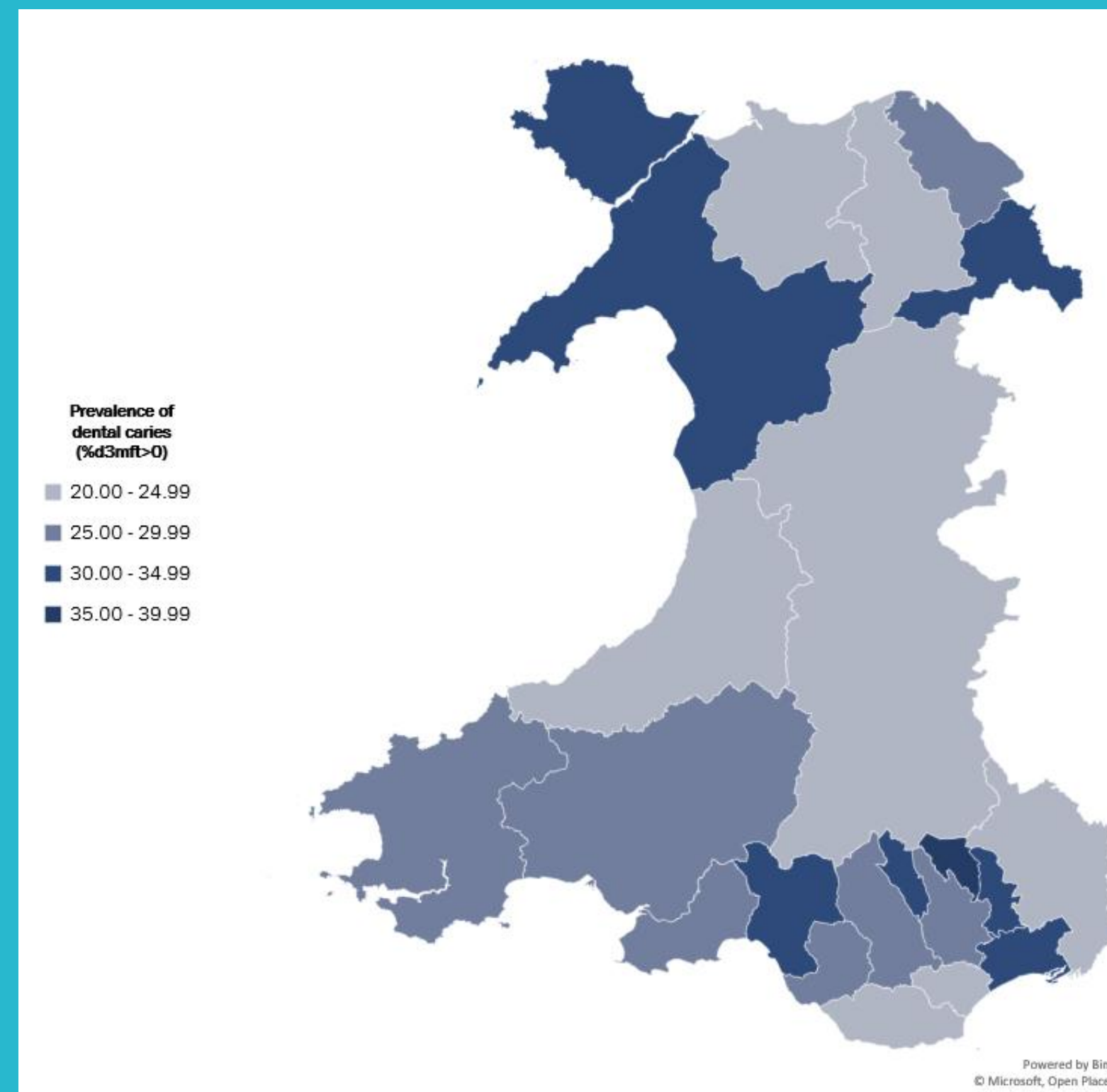
Missing Ceredigion data does not enable a comparison in Hywel Dda UHB since 2022/23



Awdurdodau Unedol Unitary Authorities

Ar lefel Awdurdod Unedol, mae **cyffredinrwydd** pydredd dannedd yn amrywio o 20.2% (95%CI 16.8%-23.6%) yng Nghonwy i 36.0% (95%CI 30.8%-41.2%) ym Mlaenau Gwent.

