Journal of Advanced Medical and Dental Sciences Research

@Society of Scientific Research and Studies NLM ID: 101716117

Journal home page: www.jamdsr.com doi: 10.21276/jamdsr Index Copernicus value = 85.10

(e) ISSN Online: 2321-9599; (p) ISSN Print: 2348-6805

Original Research

To determine the Prevalence of dental caries in Childrens

Salabh Soni

Assistant Professor, Department of Dentistry, Rama Medical College Hospital & Research Centre, Hapur, Uttar Pradesh, India

ABSTRACT:

Aim: To determine the Prevalence of dental caries in Childrens. Materials and Methods: This study was done as population based cross – sectional study on the prevalence of dental caries among the aged between 2–12 years. We divided children in three groups: Group I: Children age 2-4 year, Group II: Children age 5-8 year and Group III: Children age 9-12 year. The total number of sample is 100. The study collected information onage, gender, and educational levels, as well as oral hygiene behaviors, such as frequency of teeth cleaning per day, type of dentifrice used, whether or not toothbrush, and fluoridated toothpaste were used. Results: In this study, the overall prevalence of dental caries among the children aged between 2–12 years was found to be 84%. The overall values for percentage of males and females were 82% caries. The prevalence of caries is more in female (85.71%) than male (80%) The sample betweenmales and females were statistically significant. The overall values for percentage of socioeconomic group are 83% caries. The prevalence of caries is more in upper class population (86.36%) than less lower class population (80.43%), the middle class population is 86.36% carious was recorded. The sample between all class are statistically significant. (p value is less than 0.0001). The overall values for percentage of diet habit groupare 68% caries. The prevalence of caries is more in vegetarian population (73.33%) than less non vegetarian population (64.44%), the mixed diet population is 68% carious was recorded. The sample between all class are statistically significant. (p value is less than 0.0001). Conclusion: Dental caries is a preventable condition, and its impact may be reduced by raising knowledge about oral health among parents, teachers, and the general public. It is important to emphasize the importance of maintaining good dental hygiene and providing guidance on proper dietary habits. This data is significant for assessing previous and designing future oral health preventive and treatment initiatives that focus on young children. The research findingsreveal that individuals had different degrees of dental caries and untreated treatment requirements based on

Keywords: Dental caries, Childrens, socioeconomic group

Received: 17-08-2021 Accepted: 20-09-2021

Corresponding author: Salabh Soni, Assistant Professor, Department of Dentistry, Rama Medical College Hospital & Research Centre, Hapur, Uttar Pradesh, India

This article may be cited as: Soni S. To determine the Prevalence of dental caries in Childrens. J Adv Med Dent Scie Res 2021;9(10):179-182.

INTRODUCTION

The prevalence of dental caries was of great interest for long and is a principal subject of many epidemiological researches being carried out worldwide. Dental caries is considered one of themost ubiquitous non-communicable diseases with a worldwide prevalence of 35% for all ages combined contributing to the global burden of diseases [1] Dental caries is a multifactorial infectious microbial disease of the teeth that results in localized dissolution and destruction of the calcified tissues often resulting in cavitation [2]. Dental caries is still a smoldering disease in the developing countries like India that has engrossed its tentacles deep into the regions where the

resources are inadequate for dental treatment, lack of public awareness, and motivation with increased intake of carbohydrates ^[3, 4]. The prevalence and incidence of dental caries is influenced by various socio–demographic factors like age, sex, ethnic groups, dietarypatterns and oral hygiene habits ^[5]

MATERIALS AND METHODS

This study was done as population based cross – sectional study on the prevalence of dental caries among the aged between 2–12 years. We divided children in three groups:

Group I: Children age 2-4 year **Group II:** Children age 5-8year **Group III:** Children age 9-12year

The total number of sample is 100.

The study collected information on age, gender, and educational levels, as well as oral hygiene behaviors, such as frequency of teeth cleaning per day, type of dentifrice used, whether or not toothbrush, and fluoridated toothpaste were used.

The clinical examination included the number of teeth that were decayed, missing, and filled as a result of caries. The WHO oral assessment form for adults was used to record the results of intraoral examinations [1].

RESULT

In this study, the overall prevalence of dental caries among the children aged between 2–12 years was found to be 84%.

Table 1: Age Group

| ge or oup | | | | | | |
|-----------------------|--------|---------------|------------|-------|------|------------------|
| Group | Number | Carious teeth | Percentage | Mean | SD | P value |
| Group I (2- 4YEAR) | 15 | 14 | 93.33 | | | |
| Group II (5-8YEAR) | 25 | 24 | 96 | 35.65 | 5.37 | <i>P</i> <0.0001 |
| Group III (9- 12YEAR) | 60 | 46 | 76.67 | | | |
| Total | 100 | 84 | 84 | | | |

P is less than 0.0001

Sample distribution according to age Table 1 shows that the age group of the population ranges from 2 to 12 years. The high prevalence recorded in Group II (96%), because there is mix dentation than more in Group I(93.33%) and Group III(76.67%). The p-vale is less than 0.0001so in this age group data is significant.

