

Assessment and attitude of oral health among pregnant women

¹Miss. Akila V, ²Mrs.Jayanthi.M , ³Miss. Swathika.M.C.L , ⁴Miss. Aarthi V

¹⁻⁴Thai Moogambigai Dental College and Hospital, Mogappair, Chennai, Tamil Nadu

Corresponding Author: Miss. Akila V, Thai Moogambigai Dental College and Hospital, Mogappair, Chennai, Tamil Nadu

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Abstract

Introduction: Pregnancy is a unique period during a woman’s life and is characterised by complex physiological changes, which may adversely affect oral health. Oral health is an integral part of general health which is often neglected by pregnant women. This study was planned to assess the attitude of pregnant women towards the oral health.

Materials and Methods: A close ended questionnaire with 28 questions relating to knowledge and practices pertaining to oral health was distributed among 100 pregnant women in various nursing homes in Chennai. The appropriate responses were then tabulated and analysed.

Results: A total of 46% experienced bleeding from gums, 80% visited dentist only when they had dental problems, 24% maintained oral hygiene by brushing twice, 81% were not aware about periodontal diseases, 97% were aware about hazards of radiation exposure and 94% were unaware about the importance of maintaining oral hygiene and its relation to general health.

Conclusion: The results suggested that the knowledge and awareness of pregnant women should be improved for their general well-being.

Keywords: Oral health, awareness, pregnancy.

Introduction

Health of the oral cavity is an essential and integral part of general health, which can be substantiated with the statement that oral cavity should be considered as a “window” through which external microorganisms interact with the host ¹. According to World Health Organisation, “Oral health is a state of being free from chronic mouth and facial pain, oral and throat cancer, oral sores, birth defects such as cleft lip and palate, periodontal / gum disease, tooth decay and tooth loss and other diseases and disorders that affect the oral cavity”.

Oral health means more than just healthy teeth affecting people physically and psychologically and how it influences their growth, function, speech, esthetics and socialize as well as their feelings of social well being². Oral tissues are known to be affected by the hormonal influences during pregnancy.

Pregnancy, a dynamic and most important phase, in a woman's life is markedly characterized by altered hormonal levels of estrogen and progesterone, which was associated with significant oral changes³. High hormone levels during this period are known to increase the incidence of diseases, such as gestational diabetes, hypertension, preeclampsia, and periodontitis. Pregnant women should be careful to look for Doctor of Dental Surgery (DDS) during pregnancy, not only for treatment of the problems presented by them, but to get information about the oral health of their child (Geisinger et al., 2014)⁴. Thus, the DDS must be inserted in the family health strategy, ensuring dental care during the prenatal period.

In such a way, prevention of oral and dental problems and their complications during pregnancy is possible through having pregnant women expressing appropriate knowledge, attitude and practice and seeking dental treatment at right time. Pregnant women need to be educated regarding the possible impact of periodontal diseases on pregnancy outcomes, dental disease prevention and treatment options⁵. Therefore, this study was carried out to assess the attitude of pregnant women towards the oral health.

Materials and methods

A questionnaire based study was conducted among various nursing homes in Chennai, Tamilnadu after taking the ethical approval from the local authorities. The sample inclusion criteria were: all pregnant women, regardless of age, financial status, social class or ethnic group and that absenteeism to participate and those who refused being excluded. A self-administered questionnaire written in both English and local language (Tamil) was personally distributed to the pregnant women who had visited the nursing homes for their own ailments. Questionnaire containing 28 questions related to the oral health care

during the period of pregnancy. The duly filled questionnaire was collected from the participants on the same day after 15-20 minutes. The appropriate results were analysed descriptively with the help of Microsoft Excel 2010/ Windows 7 and tabulated. The demographic details such as age, education, income and the question based on knowledge and attitude among the participants were analysed using number, percentage & mean

Result

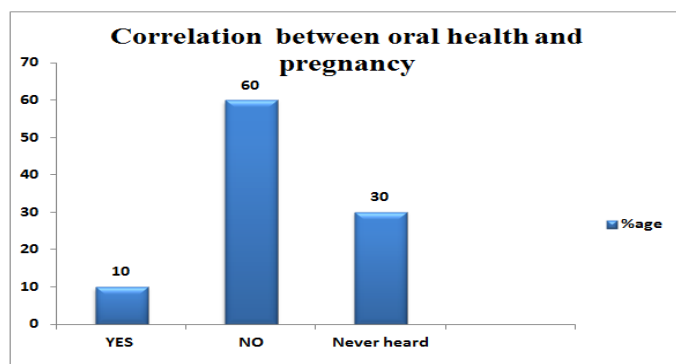
The results were subjected to descriptive analysis. In our study, most of the participant was under the age groups of 19-26 years. When questioned regarding the knowledge of correlation between oral health and pregnancy, 60 % of them doesn't know about the same.(Graph 1).

