THE IMPACT OF ORAL-HEALTH ON DAILY PERFORMANCE OF CHILDREN AT PRE-ADOLESCENCE PERIOD

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BACKGROUND

Oral and dental health is a part of overall health and it directly effects the quality of life.

Objective: The study was carried out to determine the impact of oral health problems on daily performance of children at pre-adolescent period.

METHOD

Type of the study; The study was carried out in a descriptive design. The study was aimed to answer the questions such as

- ✓ How is the oral health of pre-adolescent children?
- ✓ What are the oral-health problems?
- ✓ What are the impacts of those problems on daily performance?

Place and time:The study was carried out in two middle-school –one is state and the other is private- located in Pendik province in İstanbul, Turkey between December-May, 2016.

Universe and Sample: The universe of the study consisted of 495 (private school: 405 and state school: 90) students between the ages of 11 and 14 and approved by their families and volunteer to participate in the study in 2016-2017 education season. The study included all the universe so that no sampling selection was made.

Data Gathering tools:The data were gathered using Child-Oral Impacts on Daily Performance scale as well as a 20-itemed questionnaire.

Participants Description Form: It consists of 20 items related with socio-demographic characters of adolescents as well as their knowledge about oral and dental health.

Child-Oral Impacts on Daily Performance Scale (OIDP), The scale was developed by Gherunpong et al (2004) and it was adapted into Turkish by Can et al (2009). Cronbach alpha coefficient of the original scale was 0.82 and it was 0,60 for adapte done. The first 17 items of the scale are related with oral and dental health problems and the rest 8 items include the list of activities effected by dental health. Adolescents are expected to choose the problems from the list that they experience. Furthermore, the adolescents are asked if they disturb from the 8 conditions about their daily lives (Can, Topaloğlu, Eden 2009).

Gathering of data: The data were gathered through questionnaire method.

Evaluation of data: The data were evaluated by utilizing descriptive statistics such as percentage, frequency, avarage and standart deviation via SPSS (Statiscal Package for the Social Sciences) programme. The results were evaluated with 95% reliability range and $p < 0,05$ significance level.

Ethical Considerations: Ethical permission was obtained from Ethic Committee of Health Sciences Institution of Marmara University and written permission was obtained from families and adolescents. In addition the permission for the use of the scale was asked from the author adapting the scale in Turkish.

RESULTS

49.1% of students, whose mean ages $12.56 \pm .90$, were girls and 50.9% of them were boys besides 39.6% of mothers and 48.3% of fathers were high school graduate.

✓ **How is the oral health of pre-adolescent children?**

It was found out that 49.95% of adolescents experienced oral and dental health problems; 19.4% of them never went to dentist examination; 36,5% of them were not satisfied with their teeth's appereance and 97% of them accepted the oral and dental health as an important issue.

✓ **What are the oral-health problems experienced by children at early adolescent period?**

33.7% of the adolescents expressed that they experienced toothache; 26.5% of them tender teeth; 36.4% of them decayed teeth; 31.3% of them fallen baby tooth; 9.5% cavity; 12.5% broken permanant teeth; 26.3% yellow teeth; 23% problem in the shape or size of the teeth; 30.5% problem in the position of the teeth; 37% bleeding gingiva; 13.5% swollen gingiva; 5.9% tartar; 21% mouth sore; 26.3% malodour; 6.5% mouth or face deformity; 7.5% chronic dental problems and finally 4% of them reported missing permanent teeh problems (Tablo 1).

Table 1.Did you experience any problems related with oral/dental health within last 3 months?

Variables	Yes		No	
	n	%	n	%
1. Toothache	167	33.7	328	66.3
2. Tender tooth	131	26.5	364	73.5
3. Decayed teeth/Cavity	180	36.4	315	63.6
4. Fallen baby tooth	155	31.3	340	68.7
5. Tooth space	47	9.5	448	90.5
6. Broken permanant tooth	62	12.5	433	87.5
7. Teeth color	130	26.3	365	73.7
8. Shape or size of tooth	114	23.0	381	77.0
9. Position of the tooth (eg: crooked teeth)	151	30.5	344	69.5
10. Bleeding gingiva	183	37.0	312	63.0
11. Swollen Gingiva	67	13.5	428	86.5
12. Tartar	29	5.9	466	94.1
13. Mouth sore	104	21.0	391	79.0
14. Malodour	130	26.3	365	73.7
15. Deformity in mouth or face (e.g cleft lips/palates)	32	6.5	463	93.5
16. Permanant teeth	37	7.5	458	92.5
17. Missing permanant teeth	20	4.0	475	96.0

✓ **What are the impacts of those problems on daily performance experienced by children at early adolescent period?**

71.9% of adolescents indicated that they experienced eating difficulties due to oral and dental problems; 26.5% clean speech problems; 58.4% mouth cleaning and 33.7% of them experienced problems in relaxing. Furthermore; 51.9 of them had difficulties in smiling and showing thier teeth; 28.1% in school projects and 52.5% of them had difficulties in human relations (Table 2).

Table 2.Daily Activities of students effected by oral/dental health

Daily activities	Oral/dental problems			
	Exist		Non-exist	
	n	%	n	%
Eating of food	356	71.9	139	28.1
Clean speech	131	26.5	364	73.5
Mouth cleaning	289	58.4	206	41.6
Relaxing (involves sleeping)	167	33.7	328	66.3
Keeping the regular mood without any hesitation about your teeth	184	37.2	311	62.8
Smiling without any embrassment and showing your teeth	257	51.9	238	48.1
Continue your school acitivities (going to school, doing homework etc.)	139	28.1	356	71.9
Human relations (going out with friends, visiting other friends etc.)	260	52.5	235	47.5

CONCLUSION AND RECOMMENDATIONS

Adolescents had some problems such as bleeding gingiva, decayed teeth/cavity, toothache and fallen baby tooth. Owing to those problems their daily performances such as eaitng, mouth cleaning, human relations effected negatively. The students should be scanned in their schools in terms of oral/dental health problems using **Child-Oral Impacts on Daily Performance Scale** and the education programmes should be planned accordingly and also the students should be provided opportunities to brush their teeth.

REFERENCES

1. Can, S., Ak, A. T., & Eden, E. (2009). Turkish Adaptation of an Index in Foreign Language: Child Oral Impact on Daily Performance. *Ege Üniversitesi Diş hekimliği Fakültesi Dergisi*, 30, 97-103.