

INFORMISANOST RODITELJA O UTICAJU ISHRANE, ORALNE HIGIJENE I FLUOR PROFILAKSE NA ZDRAVLJE ZUBA SEDMOGODIŠNJAKA

PARENTAL LEVEL OF INFORMATION ABOUT THE EFFECTS OF PROPER NUTRITION, ORAL HYGIENE AND FLUORIDE PROPHYLAXIS ON DENTAL HEALTH OF SEVEN-YEAR OLDS

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Kratak sadržaj

Zdravstveno vaspitanje ima važnu ulogu u ostvarivanju oralnog zdravlja, podrazumevajući u prvom redu redukciju karijesa kao najmasovnije oralne bolesti.

Cilj rada je bio da se utvrdi stepen informisanosti roditelja o uticaju ishrane, oralne higijene i fluor profilakse na zdravje zuba.

Ispitivanjem je obuhvaćeno po 450 roditelja u urbanoj i ruralnoj sredini. Za ocenjivanje stepena informisanosti o pravilnoj ishrani, oralnoj higijeni i fluor profilaksi sprovedena je anketa kod roditelja.

Dobijeni rezultati pokazuju da je:

- u urbanoj sredini 76,00%, a u ruralnoj 52,89% informisanih roditelja o uticaju ishrane na zdravje zuba;
- u urbanoj sredini 50,44%, a u ruralnoj 23,11% informisanih roditelja o uticaju oralne higijene na zdravje zuba;
- u urbanoj sredini 27,78%, a u ruralnoj 5,11% informisanih roditelja o uticaju fluor profilakse na zdravje zuba.

Istaživanje ukazuje na neophodnost intenziviranja zdravstveno-vaspitnog rada posebno u ruralnoj sredini.

Ključne reči: informisanost, ishrana, oralna higijena, fluor profilakska

Abstract

Health education plays a crucial role in maintaining good oral health of human population.

The goal of the paper is to determine the level of information of parents on the effects of nutrition, oral hygiene and fluoride prophylaxis on oral health in rural and urban environment.

The survey included 450 parents of urban and rural seven year old children. Their level of information about proper nutrition, oral hygiene and fluoride prophylaxis was determined based on a questionnaire.

An analysis of the obtained results suggests that:

- 76.00% parents in urban environment and 52.89% of them in rural environment are well informed about the effects of proper nutrition on dental health;
- 50.44% parents in urban environment and 23.11% of them in rural environment are well informed about the effects of oral hygiene on dental health;
- 27.78% parents in urban environment and only 5.11% of them in rural environment are well informed about the effects of fluoride prophylaxis on dental health.
- This research suggests a need to intensify health education activities, especially in the rural environment.

Key words: information, nutrition, oral hygiene, fluoride prophylaxis

Uvod

Zdravstveno vaspitanje, kao jedan od najvažnijih vidova preventivne stomatološke

Introduction

Health education, as one of the most important aspects of preventive dental activity, plays a

delatnosti, ima izuzetno važnu ulogu u ostvarivanju dobrog oralnog zdravlja humane populacije. Karijes je najčešće posledica nedovoljnog poznavanja i neodgovarajućeg ponašanja pojedinca u odnosu na usta i zube.

Porodica ima najveći značaj i uticaj na formiranje navika i stavova deteta¹. Roditelji, kao najveći autoriteti, svojim zdravstveno-vaspičnim uticajem na dete, imaju presudan značaj u formiranju ličnosti deteta sa ispravnim stavom prema svom oralnom zdravlju.

Oralno zdravlje u velikoj meri zavisi od navika, stavova i ponašanja, odnosno aktuelne zdravstvene prakse u porodici.²

Cilj rada

Cilj rada je da se utvrdi koliki je stepen informisanosti roditelja o uticaju ishrane, oralne higijene i fluor profilakse na zdravlje zuba sedmogodišnjaka u urbanoj i ruralnoj sredini.

