



ORAL HEALTH PROFILE MAINTENANCE AMONG PATIENTS ATTENDING ISRA DENTAL COLLEGE.

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ABSTRACT... Objectives: To determine the oral health profile maintenance among patients attending Isra dental college Hyderabad. **Study Design:** Cross-sectional study. **Setting:** Oral pathology department of Isra University Hospital Hyderabad. **Period:** May 2017 February 2018. **Material & Methods:** All the patients either of gender presented at dental OPD with any oral health problem were included in the study. Clinical examination was done among all patients. All the patients interviewed regarding duration of disease and maintenance of oral health including type of tooth paste, frequency of tooth paste and timing of tooth paste. All the data was entered in the proforma and analysed by SPSS version 20. **Results:** Total 539 patients were studied; their mean age was 28.34±33.12 years. Females were found in majority 83.9%. Sensitivity was among 36.2% patients, need of filling was among 42.9% patients, need of scaling was among 31.7%. According to periodontal status, gums bleeding were in 13.2% patients, plaque formation was in 33.6% patients and calculus was in 10.0% patients. fluorosis was seen among 7.6% patients, malocclusion was in 13.7% patients, needs of Orthodontic treatment was in 14.7% patients and needs prosthodontics treatment was seen in 3.3% patients. According to oral health maintenance techniques Colgate, miswak and multiple tooth pastes uses were most common. Oral health status was insignificantly associated with frequency of oral health techniques, only needs of scaling was significantly higher among occasionally users of oral health techniques p-value 0.021. **Conclusion:** There was a lack of awareness amongst the people and their oral hygiene practice and dental visiting habits need to be addressed and modified.

Key words: Disease, Maintenance, Oral Health.

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INTRODUCTION

Globally, oral infections are the major concern for public health and have a remarkable effect on people's everyday social lives and health.¹

Globally, oral disorders influence 3.9 billion individuals.^{1,2} Worldwide, the most insecure are the deprived and poor people. Oral diseases have also become burden over Pakistani population. In Pakistan also less importance is given to oral health.³

The most common oral diseases are periodontal diseases and dental caries. Because of low importance given to oral health as well as oral health personnel scarcity i.e. oral health services scarcity to the population because 90% of the

oral diseases are left untreated.³

Oral health implies to the state of having no facial and mouth pain, in addition to oral sores and infection, tooth loss, tooth decay, periodontal disease, throat or oral cancer, and further conditions, which restrict the abilities to speak, smile, chew, or bite, and adversely affect psychosocial health.^{4,5}

Several systemic infections either arise in or could be inspected for in the buccal cavity at an initial stage, thus rapid development of the notion of systemic disorder screening and/or handling oral morbidity as a systematic disease manifestation in dental care.⁶

Pakistan faces major obstacles in terms of oral hygiene maintenance, as the majority of its people do not focus on improving oral health, is susceptible to addiction, has overlooked health problems, looking for self-medication, and often rural areas of residence, has limited healthcare access, which all makes people susceptible to bad oral health.⁶⁻⁹

The objective of good oral health is to eliminate or avoid tartar and plaque formation, to prevent parodontal disease and dental caries, and to reduce halitosis incidence. Several surveys show that most individuals do not realize the significance of good oral health and its relationship with overall Well-being. Because of its high incidence and major mechanism of social effect, oral disorder can be regarded as public health issue.³ Dental caries (Tooth decay) is a much common oral disorder. By acting on the poor oral hygiene, cariogenic diet, and dental awareness, tooth decay can be prevented.³

Few studies with small sample size has been found in literature. Therefore this big sample size study has been conducted to determine the oral health profile maintenance among patients attending Isra Dental College.

