# **Review Article**

# **Dental Neglect in Pediatric Patients among Indian Population: A Review of Case Reports**

Dhivyalakshmi Manavazhagan, Nabeel Ahmed<sup>1,</sup> TN Uma Maheswari<sup>2</sup>

From the Departments of Preventive and Community Dentistry, <sup>1</sup>Prosthodontics, <sup>2</sup>Oral Medicine and Radiology, Saveetha Dental College and Hospitals, Saveetha University, Chennai, Tamil Nadu, India

Received: May, 2016. Accepted: June, 2016.

Knowingly or unknowingly children in the age group of 5–12 years of age are at a risk of various forms of child abuse, one among which is dental neglect. Dental neglect is one of the least recognized problems, yet it is a very serious problem. This review article is written with the aim to emphasize the role of dentists in reporting the child abuse cases and to counsel the parents/caretakers of the children regarding the seriousness of the issue.

KEY WORDS: Child abuse, dental neglect, dentist, rampant caries

# INTRODUCTION

 $\mathbf{1}^n$  India, there are children who are pampered by the parents in every way; there are also children who are at great risk of various forms of child abuse such as physical, sexual, emotional abuse, girl child neglect, and finally dental neglect.

"Child abuse or maltreatment constitutes all forms of physical and/or emotional ill-treatment, sexual abuse, neglect or negligent treatment or commercial or other exploitation, resulting in actual or potential harm to the child's health, survival, development, or dignity in the context of a relationship of responsibility, trust, or power."<sup>[1]</sup>

Dental neglect, as defined by the American Academy of Pediatric Dentistry, is the "willful failure of parent or guardian to seek and follow through with treatment necessary to ensure a level of oral health essential for adequate function and freedom from pain and infection."<sup>[2]</sup>

Abuse or neglect may present to the dental team in many ways:

- Through a direct allegation made by the child, a parent, or some other person
- Through signs and symptoms which are suggestive of physical abuse or neglect
- Through observations of child behavior or parent-child interaction.<sup>[3]</sup>

Dental neglect can be in any form such as untreated rampant caries, untreated bleeding, or trauma or lack of continuity of care.<sup>[4]</sup> Even today, there are parents who believe dental care is not needed for pediatric patients as the teeth are about to shed.

Access this article online		
Quick Response Code:	Website: www.ijofo.org	
	DOI: 10.4103/2542-5013.185691	

They lack the knowledge that their negligence about untreated rampant caries or half-done dental procedure leads to various other complications.

As most of the physical injuries in the pediatric population occur in and around the craniofacial region, frequently it becomes the dentist who recognizes the child abuse first. Hence, it not only becomes the duty of the dentists to direct the affected child toward proper care and counsel the parents/ caretaker but also to document such cases.

# AIMS AND OBJECTIVES

- To emphasize the importance of the dental care for deciduous dentition among parents
- To emphasize the need to document such cases.

## SEARCH STRATEGY

A systematic search of literature was done using the PubMed Database, Medical Subject headings using keywords "Dental neglect in India" and nine articles were reported.

#### RESULTS

The results of the study were then tabulated [Table 1]. The results show that in most cases it is because of the negligence of the parents that children are affected by dental neglect. The reason for negligence being "it's just milk teeth, so why do we have to save them?".

Address for correspondence: Dr. Dhivyalakshmi Manavazhagan, E-mail: dhivyalakshmimanav@gmail.com

This is an open access article distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 3.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

For reprints contact: reprints@medknow.com

**How to cite this article:** Manavazhagan D, Ahmed N, Uma Maheswari TN. Dental neglect in pediatric patients among Indian population: A review of case reports. Int J Forensic Odontol 2016;1:4-5.

Tabl	Table 1: Various intra oral findings seen in the case reports				
Year	Journal	Child's	Clinical finding		
		age/sex			
2005	J Indian Soc Pedod	12/female	Fractured 11, 21 with pulpal		
	Prev Dent		involvement, rough and		
			inflamed mandibular labial		
			mucosa; white patches at the		
			left retromolar area; tobacco		
			stains on 31, 32, 36, 37 <sup>[5]</sup>		
2011	J Indian Soc Pedod	3/female	Very poor oral hygiene with		
	Prev Dent		almost all the teeth affected		
			with dental caries <sup>[6]</sup>		
2010	Indian Journal of	6/female,	Both presented with dental		
	Dental Advancements	4/female	caries and poor oral hygiene <sup>[7]</sup>		