Metodologija

Ispitivanjem je obuhvaćeno po 450 roditelja u urbanoj i ruralnoj sredini. Za ocenjivanje stepena informisanosti sačinjen je anketni list koji se sastojao iz tri dela: o ishrani, oralnoj higijeni i fluor profilaksi (Prilog 1). Svaki od navedenih delova sadržao je određeni broj pitanja koja su relevantna za ocenu stepena informisanosti u datoj oblasti. Da bi se lakše utvrdio i uporedio stepen informisanosti roditelja, svako pitanje je posebno bodovano.

Rezultati su prikazani tabelarno i grafički. Za utvrđivanje statističke značajnosti upoređenih podataka korišćen je X^2 test.

Rezultati

Analizom upitnika koji su popunili roditelji, a koji se odnosio na uticaj ishrane na zdravlje zuba, utvrđeno je da je veći broj informisanih roditelja u urbanoj (76,00%) nego u ruralnoj sredini (52,89%) (Tabela 1, Grafikon 1).

crucial role in maintaining good oral health of human population. Caries represents the least favourable consequence of insufficient knowledge and inadequate attitude of individuals towards their mouth and teeth.

Family plays the most important role in forming the attitudes and habits of a child.¹ Parents, as major authorities, influence the health education of children and play a crucial role in the development of their personality, including their appropriate attitude to oral health.

Oral health largely depends on the habits, attitudes and models of behaviour cherished in the family.²

The goal of the paper

The goal of the paper is to determine the level of information of parents on the effects of nutrition, oral hygiene and fluoride prophylaxis on oral health in rural and urban environment.

Methodology

The survey included 450 parents of urban and rural seven year old children. Their level of information about proper nutrition, oral hygiene and fluoride prophylaxis was determined based on a questionnaire which consisted of three sections: nutrition, oral hygiene and fluoride prophylaxis (Appendix 1). Each section included questions, relevant for determining the level of information in the given area. In order to better estimate and compare the level of information of parents in both urban and rural environments, each question was assigned a certain number of points.

The results have been presented in a table and graphically. X^2 test was used for determining the statistical significance of the comparative data.

Results

The analysis of the questionnaire section dealing with nutrition effects on dental health showed a greater number of informed parents in urban environment (76%), as compared to their rural counterparts (52,89%) (Table 1, Graph 1).

UPITNIK ZA RODITELJE / QUESTIONNAIRE FOR PARENTS

ISHRANA / NUTRITION

1. Da li ishrana ima uticaja na zdravlje zuba?

Does nutrition have an effect on dental health?

a) da / yes

b) ne / no

b) dva puta dnevno / twice a day

c) više puta dnevno / several times a day

2. Da li u ishrani dete koristi mleko i mlečne proizvode:

Does the child's diet contain milk and dairy products:

a) svakog dana / every day

b) jedanput nedeljno / once a week

c) nikako / never

6. Koliko dugo dete pere zube?

How long does the child brush its teeth?

a) pola minuta / half a minute

b) 1 minut / 1 minute

c) 2 minuta / 2 minutes

d) 3 minuta / up to 3 minutes.

3. Da li u ishrani dete koristi sveže voće i povrće:

Does the child's diet contain fresh fruit and vegetables:

a) svakog dana / every day

b) redje / rarely

c) nikako / never

7. Kada je u toku dana najvažnije prati zube?

When is it most important to brush one's teeth?

a) ujutru / in the morning

b) u podne / at noon

c) uveče / in the evening

d) ujutro i uveče / in the morning and in the evening

FLUOR PROFILAKSA / FLUORIDE PROPHYLAXIS

1. Da li dete uzima tablete sa fluorom?

Does the child take fluoride tablets?

a) da / yes

b) ne / no

2. Da li ove tablete uzima svakodnevno?

Does the child take these tablets every day?

a) da / yes

b) ne / no

3. Od kada uzima ove tablete?

When did the child start taking these tablets?

a) od 6. meseca / since sixth month

b) od 3. godine / since third year

c) od 6. godine / since sixth year.

