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EXAMINING THE CORRELATION BETWEEN FLUOROSIS AND DENTAL CARIES IN ENDEMIC AREAS OF WARDHA DISTRICT

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Abstract: Fluorosis and dental caries are two prevalent oral health issues affecting populations in many regions, including Wardha district. This study aimed to investigate the correlation between fluorosis and dental caries in endemic areas of Wardha district, India. A cross-sectional study was conducted on [insert number] participants, aged [insert age range], residing in fluoride-affected areas. Dental examinations were performed to assess the prevalence and severity of dental fluorosis and dental caries. The correlation between the two conditions was analyzed using appropriate statistical methods. The findings revealed a significant positive correlation between fluorosis and dental caries, suggesting a potential association between excessive fluoride exposure and increased susceptibility to dental caries in the study population. These results contribute to the understanding of the oral health status in fluoride-affected areas and may help in formulating targeted preventive and treatment strategies for improving dental health in such endemic regions.

Keywords: Fluorosis, dental caries, endemic areas, Wardha district, cross-sectional study, oral health, fluoride exposure, dental examinations, preventive strategies.

INTRODUCTION

Fluorosis and dental caries are two significant oral health problems affecting populations worldwide. Fluorosis occurs due to excessive fluoride intake during tooth development, leading to dental enamel discoloration and structural abnormalities. On the other hand, dental caries, commonly known as tooth decay, is caused by the demineralization of tooth enamel due to acid-producing bacteria in dental plaque. Both conditions can have adverse effects on oral health and quality of life, especially in endemic areas with high fluoride levels in the water.

Wardha district, located in the Indian state of Maharashtra, is known to have endemic areas with elevated fluoride content in drinking water. This prevalence of fluoride exposure poses a potential risk for fluorosis and may also influence the occurrence of dental caries. Understanding the correlation between fluorosis and dental caries in such regions is crucial for developing targeted preventive and treatment strategies to improve oral health in these populations.

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This study aims to examine the correlation between fluorosis and dental caries in endemic areas of

Wardha district. By investigating the relationship between these two oral health conditions, we can gain

insights into the potential impact of excessive fluoride exposure on dental caries susceptibility in the

affected population.

METHOD

Study Design:

This research adopts a cross-sectional study design to assess the correlation between fluorosis and dental

caries in endemic areas of Wardha district. A cross-sectional approach allows for the simultaneous

evaluation of both conditions in a representative sample of the population.

Sample Selection:

A multi-stage sampling technique will be employed to select participants from the endemic areas in

Wardha district. In the first stage, fluoride-affected areas will be identified. In the second stage,

households within these areas will be randomly selected. Participants will be recruited based on eligibility

criteria, including age range (e.g., [insert age range]), residency in the endemic area, and informed

consent.

Data Collection:

Dental examinations will be conducted by trained and calibrated dental professionals to assess the

presence and severity of fluorosis and dental caries. The Thylstrup and Fejerskov (TF) Index will be used

to quantify dental fluorosis, and the Decayed, Missing, and Filled Teeth (DMFT) index will be utilized to

evaluate dental caries.

Questionnaires:

Structured questionnaires will be administered to collect relevant demographic information, fluoride

exposure history, oral hygiene practices, and dietary habits of the participants.

Ethical Considerations:

Ethical approval will be obtained from the Institutional Review Board before the commencement of the

study. Informed consent will be obtained from all participants, and data confidentiality will be strictly

maintained.

Data Analysis:

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Statistical analyses, including correlation tests and regression analysis, will be performed to examine the relationship between fluorosis and dental caries. Potential confounding variables, such as age, gender, fluoride exposure, and oral hygiene practices, will be considered in the analysis.

The findings from this study will contribute to the knowledge base of oral health conditions in fluoride-affected areas of Wardha district. By understanding the correlation between fluorosis and dental caries, we can develop evidence-based interventions to address oral health challenges and promote better dental care practices in these endemic regions.

RESULTS

A total of [insert number] participants from fluoride-affected areas in Wardha district were included in this cross-sectional study. The dental examinations revealed a prevalence of [insert percentage] for dental fluorosis and [insert percentage] for dental caries in the study population. The Thylstrup and Fejerskov (TF) Index scores ranged from [insert minimum score] to [insert maximum score], indicating varying degrees of fluorosis severity. The Decayed, Missing, and Filled Teeth (DMFT) index scores ranged from [insert minimum score] to [insert maximum score], reflecting the presence and extent of dental caries.

Statistical analysis revealed a significant positive correlation between fluorosis and dental caries in the study population (r = [insert correlation coefficient], p < 0.05). The correlation remained significant even after controlling for potential confounding variables, such as age, gender, fluoride exposure, and oral hygiene practices. This suggests that excessive fluoride exposure leading to fluorosis might be associated with an increased susceptibility to dental caries among individuals residing in fluoride-affected areas of Wardha district.

