

PROPER NUTRITION COMPONENT OF PREVENTION MEASURES ORODENTAL

ALIMENTAȚIA CORECTĂ COMPONENT A MĂSURILOR DE PROFILAXIE ORO-DENTARĂ

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Abstract. *There is a close relationship between nutrition and Oro dental health because the foods they consume population, not only have an effect on overall health, but also on oral health . According to WHO, oral health is the absence of dental diseases and chronic facial pain, oropharyngeal cancer, inflammation oral, birth defects (cleft lip, cleft palate like), gum disease, tooth decay and tooth loss, and other diseases that affect the oral. Consummate come into contact with food and periodontal bacteria in the mouth and in the absence of brushing your teeth plaque accumulates. A rich diet in vitamins and minerals represented by fruit or vegetables can prevent gingivitis. For our study we used a series of questionnaires on a sample of 47 patients , aged 25-54 years , in order to relieve daily food intake , the proportion of food with beneficial effect on oro - dental health, and assess the state of oral hygiene.*

Key words: prevention orodental, dental hygiene, gingivitis, oral health, vegetables, fruits

Rezumat. *Există o relație strânsă între nutriție și sănătatea oro-dentară, deoarece alimentele pe care populația le consumă, au efect nu doar asupra sănătății generale, ci și asupra sănătății orale. Conform OMS, sănătatea orală reprezintă absența afecțiunilor dentare și a durerii faciale cronice, a cancerului orofaringian, a inflamațiilor orale, defectelor congenitale (labioschizis, palatoschizis), afecțiunilor gingivale, cariilor dentare și pierderii dinților și a altor boli care afectează cavitatea orală. Alimentele consumate vin în contact cu parodonțiul și bacteriile din cavitatea orală, iar în lipsa periajului se acumulează pe dinți placă bacteriană. O dieta bogată în vitamine și minerale reprezentată de fructe sau legume proaspete poate preveni apariția gingivitei. Pentru studiul nostru am folosit o serie de chestionare, pe un lot de 47 de pacienți, cu vârste între 25 – 54 de ani, în scopul evidențierii aportului*

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alimentar zilnic, proporția alimentelor cu efect benefic asupra sănătății oro – dentare, precum și evaluarea stării de igienă orală.

Cuvinte cheie: prevenție oro-dentară, igiena dentară, gingivita, sănătatea orală, legume, fructe

INTRODUCTION

Oral Health means more than a pleasant smile. Untreated dental problems can have serious consequences not only for oral health but also for the whole body. Thus, in many instances, the oral health status indicates the general condition of the body. 90% of all systemic diseases manifest in the mouth – which means that your dentist can draw attention to a health problem. Under the "prevention is easier than cure", a recent study in the United States of America (WHO report on oral health, 2012) showed that good communication between dentists and patients may lead to their awareness on the importance of proper dental hygiene, contributing significantly to maintaining oral health and general body (Jipa and Amariei, 2012). Thus dentists can become an active instrument of preserving structural integrity, functional and social-psychological the patient through their involvement in combating problems like smoking and poor hygiene or even digestive disorders (Nastalin *et al*, 2010).

Oral hygiene is a daily activity that is designed to keep your teeth and mouth clean to prevent tooth decay, periodontal disease or bad breath.

The genesis of dental caries in the last decade, three causal factors were primordial, namely microbial flora, food components and quality tooth structure. Under these conditions, dental caries is required for triggering mandatory interference of these three causes. Limiting development of microbial flora can be done by each of us, applying oral hygiene measures.

Food is the second factor in the production of dental caries, its implications are dominated by the decisive role of cariogenic carbohydrate and innocuous lipids and proteins.

A proper diet, balanced, rich in fresh fruit and vegetables, has a beneficial effect on the health of both body and teeth and gums. We refer in particular to the crisp, such as carrot, apple, celery, broccoli or cabbage.

