



Dearth of a Nationwide Primary School Matriculation Dental Screening in Iran: A Recall to Think

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Letter to the Editor

By US general surgeon's report, poor oral healthy adversely affect a child to learn (1). American Academy of Paediatric Dentistry (AAPD) recommends for first orodental examination beginning at 6-months after the eruption of first deciduous teeth or by the first birthday (2). Moreover, AAPD emphasizes a thorough general health assessment including any aspect that may influence child school performance (3). Dental caries are the most common disease of the childhood (4). Acute and chronic pain is approved to be influential on decreased school concentration. Early loss of a decayed tooth may challenge the child by speech difficulties, poor communication with the peer group, low self esteem derived by esthetic issues and psychosocial burden, malnourishment due to painful or insufficient chewing and disturbed sleep (4, 5). It is north worthy to remind that detecting a child with dental pain is not always easy for the teachers and parents (5). Child is not always aware of the exact problem and capable of complaint about; hence difficulty concentration and diminished performance may be the only clues for the teachers, parents and school health givers to find the problem. Besides, the earlier the detection of caries, the lower the further

progression of the decay and cost to treat. It is estimated that 51 million hours are lost annually related to the dental problems among children (5). Calculated school absence due to the dental pain and problem is about 3.1 day per 100 6-17 year-old students per year from America (1996) and 434 hours per 1000 primary schoolers per year from Thailand (2007) (5, 6). Successive fissure sealant therapy is currently being conducted in Iran for preschoolers, although not continued during the school. Considering high prevalence of early childhood caries, rice and bread as two cariogenic component of daily regimen in almost any Iranian family, dominant portion of d/D from dmfs/DMFT scores, which means higher rate of caries in developing country when compared to developed countries (7), besides to above mentioned may rationale a nationwide mandatory written certification of oral health from a dental professional for primary school entrance. Such programs are regulated elsewhere in the world (currently, 6 states mandate this screening in America). In addition, this dental visit is a suitable appointment for the parents to be consulted about how to manage dentofacial traumas and screening for ignored potential problems in

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certain at risk groups, for example sequences of prematurity and oral intubation which is commenced very earlier. Such problems may lack a dental professional visit and attention as late as early adolescence. Unfortunately, a miss believe of “these are temporary teeth eventually replaced by permanent ones” and poor insurance coverage are serious barriers to seek a proper dentistry program in Iran. According to current dental health status in Iran and future socioeconomic burden of dental related problems, a mandatory professional dental certification for primary school matriculation is strongly recommended.

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