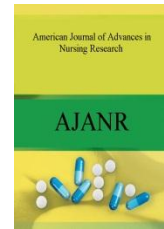




AMERICAN JOURNAL OF ADVANCES IN NURSING RESEARCH



Journal homepage: www.mcmed.us/journal/ajanr

A RESEARCH ON KNOWLEDGE OF PREVENTIVE CHILD ORAL HYGIENE AMONG EXPECTANT MOTHERS IN JODHPUR CITY

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Article Info

Received 26/06/2014

Revised 15/07/2014

Accepted 18/07/2014

Key words:

Oral Care, Child,
Expecting Mothers etc.

ABSTRACT

The study was carried out to assess the perception of preventive oral care in children among expecting mothers in Jodhpur city. Women who already had one or more children were selected and questionnaire based survey was done. Information obtained included sociodemographic information and participant's perception of child dental care. Data collection spanned a period of four weeks. Three hundred participants were selected for this study. Toothache turned out to be the most common reason for a child's first visit to the dentist. The perceptions of dental visits, cleaning of teeth and commencement of unassisted tooth brushing in children was found to be poor.

INTRODUCTION

Oral healthcare is an important key factor for general healthcare that has an impact on the quality of life and health outcomes in infants and children [1]. In children, it is a major factor in the prevention of dental caries which is the most common dental problem [1]. Early childhood caries is still a problem that persists in many parts of the world especially in developing nations. It has been associated with low income, fewer dental visits, lower educational levels of mothers and low levels of knowledge of oral healthcare among mothers. Mothers are a primary source of early education in children with regard to good hygiene and healthy nutritional practices. Thus, pediatric oral health care should begin with prenatal oral health counseling for parents especially mothers who usually spend more time with the children. The first oral examination is recommended at the time of the eruption of the first tooth and no later than 12 months of age [3]. These interventions encourage healthy dietary habits,

facilitate proper monitoring of the developing dentition and occlusion, prevent dento-facial accidental injuries and identify oral habits that may be detrimental to occlusal development and general health of the oral tissues. Hence, the level of knowledge of pediatric oral healthcare of mothers will determine their ability to enforce and enhance such practices in their children. Although few studies have been carried out on knowledge or perceptions of women on pediatric oral health, there is paucity of information on the commencement/timing of preventive oral healthcare in children [4]. The aim of our study was to assess mothers on their knowledge of preventive oral healthcare in the pediatric population.

MATERIALS AND METHODS

It was a questionnaire based study in which 300 participants were included. Informed consent was taken from them. The questionnaire had two sections: the first involved demographic information such as age, educational level and employment status. The second section pertained to information about their perception of dental care for their children. The section included questions as when they thought their children should first

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visit a dentist and for what reason a dental visit is deemed necessary. Also, when their children's teeth should be cleaned, what should be used in cleaning and when the child should start cleaning their teeth themselves, etc. the filled questionnaire was collected from them after 3 days and further analyzed for results.

RESULTS

Table 1. Mother's Perception Regarding Oral Health Care of Her child

Questions Asked	Participant's Reply (in %)
1. When should a child visit the dentist for routine checkup?	
a. Once a year	21
b. Twice a year	33
c. 4-5 times	27
d. Every 2 months	19
2. What was the reason for your child first dental visit?	
a. Dental Caries	41
b. Pain	28
c. Regular Checkup	12
d. Other	19
3. When should children start brushing by themselves?	
a. Two years	17
b. Five years	49
c. Eight years 45 (11.8)	31
d. Above eight years	3
4. What should be used in cleaning a baby's teeth?	
a. Cotton wool and toothpaste	13
b. Towel and water	7
c. Soft toothbrush and toothpaste	67
d. Don't know	13
5. When should you start cleaning your child's teeth?	
a. When all milk teeth erupt	24
b. When all permanent teeth erupt	29
c. When even a single tooth is present	34
d. Don't know	13

DISCUSSION

This study was open to all cadres of patients irrespective of educational or social status. As an effective way to begin a lifelong program of preventive dentistry, the American Academy of Pediatric Dentistry recommends that dental visits begin with the appearance of a child's first tooth, typically around six months but no later than one year [5]. Family oral health education, examination, anticipatory guidance, fluoride intake assessment, oral hygiene instruction and risk assessment are all part of the age-one dental visit which gradually introduces the child to the dental environment initiating a relationship between the child, parent, and dental care giver. In this study, less than a quarter of the respondents knew that a child's first visit to the dentist should be when the first tooth erupts. Rather, many of participants believed that the first dental visit should be when the child has toothache or cavity. This observation is similar to the studies conducted in America where the participants of the

• **Socio-Demographic Characteristics:** There were 300 respondents with an age range of 23-40 years. The majority of the participants had only one child. Most of the mothers were highly educated, only 5.6% had primary education or less while 53% of the respondents were employed.

• **Perception Regarding Oral Health Care:** The important questions are tabulated in table 1.

study believed that children should see a dentist between 2 and 4 years of age and 58.8% of caregivers in the Malaysian study did not believe that children should see a dentist before 2 years of age [6-9]. In a study in Indians by Meera et al, 42% presented with pain and the majority (59.1%) had their first dental visit between the age of 6 and 12 years. Also, the Bulgarian study reported that the majority of children making their first dental visit were 3 to 6 years olds (51.9%) and the least attendance was in the children younger than one year (1.73%) [10].

Early first dental visits have been reported to have a significant positive effect on dentally related expenditure, with the average dentally related costs being lower for children who received earlier preventive care. Also, children that had a preventive dental visit by age one was likely to have subsequent preventive visits rather than subsequent restorative or emergency visits compared to those who did not [11]. Over 75% of mothers



acknowledged the importance of routine dental visits. Furthermore, 41% of the mothers in this study indicated that their children should visit the dentist with the first signs of dental caries. Good oral hygiene practices are formed as soon as the child is born; the oral cavity is regularly cleaned even before tooth eruption [12].

The AAPD recommends that parents should begin cleaning the children's teeth from when they first erupt. Damp face towels or wash cloth wrapped around a finger or a very soft toothbrush may be used to remove plaque or clean the oral cavity [13]. Also, it is beneficial for an adult to assist tooth brushing until the child has the

dexterity to remove plaque effectively by themselves and this is when the child is about 8-10 years old [14,15].

CONCLUSION

The mothers did not have adequate knowledge of oral healthcare as depicted by their oral care practices. Although a good proportion of mothers acknowledged that dental visits were important, their perceptions of timing and purpose of dental visits, tooth cleaning materials and commencement of unassisted tooth brushing in children were poor.

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