

Oral Findings in a Sample Collected From a Public Clinic in Baghdad

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Abstract

This study was conducted on (716) subjects attending the dental department in one of the public clinics in Baghdad.

Information was collected from all subjects regarding their age, sex and chief complaint at the time of presentation. This was followed by clinical examination.

Chief complaint of the majority of patients was toothache (48.5%) and carious teeth without pain (15.5%). The need to extract teeth was seen in (8.4%), problems associated with tooth loss (6.8%), bleeding gum (5.2%), checkup 4.2% , scaling and polishing (3.2%) , mal aligned teeth (2.5%) , unidentified oral pain (2.4%) fractured anterior teeth (2.2%) and bad odour (1.1%).

Total number of female was greater than males. The majority of patients examined were in need of some type of treatment, which reflects the high prevalence of oral disease in this population.

Introduction

Oral health status has been investigated by several studies ^(1,2,3). There are certain factors, which found to influence dental health such as age, sex, education and socioeconomic status ^(2,4), personal behavior and dental clinic attendance ^(1,5).

Limitations of preventive measures and lack of proper establishment of dental care in the developing countries seems to be responsible for increasing the prevalence of oral diseases in these countries ⁽⁶⁾.

On the other hand, better oral hygiene and decline in prevalence of oral diseases in the industrialized countries could be attributed to higher income, which facilitate oral health care services in the young and adult population ^(5,7,8).

Variation in oral disease pattern and its relationship to certain

etiological factors can be achieved by analysis of sub-population groups ⁽⁹⁾.

Materials & Methods

A sample consisting of 716 subjects were utilized. This included 305 (42.6%) males and 411 (57.4%) females. Age ranged from (16-70) years.

Distribution of 716 subjects by age and sex are presented in table (1).

All subjects were asked about their age, sex and chief complaint, followed by clinical examination to confirm the presence of carious teeth, periodontal problems and malocclusion.

Statistical Analysis

Chi-square test was used to determine the statistical significance at $P < 0.05$ level.

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Results

The majority of patients complained of toothache (48.5%). Among this group the number of females was greater than males.

Patients who complained of carious teeth without pain were 15.5% and the number of females again was higher than males.

Patients who came to the dental clinic needing extractions were 8.4% of the sample, males formed the larger proportion.

Tooth loss was the chief complaint of 6.8%, bleeding gum presented in 5.2% of the sample, 4.2 were coming only for checking their teeth, 3.2% wanted their teeth to be cleaned. Malaligned teeth were the chief complaint of 2.5%. Patients with unidentified pain formed 2.4% in whom the number of females was greater than males, 2.2% have fractured anterior teeth and 1.1% complained of bad odour.

All findings above were illustrated in table ⁽²⁾.

Clinical findings and treatment need

All patients in our study were dentate. No edentulous patients were seen in our clinic due to the absence of complete denture services. After examination, a total of 706 patients were in need of certain type of dental treatment, because the majority of them had at least one tooth that was decayed. 1.4% of the sample did not need any type of treatment. 52% of the sample needs conservative treatment, which included restoration of teeth and fixed restorative appliances. The need of extraction was seen in 31.7%.

Patients who need periodontal treatment formed 7.3% of the sample. 5% were referred for prosthodontic treatment due to the lack of teeth, 2.5%

of patients with malocclusion were referred to orthodontics.

The treatment need for the patients were shown in table ⁽³⁾.

Discussion

Both age range and male to female ratio in our study were in agreement with that reported in Jordanian population ⁽¹⁰⁾. Increased female attendance may be explained by better dental health behavior as compared to men ^(4,5). The majority of patients reported toothache as chief complaint, and this is similar to that in the Jordanian population ⁽¹⁰⁾. This may be attributed to the low income of these patients, which made them attend dental clinic upon need only ⁽⁴⁾.

In our study females reported chief complaint in higher levels than males in terms of toothache, carious teeth, bleeding gum, checkup, oral hygiene impairment, malaligned teeth, unidentified oral pain, fractured anterior teeth and bad odour. This may be explained by increased dental awareness, which probably reflects the fact that females are more careful about their appearance than males.

As far as the chief complaint of tooth loss is concerned, females reported higher levels than males which could be examined by the fact that in this group of females there is lack of dental clinic attendance which could be attributed to some factors such as anxiety about dental treatment ⁽⁴⁾.

From these findings we can conclude that it is very important to conduct larger studies to investigate prevalence of oral diseases and treatment needs, therefore, leading to good planning of dental health service programs.

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Table (1): Distribution of 716 by sex and age.

Sex	No.	%
Male	305	(42.6)
Female	411	(57.4)
Total	716	(100)

Table (2): Distribution of chief complaints among 716 subjects by sex.

Chief complaint	Male		Female		Total	
	No.	%	No.	%	No.	%
Toothache	158	45.5	189	54.5	347	48.5
Carious teeth	46	41.4	65	58.6	111	15.5
To extract teeth	35	58.3	25	41.7	60	8.4
Tooth loss	14	28.6	35	71.4	49	6.8
Bleeding gum	16	43.2	21	56.8	37	5.2
Check up	8	26.7	22	73.3	30	4.2
To clean teeth	7	30.4	16	69.6	23	3.2
Malaligned teeth	7	38.9	11	61.1	18	2.5
Unidentified oral pain	5	29.4	12	70.6	17	2.4
Fractured anterior teeth	6	37.5	10	62.5	16	2.2
Bad odour	3	37.5	5	62.5	8	1.1

Table (3): Distribution of 706 subjects needing specific dental treatment.

Type of treatment	Total	
	No.	%
Conservative	373	52.1
Oral surgery	227	31.7
Periodontics	52	7.3
Prosthodontics	36	5
Orthodontics	18	2.5