We refer in particular to the crisp, such as carrot, apple, celery, broccoli or cabbage. They cellulose, very effective in "cleaning" teeth naturally, removing bacteria and food debris adhering to teeth and gums. Replacing biscuits, cakes, crisps between meals with fruit and vegetables, so children must be respected, especially by adults. If the base is done in childhood healthy eating habits acquired during this period they will be used in adult life, maintaining a complete oral health.

The aim of this study is to highlight the daily food intake, the proportion of food with beneficial effect on health oro - dental and oral hygiene status assessment.

MATERIAL AND METHOD

Best choices for oral health must include: cheese, meat, nuts and milk. These foods are rich sources of calcium and phosphorus that help enamel remineralization affected by acids.

Other options include crunchy fruits like apples, pears and vegetables. They have a high water content which dilutes the sugar content and stimulates the production of saliva (which helps protect against cavities washing scraps and counteracting the effects of acids). Acidic foods such as citrus fruits and tomatoes should be consumed as part of a varied meals to minimize acid contained therein.

The existence of healthy teeth and dental work of (fillings, crowns, dental bridges, dentures mobilized, dental implants etc.) with a long life, is directly conditional on proper oral hygiene and thorough (Wiegand and Schlueter, 2014).

Without a rigorous oral hygiene, the most sophisticated and complex dental work have a poor prognosis, and caries and periodontal disease can not be avoided.

The study was conducted on a sample of 47 patients, aged 25-54 years, 14 subjects were within the age range 25-34, 18 between 35-44, 15 between 45- 54 (fig. 1). These patients presented at the Clinic or Prophylaxis Faculty of Dental Medicine, University Apollonia, within. In these patients was conducted clinical examination and was applied to a series of questionnaires on eating habits, lifestyle, oral hygiene, highlighting the factors involved in the etiology of various types of dental coronary lesions.

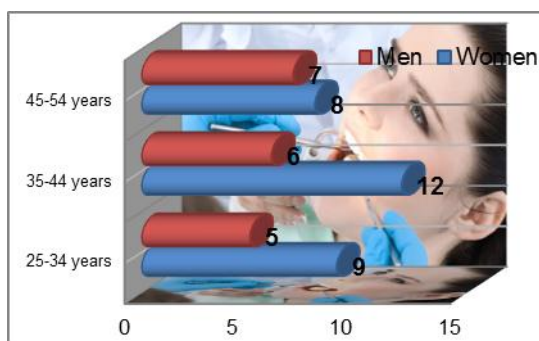


Fig. 1 Distribution batch gender and age groups

Clinical trial have met the criteria for inclusion - exclusion (age group, area of origin, socio-economic level, degree of collaboration with the doctor, injury, the type of restorative material). Patients gave their written consent to participate in this study included only patients being signed and dated informed consent form.

The database was created using Microsoft Office Excel 2007 software and processing of medical data obtained we performed using SPSS 16.

RESULTS AND DISCUSSIONS

Of all 47 patients, men are at a lower percentage than women, with 38%. One result is not unexpected, as their interest more women for their own health. From the group of patients rated mostly came from urban areas of 65, 85%.

Patients in group showed caries simple and complicated - 41 cases, bleeding gums - 20 cases, infection gum - 7 cases, discoloration of teeth - 24 cases, discoloration of the gingival mucosa - 2 cases, lesions in the mouth (cheilitis angular thrush) - 4 cases (fig. 2).

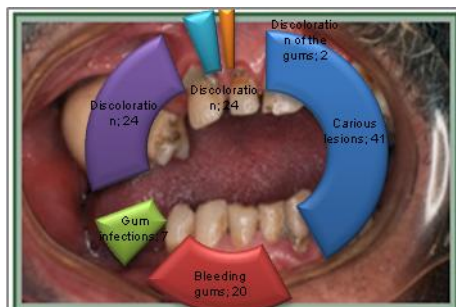


Fig. 2 Existing lesions in patients study group

At these injuries plus poor nutrition (fig. 3), vicious habits (fig. 4), and not least the degree of hygiene (fig. 5).

