



22nd BaSS Congress

Contemporary Challenges
in Dentistry

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ABSTRACT BOOK





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Contemporary Challenges in Dentistry
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sample itself is also specific issue, and depends on many moments, such as its size, type, environment, etc. The aim of this paper is to discuss these sample characteristics. METHODS AND MATERIALS Three studies in Sarajevo Faculty of Dentistry were conducted during years, where DFA presence in children aged from 8 to 15 years was determined. The studies were not related, one comprised of 120, another of 400 patients, and the third of 636 patients. The sample for the first and second study was clinical and for the third school-type. DFA presence was determined by CFSS-DS scale, where normative values of this instrument were estimated. RESULTS Normative results (internal consistency reliability and construct validity) were statistically significantly better in bigger samples (Cronbach alpha ≥ 0.9 , over 60% of total variance explained). Similarly, school-type sample and environment also seemed to produce better results in explaining of DFA presence nature. Subclinical cases of DFA presence also appeared as important part of explaining problems in child dental behavior in the office. CONCLUSION Sample size and type, as well the environment where the study of DFA presence evaluation is taking place could strongly interfere to the obtained results.

PP.321. BODY MASS INDEX RISK FOR THE DEVELOPMENT OF DENTAL CARIES OF 12 YEAR-OLD PUPILS

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Obesity and the oral health have common risk factors with a special attention given to the unbalanced diet. The prevalence of obesity in children was our challenge. We focused our objective on determining the relationship between high weight and the presence of dental caries. Our research included a total of 100 pupils from both genders (30-control group without DMF and 70-an experimental one with DMF) at the age of 12 from the local elementary schools in Shtip. The determination of BMI in % was conducted following the patterns of BMI and using the tables provided by the C.D.C and Prevention and the specialized software of the WHO (AnthroPlus v1.0.4) which enables to estimate the data for the body weight of children and adolescents by generating values given in % which determines the category of BMI in charts. The examinees were divided in 4 categories: low weight BMI < 5%, normal weight = 5-30%. The presence or absence of caries process was noted using the Klein-Palmer index. There is no significant relation between the BMI in children and the presence of dental caries for Pearson Chi-square = 0,92 and $p > 0,05$ ($p = 0,82$). In determining the significance of the contribution for the presence of dental caries in every component where the increased body weight was taken as a reference category it has been noted that in the experimental group the greatest influence is in the increased weight group (Wald = 0,76 / $p > 0,05$ ($p = 0,38$)) then in the normal weight (Wald = 0,23 / $p > 0,05$ ($p = 0,63$)) and with the least influence found in the low weight group (Wald = 0,01 / $p > 0,05$ ($p = 0,92$)). In the presented distribution of data concerning the weight in children with permanent dentition for the correlation of the presence of dental caries for the Fisher's Exact Test = 1,08 and $p > 0,05$ ($p = 0,840 / 0,826 - 0,845$) showed no significant difference between the two groups. The relevance of the high or low levels of BMI for the development of dental caries still remains. It should be pointed out that there are various factors for the increased index of caries in children and a significant one is still the high BMI and the low socio-economic background. Key words: DMFT, BMI-index