4. Da li pasta kojom dete pere zube sadrži fluor (kako se zove pasta za zube)?

Does the toothpaste used by the child contain fluorides (name the brand)?

a) da / yes

b) ne / no

5. Da li dete koristi rastvore sa fluorom za ispiranje usta i zuba?

Does the child use fluoride liquids for washing the mouth and teeth?

a) da / yes

b) ne / no

6. Da li je dete bilo kod stomatologa?

Has the child already visited the dentist?

a) da / yes

b) ne / no

7. Koliko često dete ide kod stomatologa?

How often does the child visit the dentist?

a) kada ga boli Zub / when it has a toothache

b) kada ima redovnu posetu stomatologu / at regular visits

c) dete samo odlazi da popravlja zube / the child has the habit

to regularly visit a dentist on its own

8. Da li je majka koristila tablete fluora u trudnoći?

Did the mother use fluoride tablets during pregnancy?

a) da / yes

b) ne / no

HIGIJENA USTA I ZUBA / ORAL AND DENTAL HYGIENE

1. Da li dete ima četkicu za zube?

Does the child have a toothbrush?

a) da / yes

b) ne / no

2. Da li istu četkicu koristi još neki član porodice?

Does any other member of the family use the same toothbrush?

a) da / yes

b) ne / no

3. Posle koliko vremena korišćenja četkice dete dobija novu?

How often is the toothbrush replaced by a new one?

a) "dok traje" / "not as long as it lasts"

b) jedna godina / once a year

c) do 6 meseci / every six months

4. Sa koliko godina je dete počelo da pere zube?

When did the child start brushing its teeth?

a) 2-3 godine / 2-3 years

b) 4-5 godina / 4-5 years

c) 6-7 godina / 6-7 years

5. Koliko često dete pere zube?

How often does the child brush its teeth?

a) jednom dnevno / once a day

χ^2 testom dobijena je statistički značajna razlika ($p<0,001$) u informisanosti roditelja o uticaju pravilne ishrane na zdravlje zuba u urbanoj u odnosu na ruralnu sredinu (Tabela 1).

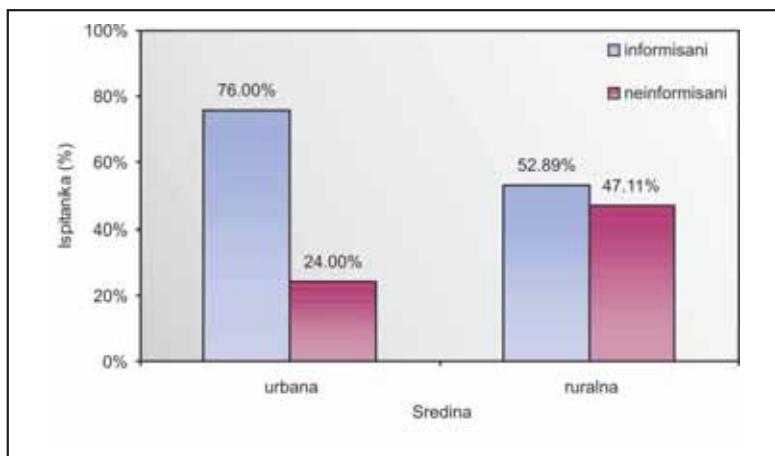
U urbanoj sredini je statistički značajno ($p<0,001$) veći broj informisanih roditelja u odnosu na neinformisane o uticaju ishrane na zdravlje zuba, dok u ruralnoj sredini ne postoji statistički značajna razlika između informisanih i neinformisanih roditelja (Tabela 1).

χ^2 test showed a statistically significant difference ($p<0.001$) in the level of information about the effects of proper nutrition of urban parents, in comparison with rural ones (Table 1).

In urban environment, a statistically significant ($p<0.001$) number of parents is informed, compared to the ones uninformed about the effects of proper nutrition on dental health, while in rural environment there is no statistically significant difference between the informed and uninformed parents (Table 1).

