



CODEN [USA]: IAJ PBB

ISSN: 2349-7750

**INDO AMERICAN JOURNAL OF
PHARMACEUTICAL SCIENCES**Available online at: <http://www.iajps.com>

Research Article

**DETERMINATION OF THE PSYCHOEMOTIONAL STATUS
OF THE PATIENTS DEPENDING ON THE ANOMALIES OF
TEETH POSITION AND BITE**¹Sevbitov A.V., ²Mitin N.E., ¹Kuznetsova M.Yu., ²Tikhonov V.E., ¹Kamenskov P.E.,
¹Kuznetsov I.I.¹I.M. Sechenov First Moscow State Medical University (Sechenov University), ²Ryazan State
Medical University named after academician I.P. Pavlov**Abstract:**

Beautiful and straight teeth have become an indicator of the well-being of modern person, his health and social status. Malocclusion disrupts the appearance of the patient, which adversely affects the psyche of patients of any age. The problem of prevention and treatment of dental anomalies is not only medical, but also social importance. Many patients understand the need for timely treatment to the dentist. Patients with pathology of the dentition suffer from changes in appearance, phonetics, chewing function, which leads to difficulties in communication. Mental and emotional state plays an important role in human life and affects the prognosis of success and development of treatment. An important role in the treatment is played by a dentist, because his mood affects the patient. Therefore, the doctor should study the individual characteristics of the patient and adjust it to the correct understanding of the disease, so that it gives a positive result.

Key words: *psychoemotional status; esthetic; anomalies of the teeth, bite.***Corresponding author:****Kuznetsova Maria,**Associate Professor of Department of Propedeutics of Dental Diseases
in Sechenov University, Email: mary-smith@yandex.ru

QR code



Please cite this article in press Kuznetsova Maria et al., *Determination Of The Psychoemotional Status Of The Patients Depending On The Anomalies Of Teeth Position And Bite.*, Indo Am. J. P. Sci, 2019; 06(03).

INTRODUCTION:

Deformation of the facial skull is understood as a violation of morphological and functional relations of its elements, as well as their aesthetic proportions, which is objectively reflected in changes in the shape, size and location of the bone parts of the facial skull. At the same time, their causes and the degree of influence on the psycho-emotional state of a person are not completely studied. There are both endogenous and exogenous factors. The first can be caused by abnormalities in the development of the skull and also it is one of the signs of genetic diseases, part is associated with violations of the endocrine balance of the mother or the hormonal status of the growing organism of the child. The latter are formed under the influence of various external factors acting during the growth, development and formation of the maxillofacial complex. Among them it should be noted the incorrect position of the child during sleep, bad habits (sucking fingers, foreign objects), parafunctions (infantile swallowing, absorption of lips, cheeks, tongue), the wrong location of the rudiments of permanent teeth, supercomplete teeth, violation of the order and timing of teething, uneven abrasion of the mounds of temporary teeth, violation of posture, nasal breathing, underdevelopment of the muscles of the maxillofacial area, etc. Of course, the pathogenesis of the formation of a particular pathology of the dental-maxillofacial system has its own distinctive features. But for patients who have applied for dental, orthodontic service, it is important to know not only the causes of the disease, but to a much greater extent how it is possible to correct, how quickly and to what extent. Naturally, the violation of the harmony of the smile and the resulting anomalies in the position of the teeth and bite form a disharmony of the face in general, which in turn can adversely affect the psyche of a child or an adult and, in addition, cause a violation of the form and function of various organs and systems [1-3].

It is known that one of the main points that shape the perception of a person is how to evaluate his appearance surrounding. These can be both explicit remarks and some non-verbal signals, even if not quite correctly interpreted. All this combined can gradually lead to any dissatisfaction with their appearance. Given that we are talking about the face, or rather, about a person's smile, it is natural that such a problem comes to the fore and gradually begins to have a negative impact on the overall psycho-emotional state of a person. At the same time, this situation may not have any significant impact on human health, but at

the psychological level it turns into a very serious problem that prevents normal life. Therefore, when referring to the dental clinic, patients are encouraged to eliminate aesthetic defects, while functional defects are less concerned [4-5].

Very often extreme manifestations of this situation can be seen in adolescence. Teenagers tend to perceive more acutely some shortcomings of their appearance, especially associated with a smile. Smile has always been a factor that shows the disposition of a person to another person, to others, his openness to further communication, and finally emphasized the beauty of the face. At the same time, incorrectly located teeth, in particular vestibular fangs, distort the perception of a person, especially when the anomalies of the position of the teeth are combined with various malocclusion. In modern conditions, the dentist should take into account not only the nature of the specific pathology, but also the peculiarities of the mental and somatic state of patients, their attitude to treatment [6-7].

