LETTER TO THE EDITOR

Ephebodontics: Camouflaged Pediatric Dentistry

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ABSTRACT

The transitional period between puberty and maturity is known as adolescence. Due to hormonal changes during this age, teenagers undergo a lot of physical, emotional, and psychological changes. There is a variety of oral afflictions that are seen during adolescence. Behaviors related to peer pressure, substance abuse, bad oral habits make dental management a challenge in this age. This article discusses the dental problems commonly seen in adolescents and the preventive methods available for the same.

Keywords: Adolescents, Ephebodontics, Oral health, Pediatric dentistry, Piercings, Prevention, Preventive dentistry.

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INTRODUCTION

The dental needs of adolescents differ largely from other established age groups. Physical, emotional, and psychological changes seen in this age need the formulation of a specific healthcare protocol.1 Independence, autonomy, peer interaction, and peer acceptance are paramount at this age. Of all the health issues among adolescents, oral health receives the least attention. A thorough examination of the oral cavity may reveal clues as to undisclosed systemic diseases and associated habits including sexually transmitted infections, diabetes, tobacco, and drug usage.2 Parents are often ignorant about any dental problems occurring in a child’s mouth unless he or she complains of pain. Many dental grievances are addressed during adolescence, by which time they have been completely established. Patient education and creating awareness through preventive oral health programs are critical in maintaining good oral health among adolescents.

Dental Problems Associated with Adolescence and their Management

In teenagers there is always an increased risk of traumatic injuries to teeth due to contact sports, rapid changes in occlusion following untimely exfoliation or extraction of teeth, congenitally missing teeth, caries, ectopic eruptions, gingivitis, etc. Tobacco, alcohol and substance abuse, dietary disorders like anorexia, bulimia and adonis complex that affects the dental complex, and unaesthetic oral effects due to piercing of oral musculature can also be seen.3,4

A preventive dentistry program should be fabricated for every adolescent visiting the dental clinic/operatory. Primary preventive measures should include instructions regarding appropriate usage of fluorides and dental sealants, oral hygiene care as well as diet counseling and management.5 Diet analysis and counseling should also warn against disordered eating, which involves various unhealthy weight control practices such as fad dieting, fasting, vomiting, and misusing diet pills, diuretics, or laxatives.6,7 A comprehensive trauma prevention program is needed to help reduce the incidence of traumatic injury to the adolescent dentition. Oral piercings and jewelry has become one popular form of adornment within adolescent culture. Tongue piercing, tongue splitting, frenum piercing are all unregulated surgical procedures with multiple intraoral, systemic, and life-threatening dangers, all of which have been well documented in dental and medical literature.8

CONCLUSION

The emphasis of this paper is to create an awareness of the common dental problems seen in this age group but are often ignored and accordingly to formulate a preventive/treatment plan so that the developing occlusion can emerge into a healthy class I occlusion. Given the nature of the complex oral health issues arising during adolescence, it is of utmost importance to incorporate specific ephebodontic protocols in dental education and management.

REFERENCES