Tabela 1. Informisanost roditelja o uticaju ishrane na zdravlje zuba u urbanoj i ruralnoj sredini
Table 1. Parental level of information on the effects of nutrition on dental health in urban and rural environments

roditelji / parents	urbana sredina urban environment		ruralna sredina rural environment	
informisani / informed	342	76,00%	238	52,89%
neinformisani / uninformed	108	24,00%	212	47,11%
poređenje/comparison	urbana - ruralna urban - rural		informisanost - neinformisanost information - non-information	
χ^2	52,45		urbana urban	ruralna rural
P	0,0000		62,25	0,75
			0,0000	0,3859



Grafikon 1. Odnos informisanih i neinformisanih roditelja o uticaju ishrane na zdravlje zuba u urbanoj i ruralnoj sredini

Graph 1. The ratio of informed vs. uninformed parents about the effects of proper nutrition on dental health in rural and urban environments

Informisanost roditelja o uticaju oralne higijene na zdravlje zuba je bolja u urbanoj (50,44%) nego u ruralnoj sredini (23,11%) (Tabela 2, Grafikon 2).

χ^2 testom utvrđena je statistički značajna razlika ($p<0,001$) u informisanosti roditelja o uticaju oralne higijene na zdravlje zuba u urbanoj u odnosu na ruralnu sredinu (Tabela 2).

The level of information of parents about the effects of oral hygiene on dental health is better in urban (50.44%) than rural environment (23.11%) (Table 2, Graph 2).

χ^2 test showed a statistically significant difference ($p<0.001$) in the level of information about the effects of oral hygiene of urban parents, in comparison with rural ones (Table 2).

U ruralnoj sredini je statistički značajno ($p<0,001$) veći broj roditelja neinformisan o uticaju oralne higijene na zdravlje zuba (Tabela 2).

U urbanoj sredini ne postoji statistički značajna razlika između informisanih i neinformisanih roditelja (Tabela 2).

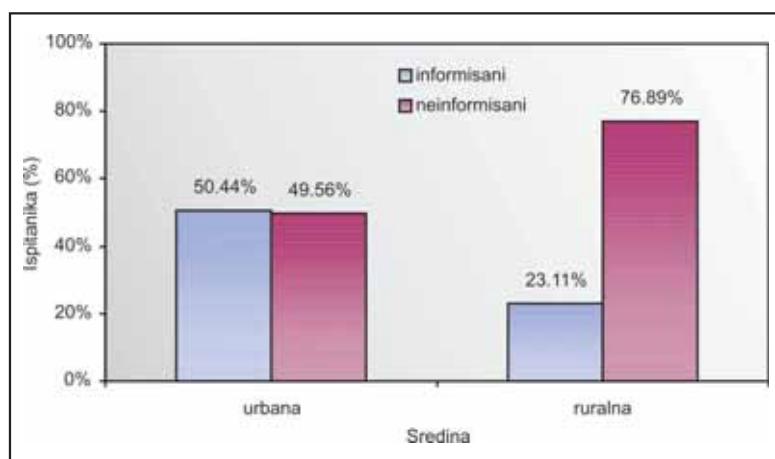
In rural environment, a statistically significantly ($p<0,001$) greater number of parents is informed about the effects of oral hygiene on dental health (Table 2).

In urban environment, there is no statistically significant difference in the number of informed and uninformed parents (Table 2).

Tabela 2. Informisanost roditelja o uticaju oralne higijene na zdravlje zuba u urbanoj i ruralnoj sredini

Table 2. Parental level of information on the effects of oral hygiene on dental health in urban and rural environments

roditelji / parents	urbana sredina urban environment	ruralna sredina rural environment
informisani / informed	227	54,44%
neinformisani / uninformed	223	49,56%
poređenje/comparison	urbana - ruralna urban - rural	
χ^2	72,30	0,02
P	0,0000	0,8939
		70,14
		0,0000



Grafikon 2. Odnos informisanih i neinformisanih roditelja o uticaju oralne higijene na zdravlje zuba u urbanoj i ruralnoj sredini

Graph 2. The ratio of informed vs. uninformed parents about the effects of oral hygiene on dental health in rural and urban environments

Informisanost roditelja o uticaju fluor profilakse na zdravlje zuba je bolja u urbanom (27,78%) u odnosu na ruralnu sredinu (5,11%). (Tabela 3, Grafikon 3). Inače informisanost po ovom pitanju (u odnosu na informisanost o uticaju ishrane i oralne higijene) je najlošija kod roditelja ispitivanih sedmogodišnjaka u obe sredine.

