www.jmscr.igmpublication.org Impact Factor 5.244

Index Copernicus Value: 83.27

ISSN (e)-2347-176x ISSN (p) 2455-0450

crossref DOI: http://dx.doi.org/10.18535/jmscr/v4i8.88



An Survey on Awareness of Orthodontic Treatment Among Female Population Reporting to Dental Clinic

Authors

Priyanka.S¹, A.Sumathi Felicita²

¹Saveetha Dental College, Chennai -77 Email: *spriyankaerode12@gmail.com*

²Reader, Department of orthodontics, Saveetha dental college, Chennai -77

ABSTRACT

AIM: The aim of study is to determine the level of awareness to orthodontic treatment among female population.

OBJECTIVES: A cross sectional questionnaire study was conducted to determine the awareness towards orthodontic treatment among female patients reporting to dental clinic.

MATERIALS AND METHOD: 60 female patients reporting to the dental clinic were requested to complete the questions based on which the status of awareness of orthodontic treatment was evaluated. A structured questionnaire comprising of multiple choice questions, was self-administered to assess their knowledge and attitude towards orthodontic treatment. The responses received through these questionnaires were tabulated and the data obtained were analyzed by using statistical data.

RESULT: This study will be helpful in creating awareness about orthodontic treatment among female patients in the population.

INTRODUCTION

Facial appearance plays a major role in all stages of human life and has a great impact during preadolescent and adolescent phases due to an self-consciousness increased about appearance. This increased self-awareness leads to a greater concern about their oral health. Oral health is multifactorial and is an inseparable part of general health [1,2]. Oral health knowledge and awareness are considered to be an essential prefor health-related behaviour Awareness is the state or ability to perceive, to feel or to be conscious. In many of the countries, large number of parents and children are unaware and lack knowledge about the cause,

occurrence and prevention of most of the common diseases. One of the most common dental problems in mankind along with dental caries, gingival disease, and dental fluorosis is malocclusion [4]. Malocclusion can be defined as an occlusion in which there is mal-relationship between the arches in any of the planes or there are anomalies in tooth position beyond the normal limits. The etiology malocclusion genetic or of can be environmental and/ or a combination of both along with various local factors such as oral habits, tooth anomalies etc. The malocclusion has been shown to affect oral health, increase prevalence of caries and can cause temporo-

JMSCR Vol||04||Issue||08||Page 12221-12224||August

mandibular disorders. The benefits of orthodontic treatment are prevention of tissue damage, improvement in aesthetics and physical function. The need for orthodontic treatment is influenced by the desire to look attractive, greater self-esteem and self -perception of the dental appearance ^[5].

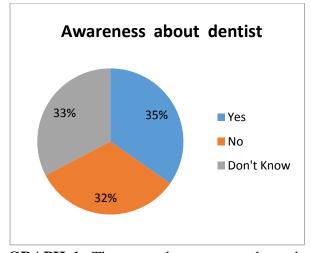
Therefore the aim of this study is to assess the awareness of orthodontic treatment among the female population.

MATERIALS AND METHOD

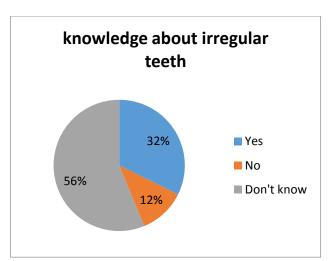
For this study, female patients reporting to dental clinic were requested to complete a questionnaire. About 60 female patients were randomly selected. The following questions are,

TABLE 1:

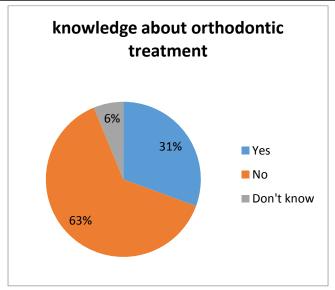
Awareness about Dentist/	ut Dentist/ • Are you aware of a dentist?		a. Yes	
Orthodontist	 Have 	you visited a dentist before?	b. No	
	 Have 	you heard of an Orthodontist?	c. Don't know	
	• Are y	ou aware that they align your teeth?		
Knowledge about	nowledge about • Have you noticed people having irregular teeth?			
irregular teeth	• Do yo	ou believe teeth should be properly aligned	b. No	
	for a	better facial appearance?	c. Don't know	
	• Do yo	ou know crooked teeth have ill effects?		
	 Are y 	ou aware that few teeth may have to be		
	remov	ed for aligning irregular teeth?		
	 Does 	thumb sucking has an effect on the front		
	teeth a	alignment?		
Knowledge about	• Did y	you know taking braces treatment at an	a. Yes	
Orthodontic treatment	earlier	age would improve facial appearance?	b. No	
	• Do yo	ou know the duration for braces treatment	c. Don't know	
	is long	ger than other dental procedures?		
	 Do y 	ou know that orthodontic treatment is		
	costly:	?		
Awareness about braces/	wareness about braces/ • Have you seen people wearing braces?		a. Yes	
Orthodontic treatment	 Have y 	you ever felt the need to wear braces?	b. No	
•		anyone advised you to get your teeth	c. Don't know	
	aligne	d?		



