



**Christopher Immormino, RDH  
Ohio Dental Hygienists' Association  
House Health Committee  
Senate Bill 101 Proponent Testimony  
September 17, 2019**

Chairman Merrin, Vice Chairman Manning, Ranking Minority Member Boyd, and members of the committee, I am Chris Immormino, President of the Ohio Dental Hygienists' Association (ODHA) and I am providing a proponent statement on behalf of my colleagues to support Senate Bill 101, designating May as Preeclampsia Awareness Month.

As dental professionals we are educated on the connection between the mouth and the rest of the body. A variety of physical conditions may be exacerbated by lack of oral health care or the condition of the mouth lends clues to what is occurring elsewhere in the body. A pregnancy is one of the most difficult stressors on a woman's body and can lead to long-term physical impacts. The ODHA appreciates Senator Yuko's leadership in introducing Senate Bill 101.

Pre-eclampsia is one of the hypertensive disorders that occur only during pregnancy and the postpartum period affecting both mother and unborn baby. It is considered as a syndrome and is defined by the classic complement of hypertension, proteinuria (protein in urine) and symptoms like swelling/edema especially in hands and face, headache, visual changes etc. In general, it occurs after 20 weeks of gestation (in the late 2<sup>nd</sup> or 3<sup>rd</sup> trimesters of middle to late pregnancy). Pre-eclampsia and other hypertensive disorders are most common medical complications of pregnancy affecting 5-10% of all pregnancies. These disorders are responsible for 15% of maternal mortality.

However, women who have periodontal disease while pregnant—an estimated one in five pregnant women—have been reported to be at increased risk of adverse pregnancy outcomes including increased risk of developing pre-eclampsia compared to those with normal oral hygiene. The adverse pregnancy outcome most often associated with periodontal disease is preterm delivery. A large prospective study showed that the prevalence of extremely preterm delivery (<28 weeks gestation) was increased tenfold in women with moderate-severe periodontal disease as compared to women without periodontal disease: 11.1 versus 1.1 %, respectively. Other adverse pregnancy outcomes that have been associated with periodontal disease include low birth weight, preeclampsia, and being small for gestational age.

ODHA members will use Preeclampsia Awareness Month as an opportunity to educate patients that are mothers-to-be to and women of child bearing age to encourage them to maintain a

heightened oral health effort (brushing, flossing, prophylaxis, proper nutrition) during the pregnancy to ensure that their baby will have a better chance of being taken to term and lower the risk of developing preeclampsia during the pregnancy. We encourage other medical professionals, especially primary care physicians and OB-GYNs, not only during the month of May, but year-round to encourage expectant mothers to seek oral health care during the pregnancy. The importance of oral healthcare during pregnancy is accentuated by the fact that some dental insurance plans double to four the number of cleanings available during pregnancy to ensure a mother is proactively protecting her mouth. Our state is in an infant mortality crisis and Ohio's dental hygienists stand ready to assist through our practice to raise awareness and to improve the oral health of Ohio's expectant mothers and the overall health of their babies.

Again, the Ohio Dental Hygienists' Association appreciates Senator Yuko's approach to this problem, and we ask the committee to favorably support Senate Bill 101. Please feel free to contact me with any questions regarding my testimony.