χ^2 testom utvrđen je statistički značajno ($p<0,001$) veći broj neinformisanih roditelja o uticaju fluor profilakse na zdravlje zuba, i u urbanoj i u ruralnoj sredini. (Tabela 3)

The level of parental information about the effects of fluoride prophylaxis on dental health is better in urban (27.78%) than in rural environment (5.11%) (Table3, Graph 3). However, the overall level of information in this area (as compared to the level of information about nutrition and oral hygiene) is the worst in all the parents who participated in the survey in both urban and rural environments.

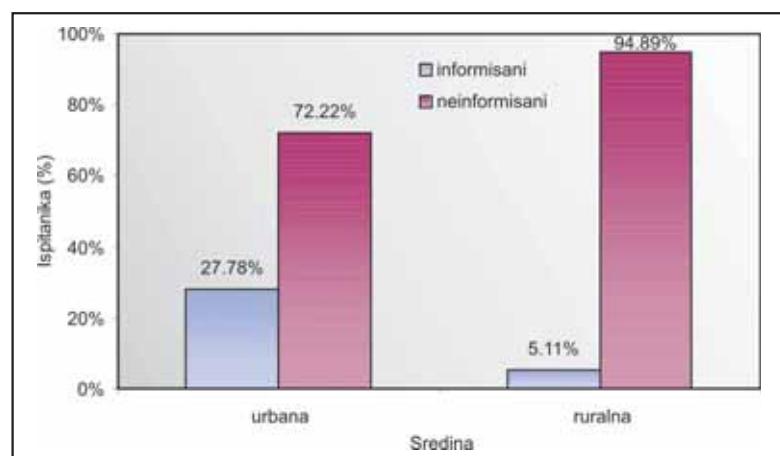
χ^2 test showed a statistically significant ($p<0.001$) number of uninformed parents about

Postoji statistički značajna razlika ($p<0,001$) između informisanih roditelja o uticaju fluor profilakse na zdravlje zuba u urbanoj u odnosu na ruralnu sredinu (Tabela 3).

Tabela 3. Informisanost roditelja o uticaju fluor profilakse na zdravlje zuba u urbanoj i ruralnoj sredini

Table 3. Parental level of information on the effects of fluoride prophylaxis on dental health in urban and rural environments

roditelji / parents	urbana sredina urban environment		ruralna sredina rural environment	
informisani / informed	125	27,78%	23	5,11%
neinformisani / uninformed	325	72,22%	427	94,89%
poređenje/comparison	urbana - ruralna urban - rural		informisanost - neinformisanost information - non-information	
urbana χ^2 P	84,13 0,0000		urbana urban 46,75 0,0000	ruralna rural 227,12 0,0000



Grafikon 3. Odnos informisanih i neinformisanih roditelja o uticaju fluor profilakse na zdravlje zuba u urbanoj i ruralnoj sredini

Graph 3. The ratio of informed vs. uninformed parents about the effects of fluoride prophylaxis on dental health in rural and urban environments

Iz napred izloženog je evidentno da su u obe sredine roditelji najmanje informisani o uticaju fluor profilakse na zdravlje zuba, naročito u ruralnoj sredini gde je to oko 5% (Grafikon 4).

Postoji statistički značajna razlika ($p<0,001$) u informisanosti roditelja o uticaju fluor profilakse u odnosu na informisanost o uticaju ishrane i oralne higijene na zdravlje zuba, u obe sredine (Tabela 4).

