**Changes in Oral Health Status in Stroke Patients: Evaluation Using the Oral Health Assessment Tool (OHAT)**

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**ABSTRACT:**

**Background**Pneumonia complications during the acute phase of stroke can delay oral intake and rehabilitation, significantly affecting patients' Quality of Life (QoL). The first step in improving oral health is the assessment of the oral environment. Since 2022, our Stroke Care Unit (SCU) has used the Oral Health Assessment Tool (OHAT) to assess changes in the oral health of stroke patients.

**Methods**From August 2022 to November 2024, patients admitted to our SCU were assessed using OHAT at admission and on day 7. Based on OHAT score changes, patients were divided into three groups: improvement, no change, and deterioration. These groups were compared.

**Results**  
A total of 103 patients were included (21 in the improvement group, 51 in the no change group, and 31 in the deterioration group). Age, sex, consciousness level, NIHSS (National Institutes of Health Stroke Scale), and OHAT scores at admission were compared. Significant differences were found in NIHSS and admission OHAT scores (p < 0.05). The deterioration group had a lighter NIHSS score but worsened OHAT scores (from 1.4 to 3.3).

**Discussion**In the deterioration group, worsened oral health was attributed to increased tongue coating and dry mouth. Many patients had consciousness disorders, upper limb dysfunction, and speech impairments, leading to decreased self-care ability. Additionally, the deterioration group was younger and had lighter NIHSS scores, suggesting insufficient nursing assessment of self-care abilities.

**Conclusion**Stroke patients' oral health can deteriorate significantly, even with mild NIHSS scores. Continuous observation using OHAT and nursing interventions based on self-care abilities are essential.