

Oral Health-Related Quality of Life

Dr. Siddharth Mehta*

Reader, Department of Orthodontics and Dentofacial Orthopedics, Mahatma Gandhi Dental College and Hospital, MGUMST, Jaipur, Rajasthan, India

***Corresponding Author:** Dr. Siddharth Mehta, Reader, Department of Orthodontics and Dentofacial Orthopedics, Mahatma Gandhi Dental College and Hospital, MGUMST, Jaipur, Rajasthan, India.

Received: November 20, 2017; **Published:** November 29, 2017

Oral health-related quality of life (OHRQoL) has been defined as the absence of negative influence of oral situations on social life and a positive sense of dentofacial self-confidence [1]. It has been recognized that individuals with malocclusions often feel self-conscious in social situations and may have self-concept issues. Therefore, it is reasonable to expect that orthodontic treatment should result in increased self-esteem and reduced anxiety [2].

Improved quality of life (QoL) is the ultimate goal of health care systems. A number of socio-dental or OHRQoL measures have been developed and used for assessing oral well-being and to describe oral impacts on people's quality of life. Generally, they measure the extent to which oral conditions disrupt normal social role functioning and lead to major changes in behavior, such as changes in ability to work or attend school, or undertake parental or household duties.

People react differently to their physical appearance. Studies suggest an association between public self-consciousness with the person's appearance and social interaction-related abilities. People with high public self-consciousness have more chances of compromised quality of life due to malocclusion compared to those with low public self-consciousness. When compared laypersons have a tendency to overrate the attractiveness. Therefore, patient's fear, apprehensions and expectations should be known as early as possible. However further studies are needed to assess why people react differently to aesthetics with respect to quality of life [3,4].

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