



Importance of Oral Health in Children

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Etiology

Caries is a multifactorial disease, a high sugar diet and poor oral hygiene can cause a state of oral dysbiosis, which will lead to demineralization of the teeth and consequently carious lesions [1]. In Dentistry, dental caries is one of the main problems in oral health, in fact it is creating a challenge for clinicians due to the responsibility of providing adequate treatment based on scientific evidence to patients, in this case pediatric patients, because if carious lesions are not treated on time, they will evolve into a pulp pathology, generating pain and low quality of life related to patient's health [2]. In pediatric patients the history of pain is unclear because symptoms can start from a reversible stage and a favorable prognosis to an irreversible stage of the dental pulp. In addition is not directly the patient who provide the symptoms, instead are the parent who refer to child's feedback, and most of the time is only the pain the reason to visit the dentist [3,4]. Since the middle of the 20th century, the need for endodontic treatment has increased, that means the total or partial removal of the dental pulp; because it has been studied how the condition of the pulp affects the development of infectious processes [5]. It is estimated that 90% of pediatric patients seeking for dental care are affected by dental pulp symptoms. Therefore, pediatric dentists are obliged to know the frequency of appearance and the indications for treatment in pulp pathologies of primary teeth, when the diagnoses are made on time, and are accompanied by correct therapy, it will prevent the progression of the disease and therefore the complications [5].

Editorial

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Epidemiology

For several decades, various researchers [6-9] have emphasized the importance of taking care of the deciduous dentition to improve the oral health in the permanent dentition. Dental caries is considered a public health problem due to its high prevalence in pediatric patients throughout the world, affecting approximately 9% of the world children [10]; between the principal risk factors is sociocultural and socioeconomic background of parents, among others [1,11]. It has been found that the average prevalence of caries in children under 2 years old is 17%, and this increases with age; at the age of 2 exist a prevalence of 36%, with 3, 4 and 5 years old the prevalence increases to 43%, 55% and 63% respectively, leading to the conclusion that not only the prevalence increases with age, also in younger patients than 3 years old who do not receive the necessary care this disease progresses [12].

It has been described that patients with carious lesions in primary teeth have 5 to 6 times higher incidence of developing new lesions in permanent dentition, compared to caries-free patients at early age [1]. de Campos Mello TR, et al. [11] mention that being black or brown, attending school in rural areas, and attending public school were identified as determining factors for a higher probability of presenting deciduous teeth with untreated cavities. Being a female was identified as a protective factor. Carious lesions not only affect oral health, but they also affect general health and quality of life, causing not only dental pain, but also dental enamel defects, eating problems due to an improper diet, speaking problems, difficulty sleeping, decreased school performance, low self-esteem, poor social relationships, and an increased risk of developing carious lesions in permanent

dentition [1,10,13,14].

Timely Care

Unfortunately, many of the causes of lack to attend primary dentition are due to parents' misinformation, considering that they are teeth that are going to fall out and it is not a permanent dentition; therefore, they do not consider the need for timely care, in addition to adverse sociodemographic factors and ignorance of the importance of oral health. Untreated carious lesions are directly associated with the quality of life of the patient and the family, especially severe carious lesions [14,15]. Patients who have been treated on time with conventional and biological treatments remain asymptomatic during the following 6-years; this high success rate contributes to the improvement in the general state of health and quality of life of patients. Recent research has concluded that it is not known with certainty when the injuries begin to have a negative impact on the quality of life of the pediatric patient, so it is of great importance to treat patients in a timely manner [14,15]. Likewise, it is important to have epidemiological information on the diversity of the population, as it will be extremely useful for planning dental care strategies and establish protocols for action in local health systems, contributing to equal access and health care services.

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