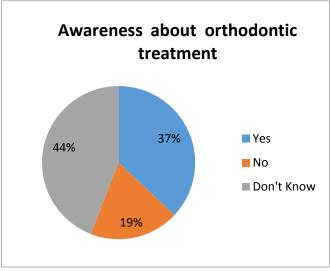
GRAPH 1: The general awareness about dentist and orthodontist among female population is about 35%



GRAPH 2: The knowledge about irregular teeth among female population is about 32%.



GRAPH 3: The knowledge about orthodontic treatment among female population is about 31%



GRAPH 4: The awareness about orthodontic treatment among female population is about 37%

TABLE 2

QUESTIONS	YES %	NO %	DON'T KNOW %
1	67	33.3	0
2	23.3	53.3	23.3
3	5	3	67
4	80	17	3.3
5	58.3	8.3	33.3
6	0	13.3	87
7	30	62	8.3
8	37	57	7
9	25	72	3.3
10	13.3	7	80
11	22	13.3	65
12	35	18.3	47
13	72	3.3	25
14	32	22	47
15	38.3	32	30

TABLE 3:

QUESTIONS	AWARENESS	KNOWLEDGE	KNOWLEDGE ABOUT	AWARENESS ABOUT
	ABOUT	ABOUT IRREGULAR	ORTHODONTIC	ORTHODONTIC
	DENTIST	TEETH	TREATMENT	TREATMENT
YES	35%	32%	31%	37%
NO	32%	12%	63%	19%
DON'T KNOW	33%	56%	6%	44%

DISCUSSION

Malocclusion is still not considered to be a dental problem because more priority is given to treatment of dental caries and periodontal diseases due to pain associated with it. Most malocclusion cases are still not treated properly due to ignorance of patients, parents, inadequacy of resources, lack of knowledge about malocclusion and other influencing factors like literacy rate and

socio-economic status. The level of dental health knowledge, positive dental health attitude, and dental health behaviour are interlinked and associated with the level of education and income as demonstrated by studies in the past [6,7,8,9,10,11]. Attitudes and perceptions towards dental appearance differ among populations and among individuals [12].

RESULTS

The general awareness about dentist and orthodontist among female population is about 35% and the negative result is almost equal to positive one and is about 32 %.(graph 1). The knowledge about irregular teeth is about 32% (graph 2). The knowledge about orthodontic treatment is about 31% and the negative result is about 63% (graph 3), this is mainly due to lack of awareness. The knowledge about braces is about 37% (graph 4). In our study the negative results are comparatively higher than the positive one this indicates the lack of awareness about maloccusion and orthodontic treatment.

CONCLUSION

The following were the conclusions drawn from the survey.

The female patients exhibit a moderate level of awareness about Dentist, Orthodontist and knowledge about irregular teeth. They have less awareness about Orthodontic treatment Malocclusion has an impact on the social and the psychological behavior of an individual, hence knowledge on how individuals perceive and react to malocclusion in a community is necessary for effective orthodontic treatment and care.

REFERENCE

- Choi SH, Kim BI, Cha JY, Hwang CJ (2015) Impact of malocclusion and common oral diseases on oral health-related quality of life in young adults. Am J Orthod DenztofacialOrthop 147: 587-595.
- 2. Mahajan BK (1991) Social environment, Textbook of preventive and social medicine. Jaypee Brothers Medical Pub Ltd 82-7.
- 3. Wright FA (1982) Children's perception of vulnerability to illness and dental disease. Community Dent Oral Epidemiol 10:29-32
- 4. Dhar V, Jain A, Van Dyke T E, Kohli A. Prevalence of gingival diseases, malocclusion and fluorosis in school-

- going children of rural areas in Udaipur district. Journal of the Indian Society of Pedodontics and Preventive Dentistry 2007; 25:103 105.
- 5. Mandeep Kaur Bhullar, Ashutosh Nirola Malocclusion Pattern In Orthodontic Patients. Indian Journal of Dental Sciences 2012; 4: 4, 20-22.
- 6. Chen MS. Children's preventive dental behavior in relation their mothers' socioeconomic status, health beliefs and dental behaviors. J DentChild1986; 53:105-9.
- 7. Al-Wahadni A M, Al-Omiri MK, Kawamura M. Differences in self-reported oral health behavior between dental students and dental technology/dental hygiene students in Jordan. J Oral Sciences 2004; 46:191-7.
- 8. Kawamura M, Iwamoto Y, Wright FA. A comparison of self-reported dental health attitudes and behavior between selected Japanese and Australian students. J Dent Education 1997; 61:354-60.
- 9. Barrieshi-Nusair K, Alomari Q, Said K. Dental health attitudes and behavior among dental students in Jordan. Community Dent Health 2006; 23:147-51.
- 10. Kawamura M, Spadafora A, Kim KJ, Komabayashi T. Comparison of United States and Korean dental hygiene students using hiroshima university-dental behavioral inventory (HU-DBI). Int Dent J 2002; 52:156-62.
- 11. Hamilton ME, Coulby WM. Oral health knowledge and habits of senior elementary school students. J Public Health Dent 1991; 51: 212-9.
- 12. Vallittu P, Vallittu A, Lassila V: Dental aesthetics—a survey of attitudes in different groups of patients. Journal of Dentistry 1996, 24(5):335-338.