



INTRODUCTION

In spite of significant success in the field of oral health, the oral diseases still remain to be the actual and keen problem, especially in non – privileged groups of the world population in the developed as well as in the developing countries . In Georgia, particularly in the population of its high mountainous regions, the dental diseases still remain to be an actual issue.

OBJECTIVES

The aim of the research was to establish the prevalence and the rate of general Oral diseases in the adult population of high mountainous regions of Georgia and to make assessment of the roles of the factors, linked with socioeconomic status and the dentistry service deficit, in the disease development.

METHODS & MATERIAL

At the first stage epidemiological survey was conducted in high mountainous villages of Racha and Samegrelo, regions of Georgia. All in all, 614 people have been studied (Svaneti-208, Racha202, Samegrelo-204 people) in five age groups, delivered by the WHO: 35- 44years old , 45-54 y.o., 55-64 y.o., 65-74 y.o. , 74-85 y.o. The prevalence and intensity of dental caries was studied.

The sociobiological questionnaire, created by us consisted of the questions to detect risk-factors: Social status and material income of the family, presence of certain diseases and people’s attitude to the habits of hygiene of oral healthcare (such as cleaning teeth, use of dental floss and oral rinse), affordability of dentistry aid, dentistry activity of population, smoking, consumption of meat, dairy and other products.

RESULTS

In high mountainous regions of Georgia, the indicator of Caries prevalence is significantly high (Table 1).

Caries intensity is very high as well in all three regions by the DMFT index (table 2).

The majority of the investigated people indicated that the application rate to the dentist was caused by pain, much more rarely – by the reason of prosthodontic treatment and for check-ups.

Despite the Caries prevalence and intensity, the visit to the dentist is very rare in population of high mountainous regions. As the result of investigation, we found that its reason is first of all, financial problem and then the deficit of dentistry service in the inhabited areas and regions of high mountains. The last, unimportant reason was the fear (Table 3).

Table 1. Prevalence of Dental Caries by regions

| Region | prevalence |
|-----------|------------|
| Svaneti | 94.7% |
| Racha | 98% |
| Samegrelo | 100% |

Table 2. Dental Caries intensity by regions

| Region | DMFT index | p |
|-----------|---------------|--------|
| Svaneti | 12.56 ± 9.541 | < 0.05 |
| Racha | 9.67 ± 9.153 | < 0.05 |
| Samegrelo | 10.36 ± 8.262 | < 0.05 |

Table 3. Reason for not Visiting to the Dentist

| Reason | Frequency | % |
|---------------------|-----------|-------|
| No clinic | 285 | 46.41 |
| Have never suffered | 43 | 7.00 |
| Financial problem | 233 | 37.95 |
| No quality service | 36 | 5.86 |
| fear | 17 | 2.77 |

CONCLUSION

As the result of the investigation of all three regions, we established that the Prevalence and Intensity of Caries is extremely high. The inhabitants of Lower Svaneti region indicated that no dentistry institutions were located in villages. Moreover, in the very center of the region, there was the service deficit and in case of pain, they had to visit the Imereti regions or Tbilisi, that was linked with Financial and time problems. The same was the reason in Racha, namely in Ambrolauri region and Samegrelo. According to the results, received by us, low socioeconomic background and absence of services have significant impact on Oral Diseases.