

Prevalence Of Oral Lesions In Pregnant Patients

Research Article

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Abstract

Aim of this study is to analyse the prevalence of oral lesions in pregnant patients. Oral changes observed during pregnancy have been studied for many years, but the frequency of them are not stressed upon. The numerous changes occurring during pregnancy affect every body system, resulting in localized physical alterations in almost all parts of the body, including the oral cavity. A total of 28 pregnant patients were taken into the study from various clinical departments, Saveetha dental College, Chennai. The data was collected from case sheets of patients who reported for various dental treatments between the period of June 2019 to March 2020 which consists of patients demographic data, personal history, medical history, intra and extraoral findings and photographs which are taken with patients concern. The results indicated the most common oral lesion present was gingival enlargement. There was no association between age and oral lesion. There was no prevalence of oral lesions in pregnant patients. Female patients should be informed about the role of oral health during pregnancy and the possible complications for their child's well being. If required they should refer to the dental clinician for preventive oral care and treatment.

Keywords: Age; Females; Oral Lesion; Pregnant Patients.

Introduction

Oral lesions can be a ulcer or a lesion on the mucous membrane of the oral cavity. It might be caused due to localised trauma, infections, systemic conditions, dermatological disorders. The prevalence rate of oral lesions is 4.1% in South India [1]. Oral mucositis has severe physical and mental disability during the course of the treatment prompting interventions either to prevent such occurrence or treat them [2].

The pathology in the oral tissues can be detected in saliva, as it contains the exfoliated cells from the immersed tissue [3]. Most common oral lesion which occurs in the oral cavity is recurrent aphthous ulcer. Some pathological changes are seen in the oral cavity in women during pregnancy due to the role of sex hormones in the vascular changes seen in gingiva during the pregnancy. The sex hormones also alter the normal sub gingival Microflora and immune response in the oral cavity [4]. Most commonly seen oral changes during pregnancy are pyogenic granuloma and gingivitis

[5].

Pallor of the oral mucosa due to anaemia is also seen, but these are less specific changes associated with the general health of the women. Pregnancy affects nearly every aspect of a woman's life including her oral health. Hormonal changes in the body during pregnancy make them more susceptible to oral infection and gum diseases. These dental problems not only affects the mothers but also the developing foetus.

Apart from the effects of hormonal changes, other factors such as HIV infection, lack of dental care, poor oral hygiene, smoking, low educational level, low employment status, increased age, and ethnicity contribute to a worsened periodontal condition during pregnancy.

There are even chances of getting pregnancy tumor which most frequently develops on the buccal gingiva in the interproximal tissue between teeth. This benign hyperplastic lesion of the oral

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mucosa occurs in up to 5% of pregnancies[6]. Pregnancy tumor usually occurs at the end of the first trimester and rapid growth usually accompanies the steady increase of circulating estrogens and progesterones. Repeated mild irritation with gestational steroid changes may subsequently exacerbate inflammatory response, leading to development of this proliferating lesion.

It is important for female patients to be aware of these conditions. Normally pregnancy does not contraindicate with dental treatments. The patient must be counselled about these transient changes, treatment plan, and reassured accordingly in their pregnancy period. Previously our team has a rich experience in working on various research projects across multiple disciplines The [7-9][10-21]. The aim of the study is to analyse the prevalence of oral lesions in pregnant patients.

Materials And Methods

The study conducted was a retrospective university setup study consisting of a total of 28 pregnant patients were taken into the study, these patients were selected from the outpatient of each clinic who had come for various dental treatments, saveetha dental College and Hospital, Chennai, India.

The inclusion criteria of the study was-pregnant patients who had come to dental OPD for dental treatments for a period of nine months from(June 2019 to April 2020). Two examiners were involved in the study both evaluated the data from the reports of 86000 patients reports.

Data Collection

The collected data was based on patients who were pregnant and the data were only collected based on patient records.

Statistical Analysis

The collected data was entered in an excel sheet and tabulated. It was then imported to SPSS software version 19. Descriptive sta-

tistics was used to know the prevalence of oral lesions in pregnant patients . The dependent variable was pregnant patients and the independent variable was age,type of oral lesions.

The ethical committee approval was obtained from the institutional ethical committee. Simple random sampling was done to eliminate bias. The. SPSS software was used to analyse the collected data..

Results And Discussion

Santosh R Patil, did a similar study but with the controlled group and he found that the changes in the oral cavity due to pregnancy was high and gingival inflammation was most commonly present compared to the control groups [22]. This study was not in accordance with our current study.

However, Dr Apeka S Dhole ,did a study on oral mucosal lesions prevalent in ANC women in Nagpur population and she concluded that there was no association found between oral mucosal lesions and trimester and age of patients [23]. This study was in accordance with our current study where there was no association or prevalence of oral lesions in pregnancy.

Swati Patil, stated that proper dental healthcare programme should be conducted to improve the dental health and to increase the awareness of hygienic practice in pregnant women [24].

This study reports a retrospective investigation done only with the information obtained from the reports of 86000 patients, in the future large population and long-term follow-up can be considered for further studies and it would be helpful for awareness of dental health or oral health in pregnant patients and to prevent oral lesions and maintain good oral health for pregnant patients.

Comparing the above studies the study has almost patient with no oral lesion in pregnancy 89.2%, 10.7% of patients only had oral lesion in pregnancy and it is in accordance with previous literatures. A larger sample size and a long term follow up stud-

Figure1 : Bar chart represents the prevalence of oral lesion in pregnant patients, Majority of the pregnant patients did not have any oral lesions.

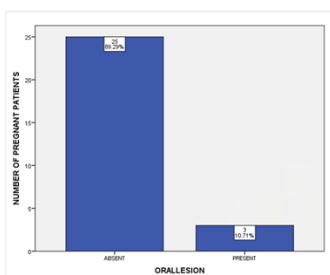
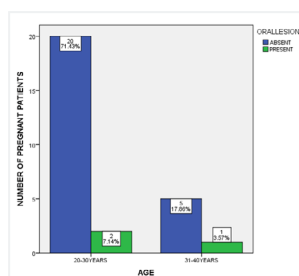


Figure 2: Bar chart shows the association between Oral lesions in pregnant patient and different age groups. Chi square test was done where the Pearson-chi square value is 0.238 and the p value is 0.595 (>0.05) showing that the study is statistically not significant. Oral lesions in pregnant patients are more prevalent in age group of 20-30 years followed 31-40 years patients in pregnancy.



ies may be considered to improvise on this study. Our institution is passionate about high quality evidence based research and has excelled in various fields [25-35].

Conclusion

From the study conducted it is understood that there is no prevalence of oral lesion in pregnant patients. Clinicians should have a good knowledge and should pay attention to the oral findings while diagnosis. Female patients should be informed about the role of oral health during pregnancy and the possible complications for their child's well being. If required they should refer to the dental clinician for preventive oral care and treatment.

Author Contributions

Jaya keerthana carried out the retrospective study, planning the study design, collection and analysis of data and drafted the manuscript. Dr. Maragathavalli aided in conception of the topic, supervision and appraisal of the manuscript.

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