Table 1: Various intra oral findings seen in the case reports				
Year Journal	Child's	Clinical finding		
	age/sex			

# DISCUSSION

There are various reasons being cited in various articles for dental neglect in pediatric patients among the Indian population. Many parents neglect the dental treatment thinking that the milk teeth are about to shed off. However, such circumstances are still considered to be negligent.<sup>[4]</sup> There was a case report in which the child was neglected as she was deaf, and the child started indulging in substance abuse which was evident upon examination of her oral cavity which showed white lesion on her retromolar area and tobacco stains on her teeth.<sup>[5]</sup> The worst scenario which we came across while reviewing the case reports was a case in which the child was neglected for the reason that she was an "unwanted" second girl child, in spite of her parents being educated and financially sound.<sup>[6]</sup> One more reason attributed to dental neglect is when both the parents are working; least importance is given to child's dental care.<sup>[7]</sup> A study was conducted to determine the prevalence and severity of oral condition related to untreated dental caries with PUFA index in orphanage children from India, and the result showed that oral health in orphan children was neglected. These children showed a high prevalence of dental caries with low dental care utilization.[8]

Child abuse at Children's Hospital Medical Center in Boston found that >65% of all cases of physical abuse involved injuries to the head, neck, or mouth.<sup>[9]</sup> Hence, in most of the cases, it is the dentist who first identifies a child abuse victim. When injuries are seen in cases with no proper history with severe signs and symptoms, the likelihood of abuse should be strongly suspected.[10]

A positive attitude must be developed among parents and dental awareness about primary teeth and their importance to be created among them. This can be done by child dental health-oriented programs with active parental involvement. Such awareness programs should be developed for parents imparting knowledge about primary teeth, their function and preventive primary care of these teeth. To achieve this, young and prospective parents should be directed by medical professionals, gynecologists, and pediatricians to seek professional oral health counseling.[11]

### CONCLUSION

In India, oral health care is often overlooked by most of the people. Moreover, when it comes to deciduous dentition, people do not find it worthwhile to spend money or time. It is the duty of the dentist to counsel the parents/caretakers regarding the seriousness of providing proper dental care to the deciduous dentition and to direct them toward proper treatment as and when it requires. If required, child protection referral has to be done through child line or national commission of child protection or child and women welfare ministry or through local authorities and nongovernmental organizations agencies.

#### **FINANCIAL SUPPORT AND SPONSORSHIP**

Nil.

#### **C**ONFLICTS OF INTEREST

There are no conflicts of interest.

#### REFERENCES

- 1. World Health Organization. Report of the Consultation on Child Abuse and Prevention (Document WHO/HSC/PVI/99-1). Geneva, Switzerland: WHO; 1999.
- Stavrianos C, Stavrianou D, Stavrianou I, Kafas P. Child Neglect: 2. A review. The Internet Journal of Forensic Science 2008;4.
- Sidebotham PD, Harris JC. Protecting children. Br Dent J 3. 2007;202:422-3.
- Tsang A. Sweet D. Detecting child abuse and neglect Are 4. dentists doing enough? J Can Dent Assoc 1999;65:387-91.
- Subramanian EM, Subhagya B, Muthu MS, Sivakumar N. 5 Neglected child with substance abuse leading to child abuse: A case report. J Indian Soc Pedod Prev Dent 2005;23:92-5.
- 6. Kiran K. Child abuse and neglect. J Indian Soc Pedod Prev Dent 2011;29 6 Suppl 2:S79-82.
- Rajeshwari R, Reddy R, Manjula M. Dental neglect. Indian J 7. Dent Adv 2010;2(1):138-42.
- 8. Shanbhog R, Godhi BS, Nandlal B, Kumar SS, Raju V, Rashmi S. Clinical consequences of untreated dental caries evaluated using PUFA index in orphanage children from India. J Int Oral Health 2013;5:1-9.
- 9. Becker DB, Needleman HL, Kotelchuck M. Child abuse and dentistry: Orofacial trauma and its recognition by dentists. J Am Dent Assoc 1978;97:24-8.
- 10. Sujatha G, Sivakumar G, Saraswathi TR. Role of a dentist in discrimination of abuse from accident. J Forensic Dent Sci 2010;2:2-4.
- 11. Setty JV, Srinivasan I. Knowledge and awareness of primary teeth and their importance among parents in Bengaluru city, India. Int J Clin Pediatr Dent 2016;9:56-61.