Ne postoji statistički značajna razlika u informisanosti roditelja o uticaju ishrane i oralne higijene na zdravlje zuba u urbanoj sredini (Tabela 4).

the effects of fluoride prophylaxis on dental health in both urban and rural environments (Table 3).

There is a statistically significant difference ($p<0.001$) between the uninformed parents about

the effects of fluoride prophylaxis on dental health in urban than in rural environment (Table 3).

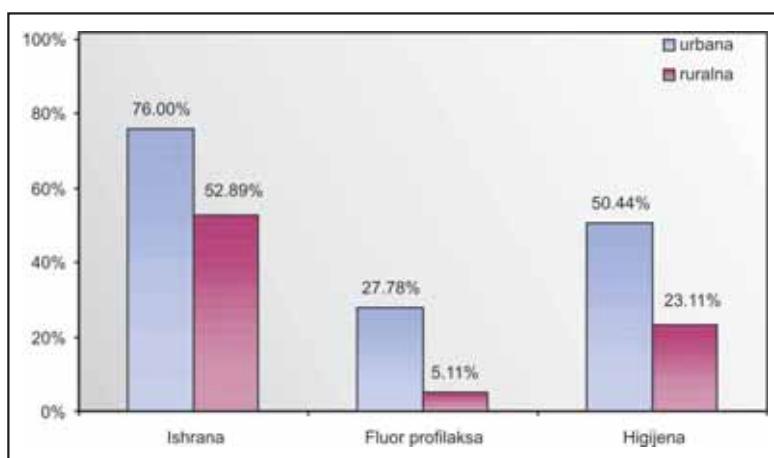
Based on the presented results, it is obvious that parents in both urban and rural environments are less informed about the effects of fluoride prophylaxis on dental health, especially in the rural one – 5% (Graph 4).

There is a statistically significant difference ($p<0.001$) in the level of information of parents about the effects of fluoride prophylaxis than in the level of information about the effects of nutrition and oral hygiene on dental health in both environments (Table 4).

There is no statistically significant difference in the parental level of information about the effects of nutrition and oral hygiene on dental health in urban environment (Table 4).

Tabela 4. Informisanost roditelja po oblastima i sredinama
Table 4. Information of parents per areas and environments

oblast / area	sredina / environment					
informisanost / information	urbana / urban			ruralna / rural		
ishrana / nutrition	342	76,00%		238	52,89%	
fluor profilaksa / fluoride prophylaxis	125	27,78%		23	5,11%	
higijena / hygiene	227	50,44%		104	23,11%	
poređenje / comparison	ishrana/nutrition i/and	ishrana/nutrition i/and	fluor profilaksa/fluoride prophyl. i/and	ishrana/nutrition i/and	ishrana/nutrition i/and	fluor profilaksa/fluoride prophyl. i/and
	fluor profilaksa/fluoride prophyl.	higijena hygiene	higijena hygiene	fluor profilaksa/fluoride prophyl.	higijena hygiene	higijena hygiene
χ^2	209,58	63,20	48,54	249,45	84,68	60,15
P	0,0000	0,1748	0,0000	0,0000	0,0000	0,0000



Grafikon 4. Odnos informisanih roditelja po oblastima u urbanoj i ruralnoj sredini

Graph 4. The ratio of informed vs. uninformed parents per each area in urban and rural environments

Na osnovu sveukupnog dosadašnjeg razmatranja, postoji statistički značajna razlika ($p<0,001$) između informisanosti roditelja o uticaju ishrane, oralne higijene i fluor profilaksse na zdravlje zuba u urbanoj u odnosu na ruralnu sredinu (Tabela 4).

The overall results of the above considerations show a statistically significant difference ($p<0,001$) in the parental level of information about the effects of nutrition, oral hygiene and fluoride prophylaxis on dental health in urban environment, in comparison to rural environment (Table 4).