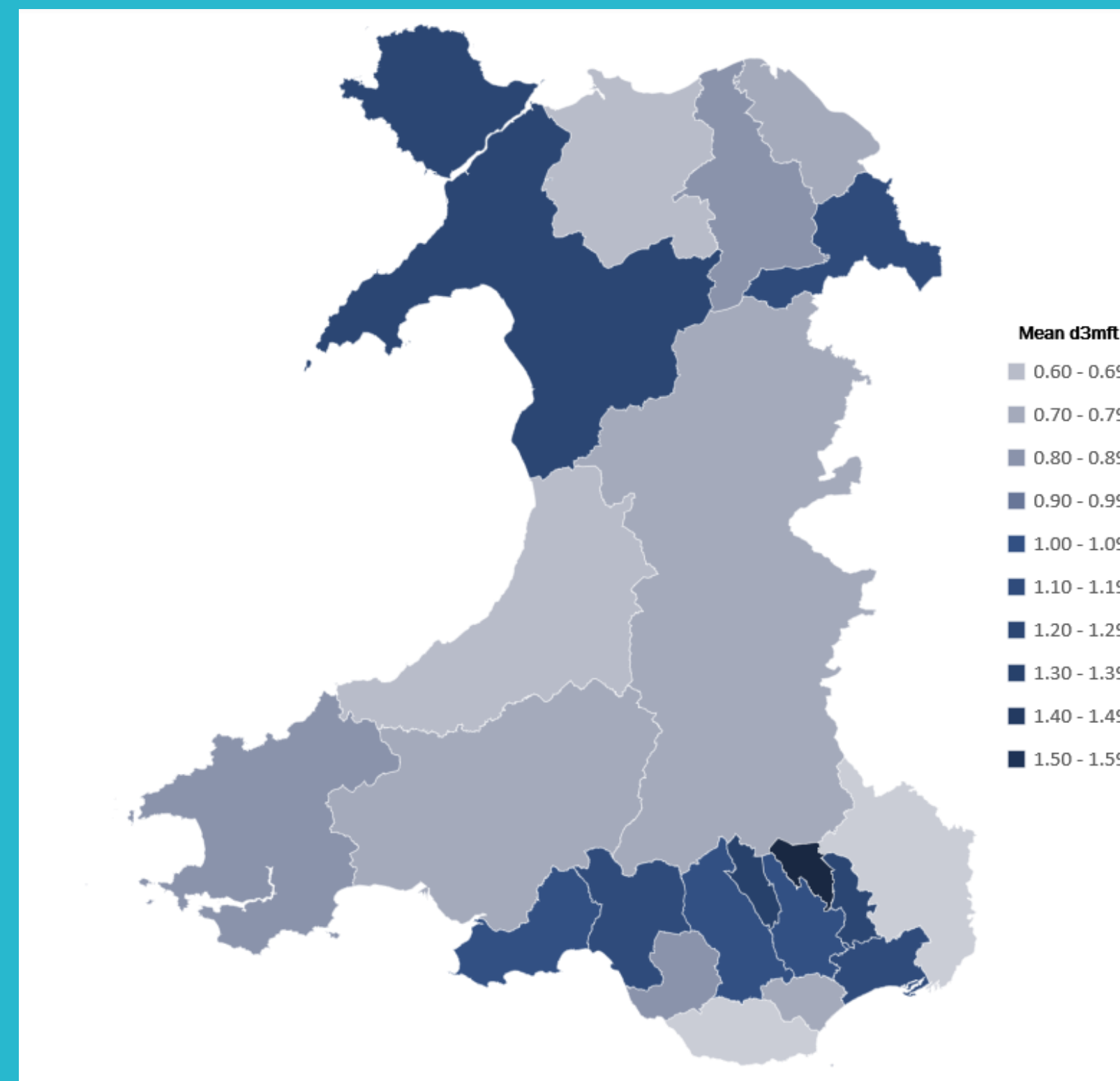
At a Unitary Authority level, dental caries **prevalence** ranges from 20.2% (95%CI 16.8%-23.6%) in Conwy to 36.0% (95%CI 30.8%-41.2%) in Blaenau Gwent



Awdurdodau Unedol Unitary Authorities

Ar lefel Awdurdod Unedol, mae **difrifoldeb** yn amrywio o 0.55 (95%CI 0.40-0.70) ym Mro Morgannwg i 1.58 (95%CI 1.28-1.87) ym Mlaenau Gwent.

At a Unitary Authority level, **severity** ranges from 0.55 (95%CI 0.40-0.70) in the Vale of Glamorgan to 1.58 (95%CI 1.28-1.87) in Blaenau Gwent





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Gweithio gyda'n gilydd
i greu Cymru iachach

Working together
for a healthier Wales

