## "INFLUENCE OF SOCIO-ECONOMIC CONDITIONS ON THE OCCURRENCE OF DENTAL CARIES IN CHILDREN WITH PERMANENT DENTITION"

Epidemiological studies conducted to assess the relationship between oral health and socio-economic conditions indicate that low socio-economic status is associated with higher prevalence of dental caries. It is considered that the reason for the connection between oral health and socio-economic status is due to the fact that it provides / does not provide access to resources for obtaining oral health information, which especially emphasizes the consumption of sugar, oral hygiene, preventive activities and regular dental examinations.

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For the realization of the set goals for observed children are randomly selected from the primary schools in the city of Stip. A total of 71 (100.00%) children make up the group with permanent dentition. 40 (56.30%) of them belong to the experimental group in which 16 (22.50%) children are female and 24 (33.80%) are male. In the control group consisting of 31 (43.70%) children, 10 (14.10%) children are female and 21 (29.60%) children are male. The age group of 12 years was selected according to the recommendations of the WHO, which recommends that age for global monitoring of dental caries and applies only to children with permanent dentition. We performed the dental examinations using portable lamps with power of 60 W with white-blue spectrum and sterilized periodontal probes No. 5 and a mirror. To avoid visual fatigue, a maximum of 15 children were observed during one day. We used specially structured questionnaires to determine the socioeconomic status of the respondents families and their behavioral habits towards dental and oral health.

Based on the survey and the answers to the questions about the socio-economic status of the families, the evaluation was as follows: Skor o - high, Skor 1 - medium, Skor 2 - low. Distribution of data related to the socio-economic status of children with permanent teeth for the experimental group 10 (14.10%) children had low socio-economic status, 16 (22.50%) with medium and 14 (19.70) %) children had a high socio-economic status. In the control group all 31 (41.90%) children had average socio-economic status. In the displayed distribution of data on the socio-economic status of children with permanent teeth is for Fisher's Exact Test = 31.10 and p <0.001 (p = 0.000 / 0.000-0,000) there is a significant difference between the two groups.





The examined relationship between the socio-economic status of children with permanent dentition and the intensity of dental caries for R = 0.15 (p> 0.05) found a weak insignificant correlation. With the increase of the socio-economic status of children with permanent dentition, the presence of dental caries in children increases. The association of socio-economic conditions can be used as a serious screening factor and seriously participate as an instrument for caries risk assessment.