



Oral Health Assessment in Pakistan

Sana Hassan¹

¹Punjab Health Care Commission, Lahore, Pakistan

ARTICLE INFO

How to Cite:

Hassan, S. .(2022). Oral Health Assessment in Pakistan. Pakistan Journal of Health Sciences, 3(05). <https://doi.org/10.54393/pjhs.v3i05.301>

Corresponding Author:

Sana Hassan

Punjab Health Care Commission, Lahore, Pakistan

sana.hasan@phc.org.pk

Oral health is a standard that contributes to the general well-being of individuals and comprises all oral and linked problems that permit them to speak, eat and socialize without embarrassment, discomfort, and active disease. Dental diseases are key public health concerns worldwide due to their substantial social impact and high prevalence. Oral health has a substantial effect on the overall well-being of individuals through morbidity, pain, mortality, and diminished capacity to perform work, study, and economic and social activities. Oral diseases such as dental caries affect individual lives significantly and pose hindrances in performing daily activities. Tooth loss is mainly caused by periodontal diseases and dental caries and causes major functional impairment and limitation. A high prevalence of oral diseases is seen globally as World Health Organization (WHO) reports 60–90% of school-going children globally have experienced caries and the highest prevalence was seen in Latin American and Asian countries [1]. Pakistan is also facing dental caries as a serious oral public health concern and approximately 60% of the population have dental caries [2]. A variety of variable risk factors cause oral diseases including the use of tobacco and alcohol, sugar consumption, poor hygiene, and their fundamental commercial and social elements. The major principle underlying is the development of acid from dietary carbohydrates that bacteria ferment in plaque and saliva. Healthy plaque and saliva usually contain relatively small amounts of possible cariogenic bacteria. However, in some environmental and biological disorders like low pH environments and an increase in consumption of fermentable carbohydrates, the proliferation of acid-tolerant bacteria is seen. Oral health in populations like Pakistan is poor and their attitude and practice towards oral health hygiene is often neglected. Diet full of carbohydrates and sugars makes the problem worse. High costs of checkups and oral health treatments make it difficult for people in developing countries like Pakistan to go to the dentist. Most of the studies on dental caries contain bias and are of poor quality. Therefore, in Pakistan assessing the level of oral diseases and dental caries should be a precedence, and investments in the oral health care department should be dedicated to the development of oral health programs and policies. This will enhance the quality of life regarding oral health in this demographic area of the world.

REFERENCES

- [1] Dixit LP, Shakya A, Shrestha M, Shrestha A. Dental caries prevalence, oral health knowledge and practice among indigenous Chepang school children of Nepal. BMC Oral Health. 2013; 13(1):20. doi: 10.1186/1472-6831-13-20
- [2] Siddiqui AA, Alshammary F, Mulla M, Al-Zubaidi SM, Afroze E, Amin J, et al. Prevalence of dental caries in Pakistan: a systematic review and meta-analysis. BMC oral health. 2021 Dec; 21(1):1-2. doi: 10.1186/s12903-021-01802-x