Diskusija

Kako su roditelji veliki autoriteti sedmogodišnjacima, to i stepen njihove informisanosti o pravilnom načinu ishrane, oralnoj higijeni i fluor profilaksi, direktno utiče na informisanost njihove dece.

Discussion

As parents represent a great authority for seven year old children, their level of information about the effects of nutrition, oral hygiene and fluoride prophylaxis on dental health has a direct influence on the level of information of their children.

Navike dece vezane za zdravlje zuba direktno su uslovljene ponašanjem njihovih roditelja.³

Ispitivanjem je utvrđeno da su roditelji sedmogodišnjaka iz urbane sredine više informisani od roditelja iz ruralne sredine. Roditelji su najviše informisani o uticaju ishrane na zdravlje zuba, nešto manje o oralnoj higijeni, dok su najmanje informisani o uticaju fluor profilakse i to u obe sredine. Informisanost roditelja je statistički značajno veća u urbanoj sredini.

Ispitivanja informisanosti majki o navikama, ponašanjima i stavovima vezanim za oralno zdravlje dece pokazuju da je veliki broj majki upoznat sa uzročnicima karijesa i važnosti oralne higijene, dok je relativno mali broj bio svestan štetnog uticaja šećera.⁴ Preventivni i zdravstveno-vaspitni rad koji počinje u periodu trudnoće i nastavlja se kasnije kod majki i njihove dece pokazuje veliku efikasnost za dugotrajno sprečavanje nastanka karijesa.⁵

U urbanoj sredini znanje roditelja o zdravlju zuba je na višem nivou, a delom je rezultat postojanja stomatoloških ambulanti u školama. Roditelji su u situaciji da redovno čuju i učestvuju u zdravstveno-vaspitnom radu sa svojom decom, međutim to zavisi od njihove lične motivisanosti za ovakav rad i od slobodnog vremena, koje su oni spremni da angažuju za ovakav rad. S obzirom da roditelji imaju najveći uticaj na svoju decu neophodno je njihovo maksimalno angažovanje u sopstvenoj i dečjoj edukaciji.

Preventivna nega mora da bude zasnovana na edukaciji sadašnjih i budućih roditelja. Ovo je važan zadatak za stomatologe, a i za društvo koje ima ambiciju da pruži dobru zaštitu zuba svoj deci.⁶

Uticaj porodice i način na koji roditelji vaspitavaju svoju decu su faktori koji imaju veliki značaj za očuvanje zdravlja usta i zuba.¹ Edukacija roditelja od strane stomatologa je veoma važna.⁷ Majke koje su učestvovale u edukativnom programu, bile su bolje obaveštene i imale su bolji odnos prema zdravlju zuba svoje dece.^{8,9}

Istraživanja pokazuju da roditelji koji podržavaju preventivne programe su pokazali spremnost i želju da svoju decu odvode na redovne posete kod stomatologa. Međutim postoji nedostatak pravog znanja o svim prednostima preventivnog i zdravstveno-vaspitnog rada.

The habits of children are directly influenced by the behaviour of their parents.³

The research suggests that the parents of urban seven-year old children are better informed than those of their rural counterparts. The parents are best informed about the effects of nutrition on dental health, slightly less about the effects of oral hygiene, whereas the level of information about the effects of fluoride prophylaxis is the lowest in both environments. Research of the level of information of mothers about the habits attitudes and behaviour related to oral health of their children shows that a large number of them is acquainted with caries causes and the importance of oral hygiene, while a relatively small number of mothers understands the harmful effects of carbohydrates.⁴ Prevention and health education activities aimed at mothers during pregnancy and continued later, including their children, have proved to be a very efficient means of long-term caries prevention.⁵

The higher level of dental health knowledge of urban parents is, to a great extent, a result of the existence of school dental surgeries. Urban parents are regularly exposed to health education, along with their children. However, this largely depends on their level of motivation and the amount of the free time which they are ready to dedicate to such activities. Considering the fact that parents have the strongest influence on their children, it is necessary to engage both the parents and their children in such educational activities, as much as it is possible. Preventive care must be based on health education of both actual and future parents. This is a very significant task for dentists but, also, for the society which puts strong efforts in providing good health protection to its children.⁶