MATERIAL & METHODS

This cross-sectional study was conducted at the Oral pathology department of Isra University Hospital Hyderabad from May 2017 February 2018. All the patients either of gender presented at dental OPD with any oral problem were included in the study. Patients with diagnosis of oral cancer and those were not agree to participate in the study were excluded. All the patients were randomly selected and clinical examination was done among all patients to assess the oral health profile. All the patients interviewed regarding duration of disease and maintenance of oral health including type of tooth paste, frequency of tooth paste and timing of tooth paste. All the data was entered in the proforma and analysed by SPSS version 20. Frequency and percentage were calculated for qualitative variables and mean and SD were calculated for quantitative variables. Chi-square test was applied and p-value <0.05

was considered as significant.

RESULTS

Total 539 patients were studied. Mean age of patients was 28.34+33.12 years. Most common age group was 15-30 years. Females were found in majority 83.9% and males were 16.1%. Table-I.

Sensitivity was among 36.2% patients, need of filling was among 42.9% patients, need of scaling was among 31.7%. According to periodontal status, gums bleeding were in 13.2% patients, plaque formation was in 33.6% patients and calculus was in 10.0% patients. fluorosis was seen among 7.6% patients, malocclusion was in 13.7% patients, needs of Orthodontic treatment was in 14.7% patients and needs prosthodontics treatment was seen in 3.3% patients. Table-II.

According to oral health maintenance techniques Colgate, miswak and multiple tooth pastes uses were most common. Mostly patients were seen with one and twice using oral health maintenance techniques 52.3% and 37.8% respectively. 7.1% had history of thrice maintenance and 2.8% had history of oral health maintenance occasionally. Table-III.

Oral health status was insignificantly associated with frequency of oral health techniques, only needs of scaling was significantly higher among occasionally users of oral health techniques p-value 0.021. Table-IV.

Variables	Frequency	Percent
Age		
15-30	534	99.1%
31-45	4	0.7%
46-60	1	0.2%
Total	539	100.0%
Gender		
Male	87	16.1%
Female	452	83.9%
Total	539	100.0%

Table-I. Patient distribution according to age and gender n=539

Variables	Frequency	Percent
Sensitive		
Yes	195	36.2%
No	344	63.8%
Need Filling		
Yes	231	42.9%
No	308	57.1%
Need Scaling		
Yes	171	31.7%
No	368	68.3%
Periodontal Status		
Bleeding gums	71	13.2%
Plaque	181	33.6%
Calculus	54	10.0%
Normal	233	43.2%
Fluorosis		
Yes	41	07.6%
No	498	92.4%
Malocclusion		
Yes	74	13.7%
No	465	86.3%
Need Prosthodontic Treatment		
Yes	18	03.3%
No	521	96.7%
Need Orthodontic Treatment		
Yes	79	14.7%
No	460	85.3%

Table-II. Patient distribution according to oral health status n=539

Oral Health Maintenance Techniques	Frequency	Percent
Close-up	07	1.3
Colgate	446	82.7
Dentonic	01	0.2
Doctor	06	1.1
English	03	0.6
Forhen	01	0.2
Medicam	09	1.7
Miswak	15	2.8
Mr White	03	0.6
Multiple	29	5.4
Pepsoden	04	0.7
Sensodyne	06	1.1
Sparkle	09	1.7
Strawberry	01	0.2
Total	539	100
Frequency		
Once	282	52.3
Twice	204	37.8
Thrice	38	7.1
Occasionally	15	2.8
Total	539	100

Table-III. Patient distribution according to types and frequency of toothpaste n=539