The aim of this study was to determine the relationship between a particular anomaly in the position of the teeth and bite and the initial motivation for orthodontic treatment.

MATERIAL AND METHODS:

This work was done at Sechenov University with supported by the "Russian Academic Excellence Project 5-100".

The study material is presented by the results of a written survey of patients who came to see a dentist-orthodontist. A specially designed questionnaire based on the well-known OHIP-14 test was used as a questionnaire [8].

67 people took part in this research. We were interested in answers to the following questions:

1. Do you feel tension due to problems with your teeth, bite?
2. Do you feel awkward when communicating because of problems with teeth, bite?
3. Do you think that after correcting incorrectly placed teeth, your life will change for the better?

All patients were divided into groups depending on the pathology of the dentition.

RESULTS AND DISCUSSION:

Based on the data obtained, we can see that the majority of patients seeking help from an orthodontist are sufficiently motivated by their existing orthodontic problems (table 1).

Table 1: Findings of questioning of patients depending on the diagnosis and readiness for orthodontic treatment

Diagnosis	Number of patients	Do you feel tension due to problems with your teeth, bite?	Do you feel awkward when communicating because of problems with teeth, bite?	Do you think that after correcting incorrectly placed teeth, Your life will change for the better?
Anomalies of teeth position	27	21	19	24
Anomalies of the teeth position in combination with a deep overbite	15	10	12	12
Anomalies of teeth position in combination with open bite	2	2	2	2
Anomalies of the teeth position in combination with a posterior bite	19	15	17	17
Anomalies of teeth position in combination with anterior bite	4	4	4	4

This is confirmed by the answers to the last question. Almost 100% of respondents believe that their standard of living will increase after correcting anomalies in the position of teeth and bite. At the same time, the answers to the first and second questions characterize the fact that with lighter forms of anomalies, psychological problems in communication are expressed somewhat less. In case of anomalies in the position of the teeth, 70.3% of respondents paid attention to the complexity of communication, and in combination with anterior, posterior or open bite - 100% of respondents.

CONCLUSION:

Conducting orthodontic treatment of patients who clearly understand what brought them to the reception, we can count on maximum cooperation on their part. However, given that many orthodontic devices are either not too aesthetic, or cause some inconvenience, which causes a desire to get rid of them soon, it is necessary to develop a set of measures aimed at increasing the patient's motivation for treatment and achieving maximum morphofunctional and aesthetic optimum. And it becomes especially important in the

treatment of combined anomalies, which lasts more than one and a half to two years.

REFERENCES:

1. Platonova V.V., Nevdakh A.S., Kuznetsova M.Yu., Sevbitov A.V., Mironov S.N., Borisov V.V., Danshina S.D. Frequency of traumatic complications of orthodontic treatment depending on type of braces which are used. *Indo American Journal of Pharmaceutical Sciences*. 2018; 5(1): 141-143.
2. Kuznetsova M.Yu., Nevdakh A.S., Platonova V.V., Sevbitov A.V., Dorofeev A.E. Evaluation of effectiveness of a preparation on the basis of phytoecdysteroids for treatment of traumatic injuries of oral mucosa in orthodontic patients. *Int J Green Pharm* 2018; 12: 297-300.
3. Sevbitov A.V., Borisov V.V., Davidyants A.A., Timoshin A.V., Ershov K.A., Enina Yu.I., Pustokhina I.G. Prevention of injuries of the maxillofacial area in contact sports using sports caps. *Indo American Journal of Pharmaceutical Sciences*. 2018; 5(11): 12322-12325.

4. Yumashev A.V., Gorobets T.N., Admakin O.I., Kuzminov G.G., Nefedova I.V. Key aspects of adaptation syndrome development and anti-stress effect of mesodiencephalic modulation. *Indian Journal of Science and Technology*. 2016; 9(19): 93911.
5. Sevbitov A.V., Dorofeev A.E., Davidyants A.A., Ershov K.A., Timoshin A.V. Assessment of pain perception of elderly patients with different levels of dentophobia during surgical dental appointment. *Asian Journal of Pharmaceutics*. 2018; 12(S3): 1012-1016.
6. Borisov V.V., Sevbitov A.V., Poloneichik N.M., Voloshina I.M. Use of vector patterns for manufacturing of individual protective dental splints by method of thermoforming. *Indo American Journal of Pharmaceutical Sciences*. 2018; 5(1): 697-699.
7. Turkina A.Yu, Novikova I.A., Turkin A.N., Sheklemetieva G.N. Operation field illuminance in dentistry. *Light and engineering*. 2018; 26(3): 181-187.
8. Slade G.D., Spencer A.J. Development and evaluation of the oral health impact profile. *Community Dent. Health*, 1994; 11: 3-11.