Table 2: Gender

| Gender | Number | Carious teeth | Percentage | Mean | SD | P value |
|--------|--------|---------------|------------|-------|------|----------|
| Male | 65 | 52 | 80 | 55.54 | 3.58 | P<0.0001 |
| Female | 35 | 30 | 85.71 | | | |
| Total | 100 | 82 | 82 | | | |

Table 2 shows the overall values for percentage of males and females were 82% caries. The prevalence of caries is more in female (85.71%) than male (80%) The sample betweenmales and females were statistically significant.

Table 3: Religion

| | I | | I _ | | ~- | |
|----------|--------|---------------|------------|-------|------|----------|
| Religion | Number | Carious teeth | Percentage | Mean | SD | P value |
| Hindu | 48 | 32 | 66.67 | | | |
| Muslim | 45 | 40 | 88.89 | 35.65 | 6.32 | P<0.0001 |
| Other | 7 | 5 | 71.43 | | | |
| Total | 14580 | 77 | 77 | | | |

Table 3 shows the overall values for percentage of religions are 77% caries. The prevalence of caries is more in Muslim population (88.89%) because poor oral hygiene and bad sanitation than less Hindu population (66.67%), the other population is 71.43% carious was recorded. The sample between all religions are statistically significant. (p value is less than 0.0001).

SOCIOECONOMIC GROUP

Table 4 shows the overall values for percentage of socioeconomic group are 83% caries. The prevalence of caries is more in upper class population (86.36%) than less lower class population (80.43%), the middle class population is 86.36% carious was recorded. The sample between all classare statistically significant. (p value is less than 0.0001).

Table 4: Socioeconomic group

| Socioeconomic group | Number | Carious teeth | Percentage | Mean | SD | P-value |
|---------------------|--------|---------------|------------|-------|------|------------------|
| Lower class | 46 | 37 | 80.43 | | | |
| Middle class | 32 | 27 | 84.38 | 25.65 | 4.98 | <i>P</i> <0.0001 |
| Upper class | 22 | 19 | 86.36 | | | |
| Total | 100 | 83 | 83 | | | |

Table 5 shows the overall values for percentage of diet habit group are 68% caries. The prevalence of caries is more in vegetarian population (73.33%) than less non vegetarian population (64.44%), the mixed diet population is 68% carious was recorded. The sample between all class are statistically significant. (p value is less than 0.0001).

Table 5: Diet habit

| Diet type | Number | Carious teeth | Percentage | Mean | SD | p-value |
|----------------|--------|---------------|------------|-------|------|----------|
| Vegetarian | 30 | 22 | 73.33 | | | |
| Non vegetarian | 45 | 29 | 64.44 | 27.76 | 3.58 | P<0.0001 |
| Mixed | 25 | 17 | 68 | | | |
| Total | 100 | 68 | 68 | | | |

Table 6 shows the overall values for percentage of oral hygiene habit group are 90% caries. The prevalence of caries is more in datun and other population population (95%) than less tooth brush and paste population (88.75%). The sample between all class are statistically significant. (p value is less than 0.0001).

Table 6: Oral hygiene habit

| Oral hygiene habit | Number | Carious teeth | Percentage | Mean | SD | P-value |
|---------------------|--------|---------------|------------|-------|------|------------------|
| Tooth brush & paste | 80 | 71 | 88.75 | 57.87 | 4.53 | <i>P</i> <0.0001 |
| Datum & other | 20 | 19 | 95 | | | |
| | 100 | 90 | 90 | | | |

DISCUSSION

In this study, the overall prevalence of dental caries amongthe children aged between 2–12 years was found to be 84% which is in concordance with the study by Karunakaran *et al.* which was conducted among children aged between 4–6 yearsin which the prevalence of dental caries was 65.9%. ^[6] It could also be due to the lower calcium content of deciduous teeth and structural differences that may increase caries susceptibility in deciduous teeth ^[12]. However,a cross-sectional study conducted in Bundelkhand region, India, ^[13] reported a much higher prevalence of dental caries (82.62%) in 3–14 years old group as compared to the present study.

The prevalence of caries teeth was found to higher among females (85.71%) than among males (80%) in the present study and this difference was significant (P<0.0001). The prevalence of dental caries was higher in girls (76%) than in boys (68.8%) [8] Dixit et al. in their study reported that the overall prevalence of dental caries was higher among boys (55%) than girls (44%) and Dhar et al., in their study reportedthat caries prevalence in the boys groupwas 66.91% while that of girls group was 59.03% [9, 10] Rajesh et al. the prevalence of dental caries was found to be almost equalamong the female (34%) and male (31.8%) [11]. In this study caries prevalence Muslim population (88.89%) because poor oral hygiene and badsanitation than less Hindu population (66.67%), the other population is 71.43% carious was recorded. The sample between all religions are statistically significant.

