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

Anwar E Ahmed¹, Alhanouf N Albalawi², Asma A Alshehri³ and Rand M AlBlaihed²

¹King Saud bin Abdulaziz University for Health Sciences, Saudi Arabia

²Riyadh Colleges of Dentistry and Pharmacy, Saudi Arabia

³King Khalid University, Saudi Arabia

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.

alalbalawi1@gmail.com

Multiple uses of palatal mini-implants for treatment of skeletal maxillary construction and class II malocclusion in an adult patient

Emre Kayalar¹, Ayşenur Batu Güney², Gülnaz Marşan² and Sönmez Firatlı²

¹Anadolu University, Turkey

²Istanbul University, Turkey

Palatally inserted orthodontic mini-implants can be used multifunctional via more than one technique in the same patient. A young adult female patient with a skeletally narrow maxilla and bilateral mesial migration of the molars was treated using two mini-implants inserted in the palate for skeletal anchorage. Three single-purpose appliances were used consecutively: A bone- and tooth-borne appliance (hybrid hyrax) for surgically assisted rapid maxillary expansion (SARME), a mini-implant-borne distalization appliance for molar distalization, and a mini-implant-stabilized Transpalatal Arch (TPA) for indirect anchorage during incisor retraction. The use of palatal mini-implants reduced the adverse side effects on SARME and eliminated the need for treatment with indirect cervical headgear. Bodily molar distalization was achieved within an acceptable length of treatment time. Moreover, the mini-implant-stabilized TPA was used for en-masse retraction of anterior teeth without require any alterations in treatment mechanics, with the routine conventional orthodontic mechanics.

drkayalar@me.com