Oral Health Status		Frequency of Oral Health Techniques				Total	P-Value
		Once	Twice	Thrice	Occasionally		
Sensitive	Yes	101	76	15	3	195	0.573
	No	181	128	23	12	344	
	Total	282	204	38	15	539	
Need Filling	Yes	119	90	13	9	231	0.372
	No	163	114	25	6	308	
	Total	282	204	38	15	539	
Need Scaling	Yes	119	90	13	9	231	0.021
	No	163	114	25	6	308	
	Total	282	204	38	15	539	
Periodontal Status	Bleeding gums	34	34	2	1	71	0.176
	Plaque	91	74	10	6	181	
	Calculus	25	24	4	1	54	
	Normal	132	72	22	7	233	
	Total	282	204	38	15	539	
Fluorosis	Yes	20	17	4	1	42	0.935
	No	262	187	34	14	497	
	Total	282	204	38	15	539	
Malocclusion	Yes	37	31	4	2	74	0.852
	No	245	173	34	13	465	
	Total	282	204	38	15	539	
Need Prosthodontic Treatment	Yes	8	9	1	0	18	0.677
	No	274	195	37	15	521	
	Total	282	204	38	15	539	
Need Orthodontic Treatment	Yes	38	33	4	4	79	0.401
	No	244	171	34	11	460	
	Total	282	204	38	15	539	

Table-IV. Patient distribution according to types and frequency of toothpaste n=539

DISCUSSION

Oral health plays a pivotal role in the overall wellbeing and there is a variation in oral health status due to the changing trends and lifestyle.¹¹ Oral diseases can be considered a public health problem due to their high prevalence and significant social impact.¹² Mostly young population are involved in poor health maintenance. In this study mean age of patients was 28.34+33.12 years and females were in majority 83.9%. These findings were similar to Aggnur M et al¹² as most common age group was 25-34 years and females were most common. Dawani N et al¹³ reported that males was 41.6% and females was 58.4%. Similar findings were reported by Narker JC et al.¹⁴ In this study sensitivity was among 36.2% patients, need of filling was among 42.9% patients, need of scaling was among 31.7%. On other hand Aggnur M et al¹² reported that 80.4% patients' needs periodontal treatment for removal of calculus and scaling. In this study according to periodontal status, gums bleeding were in 13.2% patients, plaque formation was in 33.6% patients and calculus was in 10.0% patients. RIZVI KF et al¹⁵ reported that periodontal diseases as calculus was in 54% patients, gums bleeding in 8% and poor oral hygiene observed 72%.

In this study fluorosis was seen among 7.6% patients, malocclusion was in 13.7% patients, needs of Orthodontic treatment was in 14.7% patients and needs prosthodontics treatment was seen in 3.3% patients. Similarly RIZVI KF et al¹⁵ reported that Fluorosis was among 13% patients. Bhagavatula P et al¹⁶ reported that dental fluorosis 27.8%, which was higher as compared to this study.

In this study according to oral health maintenance techniques Colgate, miswak and multiple tooth pastes uses were most common. Hussain P et al¹⁷ reported that 31% people use brush and 20% Miswak, 6% use charcoal while 41% uses nothing to clean their teeth. Bangash MF et al¹⁸ reported that 23% individuals had history of miswak and 29% replied they using tooth brush for oral hygiene. In this study mostly patients were seen with one and twice using oral health maintenance techniques 52.3% and 37.8% respectively.

Similarly Aggnur M et al¹² reported that mostly of the patients 43.2% patients used brush once a day. Bangash MF et al¹⁸ stated that most of the study participants were using tooth brush once and twice daily. In this study oral health status was insignificantly associated with frequency of oral health techniques, only needs of scaling was significantly higher among occasionally users of oral health techniques p-value 0.021.

CONCLUSION

There was a lack of awareness amongst the people and their oral hygiene practice and dental visiting habits need to be addressed and modified. The present study emphasized the need of regular dental checkups and health education of people so sensitivity of teeth, tooth decay and periodontal problems due to poor oral hygiene can be addressed.


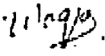



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AUTHORSHIP AND CONTRIBUTION DECLARATION

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2	Waqas Iqbal	Manuscript writing.	
3	Mowaffaq Al Absi	Manuscript review.	
4	Madiha Zaigum	Data analysis.	
5	Sheba Ramzan	Manuscript writing.	
6	Shafqat Husain Khuwaja	Review of literature.	