The influence of family and the way the parents bring up their children are the key factors for the prevention of oral and dental health.¹ Parental education by the dentist is extremely important.⁷ Mothers who have taken part in educational programs are better informed than those who have not, and their overall attitude towards the dental health of their children showed to be more profound.^{8,9}

The research suggests that parents who support preventive programs show more readiness to regularly send their children to the dentist. However, their knowledge of all the advantages of prevention and health education is insufficient. In order to promote oral and dental health

Zbog toga je neophodno prikupiti najsavremeniye informacije koje se tiču zdravstveno-vaspitnog rada i prezentovati ih roditeljima, a oni svojoj dece, sa ciljem unapređenja zdravlja usta i zuba.¹⁰

Wierzbicka M. i saradnici u svojim istraživanjima pokazuju da je znanje roditelja i njihov odnos prema zdravlju zuba dece slabo, naročito u ruralnoj sredini. Do povećanja nivoa znanja kod roditelja došlo se nakon poseta stomatologu, gde su dobijene određene informacije o merama za očuvanje zdravlja zuba.¹¹ Savetovanje roditelja koji imaju malu decu o očuvanju zdravlja zuba, može da odigra ključnu ulogu u rešavanju problema oralnog zdravlja.¹²

Zaključak

Analiziranjem dobijenih rezultata može se zaključiti da je informisanost roditelja o uticaju pravilne ishrane, oralne higijene i fluor profilakse na zdravlje zuba bolja u urbanoj u odnosu na ruralnu sredinu, to:

- u urbanoj sredini je 76,00%, a u ruralnoj 52,89% informisanih roditelja o uticaju ishrane na zdravlje zuba;
- u urbanoj sredini je 50,44%, a u ruralnoj 23,11% informisanih roditelja o uticaju oralne higijene na zdravlje zuba;
- u urbanoj sredini je 27,78%, a u ruralnoj 5,11% informisanih roditelja o uticaju fluor profilakse na zdravlje zuba.

Ovo istraživanje ukazuje na neophodnost intenziviranja zdravstveno-vaspitnog rada, posebno u ruralnoj sredini. U tom smislu zdravstveno-vaspitni rad treba da ukaže na značaj pravilne i uredne oralne higijene i fluor profilakse, a sve sa ciljem prevencije stomatoloških oboljenja. Sigurno je da u svemu ovome moraju aktivno učestvovati roditelji kako kao edukatori tako i kao kontrolori predloženih preventivnih mera.

in the appropriate way, it is necessary to continuously gather the most novel information and include it in the health education of parents, who should then transfer it to their children.¹⁰

In the presentation of their research results, Wierzbicka, M. et al. show that the level of information of parents and the attitude towards the dental health of their children is inappropriate, especially in the rural environment. The awareness of parents is, reportedly, raised by regular visits to the dentists, where they are able to obtain relevant information about dental health preventive measures.¹¹ Counseling of parents who have small children about the ways of dental health prevention can have a crucial role in providing a solution to the problem of general oral health.¹²

Conclusion

An analysis of the obtained results suggests that the level of information of parents about the effects of proper nutrition, oral hygiene and fluoride prophylaxis on dental health is better in urban than rural environment, as follows:

- 76.00% parents in urban environment and 52.89% of them in rural environment are well informed about the effects of proper nutrition on dental health;
- 50.44% parents in urban environment and 23.11% of them in rural environment are well informed about the effects of oral hygiene on dental health;
- 27.78% parents in urban environment and only 5.11% of them in rural environment are well informed about the effects of fluoride prophylaxis on dental health.

This research suggests a need to intensify health education activities, especially in the rural environment. Health education should be aimed at raising the awareness about the importance of proper nutrition, oral hygiene and fluoride prophylaxis for the prevention of dental diseases. Needles to say, parents must actively participate in this process, both as educators and controllers of the implementation of the suggested preventive measures.

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