Graph 2 reveals about the visit to the dentist, among the participants, 80% visited dentist only when they had dental problems like bleeding gums and tooth ache or if they need treatment for cavitated tooth

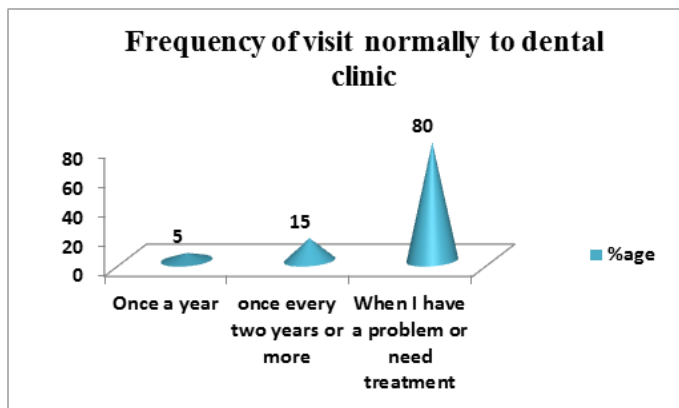
Graph 3 shows the knowledge regarding the safe period during pregnancy for dental treatment, in such way, 94 % of the pregnant women doesn't have knowledge on the safe period for dental treatment during pregnancy.

Graph 4 discloses about the information regarding their oral health they received during the period of pregnancy. Approximately 97% of the pregnant women didn't receive any information regarding the oral health care during pregnancy.

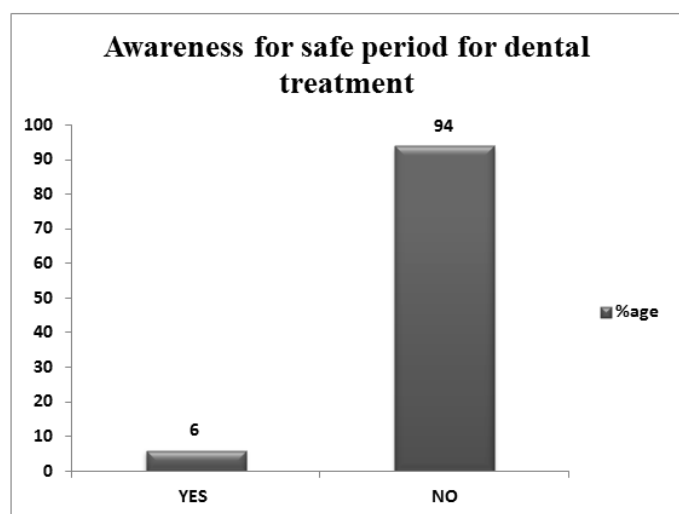
Graph 1



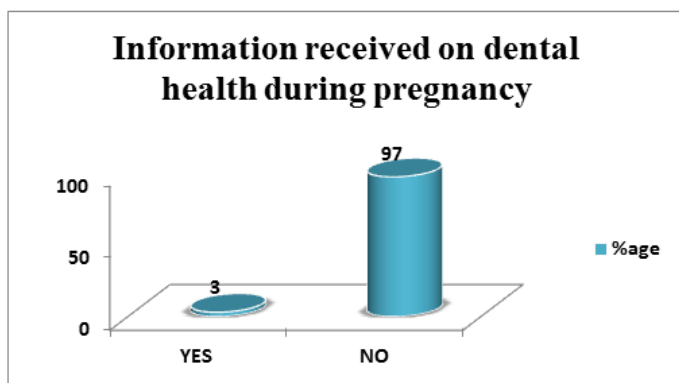
Graph 2



Graph 3



Graph 4



Discussion

The aim of this survey was to assess the attitude of pregnant women towards oral health visiting various nursing homes, in Chennai. A good understanding of parental knowledge regarding oral health is essential for

improving children's oral health. Parents oral health related knowledge are associated with their children's oral health and parental level of education has been shown to be one of the most important determinants for children's oral health in many countries¹

The hormonal variations in pregnancy put pregnant females at a higher risk for developing various dental problems⁶. Another factor contributing to this is the fact that lesser number of females seek dental treatment during pregnancy even when there is an existing dental problem.

Many of the respondents of our study believed that bleeding gums were normal in pregnancy. In our study, substantial number of the pregnant women visit dentist only if they had dental problem like bleeding gums, cavitated teeth this was seen in accordance with the study conducted by Al Habashneh R *et al*⁷ & Saddaki N *et al*⁸

The pregnant women participated in our study were unaware about the safe period for treatment during pregnancy and also observed that they were inattentive on intake of drugs without doctor instruction would have impact on child's health.

The current study reported 97% of the pregnant women didnot receive oral health education and oral hygiene instruction from a dentist respectively when pregnant. This is similar to that reported in Florida USA⁹; but in contrast to a study conducted by Tanzania¹⁰ where it was reported that 18% of the pregnant women recalled to have received oral health education and its association. It is expected that the health seeking behaviour among the pregnant women would be poor due to the poor awareness and limited available information. This is consistent with the findings of other studies that have reported lack of awareness and knowledge of possible connection between oral health and pregnancy outcomes as a barrier to utilization of dental services during pregnancy.^{11,12}

Conclusion

Quite a number of pregnant women experienced oral health problems during pregnancy with poor utilization of dental services. The poor utilization of dental services was due to poor oral health awareness and lack of information on oral health. Routine oral screening and health education is required to improve oral health status in pregnancy. There is also need for the development of guidelines that will promote referral and visit of pregnant women for dental consultation.

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