INTERNATIONAL JOURNAL OF PAEDIATRIC DENTISTRY

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Editor-in-Chief
Göran Dahllöf

Abstracts of the 22nd Congress of the
International Association of Paediatric Dentistry
Munich, Germany, 17–20 June 2009

Volume 19 – Suppl. 1
June 2009

WILEY-BLACKWELL

The official journal of
The International Association of Paediatric Dentistry
The British Society of Paediatric Dentistry

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Oral Session O06 – Special Needs Patients 2

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Oral Session O06/Special Needs Patients 2

O06–40

Assessment of autistic patients from a special dental care service

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Introduction: Autism is defined as severe psychiatric disorder that appears in infancy and persists throughout life. Affected patients offer a special challenge to the practising dentist. This study assessed the oral health status of children with autism syndrome to help establish the oral health needs of this population and investigate the efficacy of some dental management strategies.
Materials and methods: Thirty eight patients, follow up between 2004 and 2008 presenting autistic syndromes were included. For each of them, an index card recapitulating personal and medical datas and recount the oral follow-up was constituted. Data were then analysed to characterized this specific population, to review the types of care and the techniques used and finally, to describe the follow-up of these patients from the first consultation to the maintenance.
Results: 94% required care at first consultation, 57% benefited from restorative care, 52% from tooth extraction, 30% from professional tooth cleaning Concerning the approach of care 43.5% required premedicative sedation at least once, 65% required nitrous oxide/oxygen inhalation at least once, 35% required premedicative sedation and nitrous oxide/oxygen inhalation in association and 17% of failure were noticed. Average number of appointment by patients was 5, 6.
Conclusion: This study shows the importance of their need in care, thus the necessity to double efforts in term of prevention and follow-up. This study also underlines the interest of the sedation with MEOPA allowing the realization of conservative cares and avoiding the general anesthesia.

O06–41

Child abuse and neglect: is Indian dental professional aware?

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Introduction: Maltreatment of children continues to be a major social and health problem. Abuse often results in countless tragedies involving the physical, cognitive or emotional impairment of a child that may extend into adulthood. Dental health professionals continue to under-report child abuse, despite growing awareness of their potential role in detecting this crime.
Materials and methods: A questionnaire was given to 500 dentists across Kanpur and Lucknow city of Uttar Pradesh State in India. Both general dentists and selected specialists were included in the study group. The questionnaire consisted of multiple-choice and dichotomous yes/no questions.
Results: Only 154 dentists had suspected a victim of child abuse in their practice and most of them showed hesitancy in reporting such cases to the authorities, the main reason for which being the lack of knowledge about abuse and dentists role in reporting it. Also there was a concern about the effect reporting such cases would have on their practice.
Conclusion: Every dental professional who has an understanding of their involvement in this issue can lead to a feeling of acceptance-an acceptance that we can do something to stop this awful epidemic. It is time that awareness and concern about child abuse identification, laws and reporting is improved among the Indian dental professionals.

O06–42

Dental health in 12–17-year-old German athletes with mental disabilities

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Introduction: Few data about dental health of adolescents with mental disabilities are available. Aim of this study was to assess dental health in adolescent German athletes who participated in the German Special Olympics National Games 2008.
Patients and methods: All 3600 athletes participating in the GSPONG 2008 were offered to have various medical check-ups and a dental examination for free. 635 athletes agreed to have a dental examination which was performed according to WHO criteria by calibrated dentists so that DMFT values could be recorded. Caries diagnosis was based on visual examination without radiographs. Some informations about oral hygiene procedures were also collected.
Results: 160 athletes aged between 12 and 17 years could be examined and 42% of them were caries-free (D3MFT = 0). The mean values for DMFT, DT, MT and FT were 2.3, 0.72, 0.19 and 1.41 respectively. At least one fissure sealant was observed in 52.5% of the athletes. 92% of the young athletes reported to brush their teeth without needing support by others.
Conclusions: It seems that dental health of German adolescents with mental disabilities being able to participate as athletes in a sport event is about the same as in German adolescents without such disabilities. This unexpected positive result is very encouraging but contradicts clinical experience. The group examined here certainly is not representative for the whole adolescent population with mental disabilities. Representative studies for this special population are urgently required. This study was supported by IZZ and Special Olympics Germany e.V.

