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ORIGINAL ARTICLE

Efficacy of a public promotion program on children's oral health[☆]Q1 Ana Paula S. Alves^a, Rise C.I.C. Rank^{b,*}, Joana Estela R. Vilela^c, Marcos S. Rank^d,
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KEYWORDS

Pediatric dentistry;
Primary prevention;
Oral health;
Dental caries;
Public health

Abstract

Objective: To assess the efficacy of the Baby's Mouth early dental care prevention and promotion program in preventing oral diseases (caries, gingivitis, or malocclusions) in children attended since 2010.

Methods: This was a cross-sectional and cohort study that assessed 252 children between 36 and 60 months of age in both sexes. The children were divided into three groups: G1: effective participants of the program from birth; G2: children who have stopped participating for more than 24 months, and G3: children who have never attended a prevention program. The evaluation was carried out in two stages: first, an interview with the mothers and, afterwards, a clinical children examination to assess the presence of caries, gingivitis, and malocclusion. The chi-squared test was used for statistical analysis between groups ($p < 0.05$).

Results: The diseases assessed were: caries (G1: 5.9%, G2: 54.7%, G3: 70%), gingivitis (G1: 8.3%, G2: 17.9%, G3: 40.5%), and malocclusion (G1: 22.6%; G2: 28.6%; G3: 50%). For gingivitis, there was no significant difference when comparing G1 and G2 ($p = 0.107$), but it was significant between G1 and G3 ($p < 0.001$). Regarding malocclusion, a statistically significant relationship was observed ($p = 0.004$) among all groups.

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PALAVRAS-CHAVE

Odontopediatria;
Prevenção Primária;
Saúde Bucal. Cáries
dentárias;
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Conclusion: The prevention and promotion program in public oral health was effective in preventing caries disease, gingivitis, and malocclusion in children under 5 years of age.

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Eficácia de um Programa Público de Promoção de Saúde Bucal em Crianças**Resumo**

Objetivo: Avaliar a eficácia do programa de prevenção e promoção de cuidados dentários precoce da boca do bebê, a fim de prevenir doenças bucais (cáries, gengivite ou má oclusões) em crianças atendidas desde 2010.

Métodos: Este é um estudo transversal e de coorte com avaliação de 252 crianças entre 36 e 60 meses de idade de ambos os sexos. As crianças foram divididas em dois grupos: G1: participantes efetivos do programa a partir do nascimento; G2: crianças que pararam de participar por mais de 24 meses do programa; e G3: crianças que nunca participaram de um programa de prevenção. A avaliação foi feita em dois estágios: entrevista com as mães e, depois, um exame clínico nas crianças para analisar cáries, gengivite e oclusão. Foi utilizado o teste Qui-quadrado para análise estatística entre os grupos ($p < 0,05$).

Resultados: As doenças analisadas foram: cáries (G1: 5,9%, G2: 54,7%, G3: 70%), gengivite (G1: 8,3%, G2: 17,9%, G3: 40,5%) e má oclusão (G1: 22,6%; G2: 28,6%; G3: 50%). Para gengivite, não houve diferença significativa ao comparar G1 e G2 ($p = 0,107$), porém a diferença foi extremamente significativa entre G1 e G3 ($p < 0,001$). Nas oclusões, houve uma relação estatisticamente significativa ($p = 0,004$) entre todos os grupos.

Conclusão: O programa de prevenção e promoção de saúde bucal pública foi efetivo na prevenção de cáries, gengivite e má oclusão em crianças com menos de 5 anos de idade.

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Introduction

Oral health is part of general health and should be accessible to all people regardless of age, race, creed, color, sex, or socioeconomic status.¹ Dentistry has sought to change the curative approach of oral problems to a broader work aiming to identify and reach the determinants of the health disease process. These changes promote awareness for maintaining health with early initiation of dental care, thus avoiding and/or reducing the sequelae of the main problems that affect the oral health of the population.² Dentistry for babies has been gaining great attention worldwide and has become an alternative in the prevention and control of oral diseases in early childhood.³

Early childhood is a fundamental period in the psychosocial development of the individual; oral health promotion measures for children under 5 years are essential for maintaining health and proper development of digestion, phonation, and respiration.¹ The age at the first preventive dental visit has a positive and significant effect on oral health costs, which are, on average, lower for children who received early preventive treatment.⁴

A local study⁵ demonstrated the great demand for dental care of children 2–5 years of age with presence of pain and sequelae of oral diseases in the city of Gurupi, Tocantins State, northern region of Brazil. The public program for the promotion of oral health in children (POHC), called Baby's Mouth, was implemented in 2010 in partnership with the

City Hall and Centro Universitário UnirG (University Center of Gurupi). This program encompasses the period from gestation until 5 years of age. The children have been enrolled in this public program since birth. The professionals treated edentulous children, and all of them received clinical examination, oral cleaning, and quarterly control. The project also provided orientation to mothers regarding diet, and they received a returning card. The professionals followed-up the child's dental eruption, occlusion stabilization, and monitored them up to 5 years of age; if any changes were detected during this period, the staff intervened according to the dental standards of the American Academy of Pediatric Dentistry.⁶

The aim of this study was to assess the efficacy of the Baby's Mouth early dental care prevention and promotion program in preventing oral diseases (caries, gingivitis, or malocclusions) in children attended since 2010.

Methods

This was a cross-sectional and cohort study carried out in the Legal Amazon region, covering the micro-region of Bananal Island, within the scope of the public health network of Gurupi (TO), with an area of 1,836,091 km² and a total population of 76,755 individuals, approved by the Human Research Ethics Committee of the Centro Universitário UnirG, under protocol number 19895713.0.0000.5518.

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