

Awareness in Orthodontics

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Good awareness of the criteria for acceptable dental health is the basis of the active search for dental care, including timely orthodontic treatment. Conversely, insufficient awareness of the causes of a particular condition and the ability of the medical art to overcome its adverse effects usually results in ignoring the need for treatment or postponing the decision to treat.

With the socio-economic changes that have taken place in Bulgaria in recent decades, as well as the globalization of the health care markets and the free movement, there is an increasing interest of people, including in Bulgaria, in improving the quality of their lives. People and society as a whole increasingly associate quality of life with the elements of environmentally sound and healthy approaches, which in the information age is related to the active search for adequate health information and inevitably leads to an increase in the level of general and health education and culture.

As an element of general health and well-being, the harmonious and aesthetically arranged dentition improves the prerequisites for complete development of the child and preservation of his health. Oral health of the child can be improved as a consequence of reducing the risk of cavities and periodontal problems in ensuring the optimal functioning of the orofacial system by uniformly distributing the chewing pressure in the harmonic dentition. Moreover, at a certain age, when the emotional maturation of the child and the socialization of adolescents imply attractiveness and self-esteem, the stacked teeth are a significant factor for positive self-esteem and self-assertion of the personality.

The main goal of orthodontics is to achieve a functional aesthetic optimum in the maxillofacial area through treatment and prevention. Both the need and the results of the orthodontic intervention have markedly health and socio-economic aspects.

The success of orthodontic treatment depends on both the correct clinical assessment of the condition of the dentition (professional clinical factors) and a number of social factors. The most significant among them is the health motivation of the patient, the family health culture, the social attitudes towards a positive result of the treatment.

It has been established that the prevalence of malocclusions and the possibilities for optimal impact with prevention and treatment is related to a certain age range, so that the determination of an optimal age limit for initiating orthodontic treatment is an important element of the basic information to be given to Patient. Significant influence is also the time when the family takes the decision for treatment, respectively the exact time for the first consultation with a specialist.

Changes in the health system show an increase in the activity of the dentist in establishing orthodontic problems and directing the needy children for consultation with orthodontists. A key point in this process is the competence of the dentist to determine the degree of complexity of the tooth-jaw deformities, to take into account the physiological deadlines of facial and maxillary growth and, last but not least, his desire to cooperate to send the child to a specialist.

It can be seen that preparedness and awareness, together with the family's desire and the professionalism of dental practitioners, are crucial to launching the process. The danger of losing precious time at the start of the time before referring to a specialist limits the natural right of the child to receive adequate specialized orthodontic care. This should not be allowed by either the doctor or the parent.

On the other hand, even if there is a complete synchronization in the motivation of the groups concerned, the access of children to a specialist may be limited to a number of objective socio-economic reasons. Considering that early diagnosis and early treatment of orthodontic deformity are financially more acceptable to the parent than the treatment of complications due to an untreated primary problem, the role and task of the dentist to inform the family and society about the benefits of timely orthodontic treatment is extremely important.

It is expected that each physician will subordinate his/her professional behavior to the interests of patients and their families. The reality may be another: The dental practitioner is not always able to, and is not always willing to, take the time to share his expertise and educate his patient and his family fully on orthodontic issues, for which he is practically rewarded, Nor is he authorized to follow orthodontic cases.

On the other hand, information may be difficult to perceive by the patient, both in terms of the complexity of the clinical case, and because of the worrying nature of a potentially prolonged and costly treatment.

Adding to the media saturation with heterogeneous, often unsystematic, inaccurate, even misleading information of a commercial nature, the trust between the doctor and the patient in the orthodontic cabinet, which is the basis of the professional ethical relationship, is under test.

It is only after informing the child and his / her family that the dental aesthetics can be expected to be attained in the specialist's office, which is essential for the future realization of the child in society. The timely prophylaxis of dental defects (TJD) and the extreme precision offered by new technologies and methods allow to improve the relationship between teeth, lips and jaws and to harmonize facial features.

The child's motivation for orthodontic treatment depends on sufficient information to reinforce his inner conviction that everything related to the health of his or her oral cavity is important for his general health and well-being and is achievable and accessible with the means and methods of orthodontics.

Bulgarian orthodontists have studied the quality of health services offered in orthodontic practice, but so far there is no published data on studies on the awareness and motivation of children and their parents regarding orthodontic treatment.

The analysis of the patient's awareness and motivation to obtain orthodontic treatment in the context of the need to improve oral health and socialization is a tool for enhancing the quality of orthodontic care and the quality of life of the individual and society.

That is why we present to the attention of doctors of dentistry, specialists and specialists in orthodontics and pediatric dentistry this work "Informing and motivating for orthodontic treatment through the eyes of the orthodontists, children and parents" to explain the concepts of directing the patient for orthodontic aid. We hope that with the present work we will support the decision-making process for orthodontic treatment in the established active and adequate cooperation between children and their parents on the one hand and the orthodontist on the other.

Given that the conditions for access to orthodontic care for children and adolescents at this time are not favorable and they are not a priority of health care, studying attitudes in the family and children's inclination to long-term care are possible ways of providing adequate motivation tool in the form of timely and appropriate information.

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