O06–43

Comparing quality of life in 4–7 year-olds with cleft-lip-palate with normative data

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Introduction: Cleft lip and palate (CLP) is the most common congenital cranio–facial abnormality. The intensive nature of the interventions and the psychosocial burden of the cleft may have a lasting impact on the child. The aim of this study was assessment of

the psychosocial functioning of 4–7 year-olds with non-syndromal CLP.

Patients and methods: HRQoL was assessed with the revised German KINDL HRQoL questionnaire. This instrument consists of a 5-point 24-Likert-item questionnaire, distributed in to six domains (physical well-being, emotional well-being, self-esteem, family life, friends and school). In addition, a chronic generic module and a specific parent module had been added to the core KINDL questionnaire. The total score is the sum of all item scores. Higher scores indicate better QoL. All parents of 4–7 year-olds with non-syndromal CLP attending the multidisciplinary CLP centre at Cologne University Hospital were invited to participate in the study.

Results: A total of 74 families were contacted and 61 of them participated in the study (82% response). The 61 children (32 boys and 29 girls) had a mean age of 5.39 years. The mean values for the total scale was slightly lower in children with CLP (M = 77.64) when compared with non-CLP children (M = 79.91); $P < 0.03$.

Conclusions: This study demonstrated that 4-year old children with CLP do not appear to experience major psychosocial problems when compared with their non-CLP peer. However, professionals should continue to intercede in order to prevent or interrupt negative psychosocial outcomes in children with CLP as part of a multidisciplinary approach.

O06–44

The oral health of children considered high risk for infective endocarditis

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Introduction: Children with previous experience of infective endocarditis (IE) or with prosthetic heart valve are considered at high risk for infective endocarditis. The aim of this study was to compare the dental health of a group of these children with a group of healthy controls and to determine parental awareness of the importance of good oral health.

Materials and methods: Children with previous IE or a prosthetic heart valve, under the care of the paediatric cardiology unit at Leeds General Infirmary, were identified at out patient review clinic. Control group consisted of children attending for investigation of a heart murmur that were subsequently diagnosed as having no structural cardiac defect. Children had an oral examination by a single trained examiner. Questionnaires were distributed to the parents to assess awareness of oral health. Ethical approval for this study was obtained from Harrogate Research Ethics Committee. Guardians of all children involved in this research gave written informed consent.

Results: A total of 56 children between 3 and 18 years old were examined for dental caries. Of these, 28 children compromised the study group and 28 the control group. There was no significant difference in dmfs, DMFS, dmft and DMFT scores between the study group and control group. However, the dmfs in the primary dentition of the study group was high at 6.86 (± 9.84). Parental knowledge of the link between oral health and infective endocarditis was excellent (100%).

Conclusions: There were no significant differences between the oral health of cardiac children and healthy children. However, the dmfs and DMFS scores of the study group were high, indicating a need for oral health to be constantly reinforced by the dental and cardiac team.

O06–45

The dental findings of coeliac disease in children

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Introduction: The aim of this study was to evaluate the effects of coeliac disease (CD) on: (i) dental enamel defects; (ii) salivary cariogenic microflora; (iii) buffer capacity; (iv) plaque pH; (v) stimulated salivary flow rate; and (vi) caries experience.

Patients and methods: The study was approved by the Ethical Committee of Ege University. Thirty-five children aged 6–19 years suffering from CD for at least 2 years and 35 healthy children of the same age participated in the study. Enamel defects were diagnosed and classified by Aine's classification. Dental caries was recorded using WHO criteria. A questionnaire related to medical history, diet, oral hygiene habits and use of fluoride was filled out by all subjects. Saliva samples were collected to measure the stimulated salivary flow rate. Salivary mutans streptococci (MS) and lactobacilli (LB) were measured by CRT Bacteria (Ivoclar–Vivadent, Liechtenstein). Buffer capacity and salivary pH were estimated by Saliva Check Buffer (GC Corporation, Japan). Plaque pH was recorded using Plaque İndicator Kit's (GC Corporation, Japan) scale. All data were analysed using *t*-test, chi-square test, NPar Tests and Mann–Whitney U–tests.

