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Perceived connections between oral health and stress among pregnant women: A study in Saudi Arabia

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Background: Although stress during pregnancy has negative effects on children's development and pregnant women's health, no study has assessed stress and its predictors among pregnant Saudi women.

Aim: The aim of this study was to assess the relationship between sociodemographic and self-reported oral health problems and perceived stress in a sample of pregnant Saudi women.

Materials & Methods: A cross-sectional study was carried out at King Abdulaziz Medical City in Riyadh, Saudi Arabia, on 438 pregnant women who attended the obstetrics/gynecology clinic. We collected data on their sociodemographic and oral health status. Stress was assessed using the perceived stress scale.

Results: 33.4% of the sample reported high stress. The study revealed significantly high stress in women with no or low income, chronic disease, sleep deprivation, no teeth brushing, irregular eating patterns, gestational diabetes and no family support ($P < 0.05$). Self-reported oral health problems were significantly associated with high stress ($P < 0.05$). A multiple linear regression model shows no teeth brushing; chronic disease, sleep deprivation, gestational diabetes and gingival redness predicted an increase in stress by (3.6, 2.4, 2.1, 1.4 and 1.4, respectively).

Conclusions: It was estimated that 3 in 10 pregnant women in our hospital reported high stress levels. Our study shed light on the relationship between healthy habits, oral health status, and perceived stress in pregnant women. This research may help healthcare practitioners who provide care to pregnant women to educate them in regard to healthy habits and to develop a program to reduce stress.

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The use of tads (temporary anchorage devices) in lingual orthodontics

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In recent years, there has been a dramatic increase in the number of adults receiving comprehensive orthodontic treatment. In clinical practice, management of adults may be somewhat different than for most adolescents. Adults are more likely than adolescents to have dentitions that have undergone some degree of mutilation over time, which may necessitate alterations in the treatment strategy. Excessive wear, missing and compromised teeth are some of the differences observed. For adult patients who have experienced bone and attachment loss as a consequence of periodontal disease, new biomechanical options and temporary bone anchorage devices can be employed for producing the tooth movements desired during the orthodontic therapy. In this presentation, current clinical application of Temporary Anchorage Devices (TADs) in Lingual orthodontics will be presented, with emphasis on clinical orthodontic management of severely mutilated dentitions. After an introduction and biological background on different types of TADs, the Author will describe the use of miniscrews for lingual orthodontic patients, the best anatomical sites depending on the desired biomechanical planning. Various clinical examples will be shown to describe the step by step procedure for insertion and loading. Lingual Orthodontics nowadays can surely benefit from TADs for reinforcing the anchorage, especially in adults with compromised dentitions and periodontium.

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