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Oral health: The silent affliction in Uganda

Jacob W Buganga
Makerere University, Uganda

Oral health concerns step develop as early as 2 years when the milk teethe attempt to prick through the gums, trough adolescent-hood when the last (wisdom) teeth dig through the gums and create storage park for food debris. The author explores the dental health from experiential, and observation and discussion with outpatients, to develop the paper, with emphasis on the causes, symptoms, impact, and healing strategies as the objectives. Ignorance is the leading factor to poor public health dentistry; poor nutrition for the majority of Ugandans is associated to poverty; unhealthy food choices; and work stress and the limited time to brush. The symptoms that characterize a perennial oral health problem start simple ad end up very complex; painful episodes are common during cold weather and stressful situations, anxieties, and depression conditions, swelling of the lymph nodes; and diminishing immunity paves way for other health conditions like ulcers and persistent headaches. Pain makes hard to concentrate on anything; diminishing productivity, and high costs of treatment. When complication persists, seek superior services in bigger, referral hospitals. Oral health is one of the greatest indicators of wellbeing usually neglected by individuals and policy makers. Limited emphasis is put on it. As a result, it emerges as one of the silent yet predominant ailment among the general population across the divide. There is need to increase awareness and access to medical and support services for all sections of the community.

jwaiswa@arts.mak.ac.ug