Results: The enamel defect prevalence was significantly higher in CD group. The prevalence of salivary MS and LB colonizations were found significantly higher in the healthy group. However, the difference of DMFS and dfs values between CD and healthy groups were not statistically significant.

Conclusion: This investigation has shown that Coeliac disease increased the prevalence of developmental enamel defects in permanent teeth. It could be suggested that this dental finding could be an additional clue in the early diagnosis of coeliac disease.

O06–46

Oral health status of children with renal disorders

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Introduction: Advances in pediatric nephrology have resulted in a marked increase in the survival rate of children with renal disorders. Renal disease is characterized by multiple organ involvement, including soft and hard tissues of the oral cavity. Data regarding the oral health of Indian children with renal disorders is scarce. Thus the aim of this study was to assess the oral health status of children with renal disease.

Patients and methods: The study was conducted at the department of nephrology, SMS Hospital, India. Prior to the study, permission and ethical clearance was obtained from the institutional ethical committee. Written informed consent was taken from the parents. Thirty six children aged 4–14 years, diagnosed with renal disorders were selected. Data pertaining to demographics, drug history, and body mass index and blood investigations were obtained from hospital records. The WHO criteria were used to diagnose dental caries (1997) and enamel defects (1982). Oral hygiene status and salivary parameters were also assessed. The data was analysed using the software SPSS version – 15.

Results: High blood urea (43.06 mg/dl) and serum creatinine (1.549 mg/dl) levels were seen in these children. Their BMI ranged from 12.91 to 42.86, with a mean of 20. Enamel defects were seen in 58.3% of children. Their mean deft and DMFT scores were 1.5 and 0.5, respectively. The mean OHI–S score was 1.56.

Mean salivary pH was 6.9, while the buffering capacity of stimulated saliva was 9.6

Conclusion: Although these children exhibited decreased dental caries, their immunosuppression poses them to a high risk of bacteremia. Thus it is essential for pediatric dentists to implement preventive and comprehensive oral health care regimens at an early stage.

O06–47

Evaluation of parodontium and oral hygiene state in children with asthma

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Introduction: Asthma is a chronic inflammatory disease. Inhaled corticosteroids are the most effective asthma treatments. The aim of the study was to evaluate the state of parodontium and oral hygiene in asthmatic children treated with steroid inhalers, illness duration, drug dose, with reference to healthy group.

Patients and methods: 336 children, 3–16-years-old, were examined, including 168 asthma sufferer and 168 healthy ones. Asthmatic children were categorized according to the disease duration, < 4 years; 4–8 years; > 8 years; the drug dose – low, medium, high. The evaluation of parodontium was done with the use of the GI and CPI and oral hygiene with OHI-S. Results were statistically analysed (U–Mann–Whitney, Kruskal–Wallis and χ^2 tests). The permission for these studies was obtained from the Ethical Committee and subject's guardians gave written, informed consent.

Results: In 3–5-year-olds asthmatic children mean OHI-S index was 1.22, in healthy ones 0.43 and GI 0.66 and 0.12 respectively. In 6–11-year-olds asthmatic children mean OHI-S was 1.83, in healthy ones 1.54 and GI 1.20 and 0.86 respectively. In 12–16-year-olds asthmatic children mean OHI-S was 1.79, in healthy ones 1.48 and GI 1.23 and 0.89 respectively. Mean OHI-S index in children treated with low drug dose was 1.45, medium – 1.68, high – 1.96; in treated for 0.5–3 years 1.43, 4–8 years 1.94, 9–15 years 1.70. Mean GI index in children treated with low drug dose was 0.84, medium – 1.15, high – 1.31; in treated for 0.5–3 years 0.88, 4–8 years 1.30, 9–15 years 1.10.

Conclusion: Asthmatic children have significantly worse oral hygiene and periodontal condition than healthy ones.