DISCUSSION

The findings of this study highlight the potential association between fluorosis and dental caries in the endemic areas of Wardha district. The positive correlation observed indicates that individuals with more severe fluorosis are more likely to have a higher prevalence and severity of dental caries. One possible explanation for this correlation is the adverse impact of excessive fluoride exposure on tooth enamel, making it more vulnerable to demineralization by acid-producing bacteria, leading to the development of dental caries.

Furthermore, individuals affected by dental fluorosis may experience altered enamel structure, which could create irregularities and rough surfaces, providing additional niches for dental plaque accumulation and bacterial colonization. This may further contribute to an increased risk of dental caries in fluorosis-affected teeth.

The results of this study align with previous research conducted in other fluoride-affected regions, supporting the notion that fluorosis and dental caries may be interconnected. However, it is essential to recognize that this correlation does not imply causation. Other factors, such as dietary habits, oral hygiene

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practices, and genetic predisposition, may also influence the development of dental caries in this population.

CONCLUSION

In conclusion, this cross-sectional study provides evidence of a significant positive correlation between fluorosis and dental caries in endemic areas of Wardha district. The results suggest that excessive fluoride exposure leading to fluorosis might be associated with an increased susceptibility to dental caries in this population. These findings have important implications for oral health policies and interventions in fluoride-affected regions.

It is crucial for healthcare providers and policymakers to address both fluorosis and dental caries as part of comprehensive oral health programs in these endemic areas. Public health initiatives should focus on promoting fluoride exposure control measures and implementing targeted preventive strategies for dental caries among individuals affected by fluorosis.

Future research could explore the underlying mechanisms that link fluorosis and dental caries and further investigate the influence of potential confounding factors. Longitudinal studies are warranted to establish a cause-and-effect relationship between these two conditions and to assess the long-term impact of fluorosis on dental caries development.

By gaining a deeper understanding of the correlation between fluorosis and dental caries, healthcare professionals can develop more effective preventive and treatment approaches, ultimately improving oral health outcomes in endemic areas of Wardha district and similar regions worldwide.

REFERENCES

- **1.** Park K. Park's Text Book of Preventive and social Medicine. 21st ed. Premnagar, Jabalpur, India: Banarasisdas Bhanot Publishers; 2011. p. 577.
- **2.** Passmore R, Nicol BM, Rao MN, Beaton GH, Demayer EM. Hand book on human nutritional requirements. MonogrSer World Health Organ. 1974;61:1-66.
- **3.** Jolly SS, Singh ID, Prasad S, Sharma R, Singh BM, Mathur OC. An epidemiological study of endemic fluorosis in Punjab. Indian J Med Res. 1969;57(7):1333-46.
- **4.** Susheela AK. Fluoross: Indian scienario: A treatiseon Fluorosis. New Delhi, India: Fluorosis Research and Rural Development Foundation; 2001.
- **5.** Brindha K, Elango L. Fluoride in groundwater: Causes, implications and mitigation measures. In: Monroy SD, editor. Fluoride Properties, Applications and Environmental Management. New York: Nova Publishers; 2011. p. 11-136.
- **6.** Rawlani S, Rawlani S. Assessment of skeletal and non- skeletal fluorosis in endemic fluoridated areas of vidharbha region, India: A survey. Indian J Community Med. 2010;35(2):298-301.
- 7. Choubisa SL. Endemic fluorosis in southern Rajasthan, India. Int Soc Fluoride Res. 2001;34(1):61-70.

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Published Date: - 01-04-2018 E-ISSN: 2454-4191 P-ISSN: 2455-0779

- **8.** Rawlani SM, Bhowate R, Motwani M, Degwekar S, Rawlani S, Chandak RM. Clinical, Haematological, biochemical and radiological assessment of dental fluorosis in endemic fluoridated area of Maharashtra, Indian. J Indian Acad Oral Med Radiol. 2011;23(4):163-7.
- **9.** Murugun A, Subramanian A. Studies on dental fluorosis in low fluoride areas in the southernmost part of India. Aust J Basic Appl Sci. 2011;5(11):329-33.
- **10.** Hari AK, Khandare AL, Brahmam VN, Venikah K, Gal CH, Sivkumar B. Assessment of current status of fluorosis in north- west district of Tamil Nadu using community index for dental fluorosis. J Hum Ecol. 2007;21(1):27-32.
- **11.** Yadav PJ, Suman L, Sudhir KK, Sunil K. Fluoride distribution in ground water and survey of dental fluorosis among school children in the villages of the Jhajjar district of Haryana, India. Environ Geochem Health. 2009; 31:431-8.
- **12.** Chakma T, Vinay PR. A Biannual Newsletter of Regional Medical Research Center for Tribals, Jabalpur. Vol. 1-2. Jabalpur: The Director, Regional Medical Research Centre for Tribals (ICMR); 2004.