Annals of the University of Oradea, Fascicle: Ecotoxicology, Animal Husbandry and Food Science and Technology, Vol. XVI/A 2017

Analele Universitații din Oradea, Fascicula: Ecotoxicologie, Zootehnie și Tehnologii de Industrie Alimentara, Vol.XVI/A 2017

# THE IMPACT OF THE FRONTAL AESTHETIC RESTORATION ON SELF-ESTEEM AT YOUNG PATIENTS

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#### Abstract

The objective of the present study was to analyze the effect of frontal aesthetic restoration on self-esteem, in young adults. A lot of studies prove the direct relationship between the person's image and the level of self-esteem, which denotes a good mental health state.

Key words: aesthetic restorations, self-esteem, edentation

### INTRODUCTION

For more than four millennia are known data concerning dental aesthetic. Through history, civilizations have recognized achievements in restorative and aesthetic dentistry as a measure of their level of competence in science or art.

The therapeutic approach in dental aesthetics is a complex one, which requires increased attention to the elaboration of an individualized treatment plan. The particularity of each case results from the clinical and paraclinical evaluation, from the aesthetic evaluation of the possibilities of restoration from the somatic point of view, but also implies the patient's wishes.

Many studies prove the direct relationship between the person's image and the level of self-esteem, which denotes a good mental health state.

Self-esteem is not given once and for all; it is a cognitive characteristic of self-appreciation.

### MATERIALS AND METHODS

We conducted a study on 127 patients with frontal edentation, presented to the DentalNet Clinic, during the period 01.2015-08.2017. The age of the patients was between 21-45 years, the majority were women (female / male ratio was 2.6: 1) and they came from the urban environment (urban / rural ratio was 3.9: 1) (Table 1).

Parameter	Value
Women/Men	72,44%/37,56%
Average age	32,12±6,36 years
Urban/Rural	79,52%/20,48%

Patients were evaluated from the self-esteem point of view at the beginning and end of treatment. Evaluation of self-esteem was realized using the Rosenberg scale.

### **RESULTS AND DISCUSSIONS**

Table 2

Distribution of cases depending of	on the affected frontal area
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		Upper fontal area (ZFS)			
		Normal		Affected	
		Nr.	%	Nr.	%
Lower frontal area	Normal	0	0,00	91	71,65
(ZFI)	Affected	16	12,60	20	15,75

Out of the total of 127 cases studied, 91 patients presented only the upper frontal area affected (71.65%), 16 patients only lower frontal area affected (12.60%) and 20 patients presented both upper and lower frontal area affected (15.75%) (Table 2, graph no.1). We note that over 87% of patients present to the physician in case the upper frontal area is affected, being the most visible area.



Chart no.1. Distribution of cases depending on the affected frontal area

Table 1

Table 3

-	Frontal area						
Lesion type	Upper		Lower				
	No.	%	No.	%			
Edentations	9	8,11	8	22,22			
Caries	8	7,21	7	19,44			
Obturations	44	39,64	6	16,67			
Anomalies	19	17,11	10	27,78			
Prosthetic works	31	27,93	5	13,89			
Total	111	100,00	36	100,00			

Distribution of cases according to the affected frontal area and lesion type

Of the 11 patients with upper frontal area affected, were recorded obturations in 39.64% cases, prosthetic works at 27.93% and anomalies at 17.11%. Edentations represented 8.11%, and caries were present at 7.21%.

Of the 36 patients with the lower frontal area affected, anomalies were present in 27.78% of cases, edentations at 22.22% and caries at 19.44% of patients. Obturations represented 16.67%, and prosthetic works were present at 13.89%. (Table 3, Chart 2).



Chart no.2. Distribution of cases depending on the affected frontal area and type of lesions

Table 4

Evolution of self-esteem level												
Affected area	Initi	Initial evaluation Final evaluation					n					
	Low	Low Medium High		Low		Medium		High				
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Upper frontal area	69	75,82	17	18,68	5	5,49	48	52,75	31	34,07	12	13,19
Lower frontal area	8	50,00	6	37,50	2	12,50	6	37,50	7	43,75	3	18,75
Lower upper frontal	16	80,00	3	15,00	1	5,00	10	50,00	7	35,00	3	15,00
area												
Total	93	73,23	26	20,47	8	6,30	64	50,39	45	35,43	18	14,17

In the initial evaluation was registered to the most patients low selfesteem (73.23%), especially to those with both areas affected (80.00%) or the upper frontal area affected (75.82%), the percentages being significantly higher than in patients with affectation of lower frontal area (p = 0.0164, respectively p = 0.0348).

In the final evaluation, the percentage of patients with low self-esteem decreased by 22.84% and those with high self-esteem increased by 7.87%.

The increase in self-esteem was recorded in 30.00% of patients with both areasaffected, 23.08% in patients with affectation of upper frontal area and 12.50% in those with affectation of lower frontal area. The percentage of patients with improved self-esteem was significantly lower in patients with the lower frontal areaaffected than in those with both areasaffected or withaffectation of the upper frontal area (12,50% vs. 30,00% and 23,8%) (p = 0.0216, respectively p = 0.0344).



Chart no.3. The evolution of self-esteem level

Table 5

	Total	Upper frontal	Lower frontal	Upper+lower
		area	area	frontal area
Initial	18,25±4,79	18,43±5,43	19,46±5,32	16,27±5,18
Final	25,68±5,55	25,32±5,22	22,57±4,31	29,83±4,76
ES	1,55	1,27	0,58	2,62

Evolution of the Rosenberg Score (self-esteem)

Compared to the initial value of the Rosenberg score, the final value was significantly higher for the whole studied group (25.68 vs. 18.25, p <0.001). In patients with both area affected and at those with upper affectation the increase was also significant (29.83 vs 16.27, p <0.001)

respectively 25.32 vs 18.43, p <0.001), and in patients with lower area affected the increase was poorly significant (22.57 vs 19.46, p = 0.592).

The effect of esthetic restoration of the frontal area was very good (ES = 1.55), higher in patients with both affected areas (ES = 2.62) and those with affectation of upper frontal area (ES = 1.27). In patients with affectation of lower frontal area, the effect was good (ES = 0.58).



Chart no.4. Evolution of the Rosenberg Score (self-esteem)

**Discussions.** In a study conducted by Baumeister et al., it is shown that self-esteem is influenced by several factors, including physical appearance, and a higher level of self-esteem has a direct effect on mental health, increased performance and implicitly the quality of life.

Another study conducted on adolescents reveals the fact that high selfesteem has a beneficial effect not only on performance but also on emotional well-being.

## CONCLUSIONS

1. Most of the young patients presenting to a physician for frontal restoration are women and come from urban areas.

2. The affected area is in the majority of the patients the upper one, with an impact on physical appearance.

3. Frontal aesthetic restoration has a major impact on physical appearance, and implicitly on self-esteem.

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