Analysing the proportion types of dental coronary lesions by eating sweets, drinking carbonated beverages, alcohol, consumption of vegetables and fruits, we found the following:

- 33 patients said they consumed sweets, 32.15%
- 39 patients consume carbonated beverages, 37.63%
- 13 patients who consume alcohol 13.30%
- 17 patients consuming vegetables and fruits 16.92%

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Often even the dentist can diagnose vitamin deficiency by events that occur in the oral cavity.

Symptoms of deficiency of vitamin B are burning, particularly on the tongue, feeling of swelling with its deficit in swallowing food. The oral inflammation and tissue appear lightened. In the case of iron deficiency symptoms are similar to those of vitamin B: burning sensation in the oral cavity infections, reddens and swells the tongue, oral tissue inflammation and it appears lightened.

Vitamin C helps collagen synthesis, a protein that strengthens bones, cartilage, muscles and vessels sanguine and its deficiency can cause sensitivity of

the gums in the mouth, they bleed easily. Smoking helps eliminate vitamin C in the body.

Develop and maintain healthy vitamin A helps cells and the oral cavity, deficiency of this vitamin can lead to very slow healing of oral diseases.

Vitamin D deficiency can cause gum disease and even fracture of the jaw. At an early age, deficiency can affect teeth formation. Vitamin K helps to produce proteins that enable flocculation of the blood. People with devitamina K deficiency may suffer excessive bleeding after an extraction, or even after a simple scaling and wound healing may take a long time.

Of vicious habits, smoking occupies first place in the group of study 83% (fig. 4).



Fig. 3 Food intake of the study group

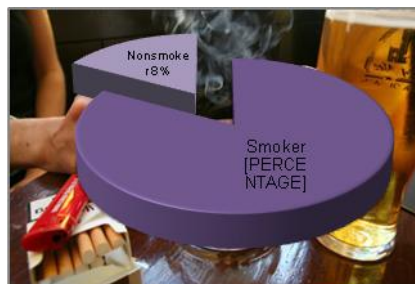


Fig.4 Vicious habits

The first symptom experienced by smokers is reducing the secretion of saliva, leading to cavities, infections și modificările color of teeth and oral mucosa.

Cariogenic effect of hidrocarbonatelor depends not only on their contact with the tooth, but the length of this contact. An important role in this respect is consistency food, soft food being cariogenic than those countries, as the form of fine powders, to the liquid. Also, adhesiveness and viscosity of sugary foods (candy, jellies, shit) favors particularly by stationing their long decay in the mouth, especially in places retentive, difficult to access.

Raw starch from plants pH decreases slightly, while cooked starch can be as dangerous as sugar. Thus, the bread and the combination of starch and sugar (cookies, cakes, sweetened cereals) have a cariogenic effect much stronger than sugar.

Of the 47 patients examined, 15 showed a good dental care, 21 were hygiene is satisfactory, and 11 patients found an unsatisfactory dental hygiene (fig. 5).

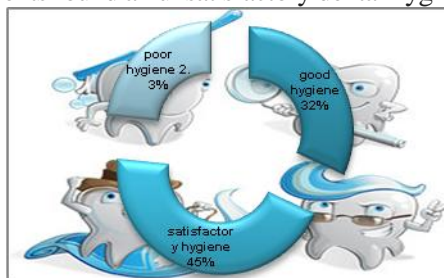


Fig. 5 The dental hygiene

One of the causes of poor hygiene is the lack of education of patients, which most often not sufficient and correct igienizează remaining teeth and prosthetic restorations using specific cleaning means adapted to each case.

CONCLUSIONS

Health oral cavity have taken a number of preventive measures, such as decreasing consumption of sugar in the diet, balanced nutrition, consumption of fruits and vegetables, smoking cessation, correct oral hygiene, regular visits (at least two per year) to dentist, ensuring access to clean drinking water for a better overall hygiene and proper oral hygiene.

Poor oral hygiene, often entail a microbial colonization with negative repercussions on the health of the oral mucosa.

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