The prevalence of caries is more in upper class population (86.36%) than less lower class population (80.43%), the middle class population is 86.36% carious was recorded. The samplebetween all class are statistically significant. Datta *et al.* among the school children in Sundarban found that 84.2% of the studentsbelonging to the less income group had dental caries in comparison to 59.65% students in higher income group and this difference is statistically significant ⁸ In the present study, the prevalence of dental caries was high in the low socioeconomic status because of their poor oral hygiene practice, lack

of awareness, improper food intake, and family status. This finding is similar to the study conducted by Moses *et al.* [14]

This study showed that those who consumed vegetarian population (73.33%) than less non vegetarian population (64.44%), the mixed diet population is 68% carious was recorded. The sample between all class are statistically significant(P<0.0001). Abdul *et al.* in their study found that the prevalence of dental caries was higher among those who consumed vegetarian diet 85.57% than among those who consumed mixed diet and this difference is because of the fact the population in this region are totally vegetarians due to religious reasons [15]

Dixit *et al.* in their work found that 56% of the childrenbrushed their teeth daily and among them only 24% of them brushed their teeth twice a day ^[16]. Datta *et al.* reported that the prevalence of dental caries was lower (56.41%) among those who had the habit of washing the mouth after every meal/most of the time than those who rarely washed their mouth after taking food (80%) and this difference is again statistically significant.in this study prevalence of cares inmore those who no bruising but sample size is less. Accordingto this study the sample size of those who bruising is high andcaries prevalence is high (88.75%).

CONCLUSION

Dental caries is a preventable condition, and its impact may be reduced by raising knowledge about oral health among parents, teachers, and the general public. It is important to emphasize the importance of maintaining good dental hygiene and providing guidance on proper dietary habits. This data is significant for assessing previous and designing future oral health preventive and treatment initiatives that focus on young children. The research findings reveal that individuals had different degrees of dental caries and untreated treatment requirements based on age groups.

REFERENCES

- Anil S, Anand PS. Early Childhood Caries: Prevalence, Risk Factors, and Prevention. Front Pediatr. 2017 ;18;5:157.
- Kazeminia, M., Abdi, A., Shohaimi, S. et al. Dental caries in primary and permanent teeth in children's worldwide, 1995 to 2019: a systematic review and meta-analysis. Head Face Med. 2020; 16, 22.
- Alhabdan YA, Albeshr AG, Yenugadhati N, Jradi H. Prevalence of dental caries and associated factors among primary school children: a population-based crosssectional study in Riyadh, Saudi Arabia. Environ. Health Prev. Med. 2018;23(1):60.
- Sharma V, Gupta N, Arora V, Gupta P, Mehta N. Caries experience in permanent dentition among 11-14 year's old school children in Panchkula district (Haryana) India. Int. J Sci Study. 2015; 3:112-5
- Kabir, M.N.; Ahmed, M.B.; Khan, M. Knowledge and Oral Hygiene Practice by School Children in Cox's Bazar, Bangladesh. *Update Dent. Coll. J.* 2019, 9, 27– 31
- Karunakaran R, Somasundaram S, Gawthaman M, Vinodh S, Manikandan S, Gokulnathan S. Prevalence of dental caries among schoolgoing children in Namakkal district: A cross-sectional study. J Pharm Bioall Sci. 2014; 6:160-1
- Peterson PE, Baez RJ. Oral Health Surveys: Basic Methods. 5th ed. France: World Health Organization; 2013. Datta P, Datta PP. Prevalence of Dental Cariesamong School Children in Sundarban, India. Epidemiol. 2013; 3:135.
- Datta P, Datta PP. Prevalence of Dental Caries among School Children in Sundarban, India. Epidemiol. 2013; 3:135
- 9. Dhar V, Bhatnagar M. Dental caries and treatment needs of children (6-10 years) in rural Udaipur, Rajasthan. Indian J Dent Res. 2009; 20:256-60.
- Shailee F, Sogi GM, Sharma KR, Nidhi P. Dental caries prevalence and treatment needs among 12 years old and 15 years old schoolchildren in Shimla city,
 - HimachalPradesh, India. Indian J Dent Res. 2012; 23:579-84
- Rajesh SS, Venkatesh P. Prevalence of dental caries among school-going children in South India. Int J MedSci Public Health. 2016; 5:700-4.
- Saravanan S, Kalyani V, Vijayarani MP, Jayakodi P, Felix J, Arunmozhi P et al. Caries prevalence and treatment needs of rural school children in Chidambaram Taluk, Tamil Nadu, South India. Indian J Dent Res. 2008;19:186-90
- Jain A, Jain V, Suri SM, Jain RK. Prevalence of dental caries in male children from 3 to 14 years of age ofBundelkhand region, India. Int. J Community Med Public Health. 2016; 3:787-9
- Moses J, Rangeeth BN, Gurunathan D. Prevalence ofdental caries, socio-economic status and treatment needs among 5 to 15 year old school going children of Chidambaram. J Clin Diagn Res. 2011; 5:146-51.
- Khan AA, Jain SK, Shrivastav A. Prevalence of Dental Caries among the Population of Gwalior (India) in Relation of Different Associated Factors. Eur. J Dent. 2008; 2:81-5.
- Prasai DL, Shakya A, Shrestha M, Shrestha A. Dental caries prevalence, oral health knowledge and practice among indigenous Chepang school children of Nepal. BMC Oral Health. 2013; 13:20