



MAHATMA GANDHI MISSION'S DENTAL COLLEGE & HOSPITAL

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AWARENESS OF ROLE OF SALIVA IN ORAL HEALTH AT WAVANJE PHC

Date: 25th September 2024

Venue: Wavanje PHC

Faculty: Dr. Rafeeq Nalband, Dr. Neeraj Kolge

Organizing Agency: Department of Public Health Dentistry of MGMDCH, NSS unit of MGMDCH

Number of Students attended: 2

Saliva is a complex secretion. 93% by volume is secreted by the major salivary glands and the remaining 7% by the minor Glands. 99% of saliva is water and the other 1% is composed of organic and inorganic molecules. While the quantity of Saliva is important, so is its quality.

The components of saliva, its functions in maintaining oral health and the main factors that cause alterations in Salivary secretion will be reviewed, the importance of saliva in caries development and bacterial plaque formation will be discussed and its role as an aid to diagnosing certain pathologies will be examined. Variations in salivary flow can be affected, reversibly or irreversibly, by numerous physiological and pathological factors. Saliva plays an essential role in maintaining the integrity of the oral structures, in personal relationships, in the Digestion and in controlling oral infection. The part that saliva plays in protecting teeth from caries can be summarised Under four aspects: diluting and eliminating sugars and other substances, buffer capacity, balancing demineralisation / Remineralisation and antimicrobial action.

Saliva is a promising option for diagnosing certain disorders and monitoring the evolution of certain pathologies or The dosage of medicines or drugs. Its advantages as a diagnostic tool include its being easy to obtain and the positive Correlation between many parameters in serum and saliva.

Aim and objective:

1. To assess the oral health status of patients and to provide necessary Dental treatment.
2. To educate them and create awareness of role of saliva in oral health.
3. Effect of regular check-up on overall health of the individuals.

Method: following the ingestion of carbohydrates, the concentration of sugars in the saliva rises Exponentially, very quickly at first and then more slowly. Clearance was faster when both salivary Volumes were low and the unstimulated flow was high. After ingesting sugars, the mouth contains a Small volume of saliva, around 0.8 ml.

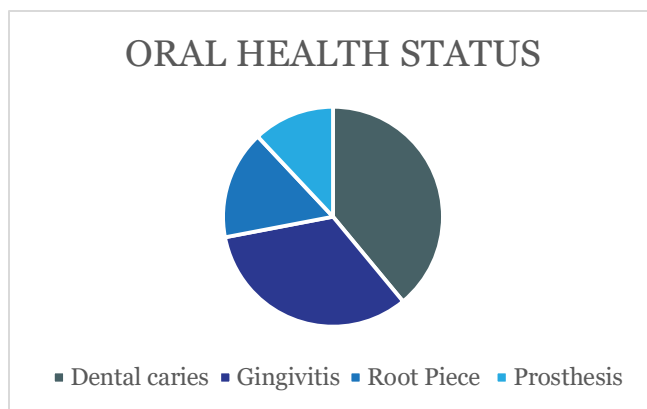
The sugar is diluted in this small quantity of saliva, where it Reaches a high concentration. This stimulates the secretory response of the salivary glands, causingAn increase in flow, which can reach 1.1 ml. When the food is swallowed, some sugar remains in the mouth. It is gradually diluted, thanks to the Saliva being secreted, and the volume of saliva in the mouth then returns to its normal level.

Consequently, a high volume of saliva at rest increases the speed of sugar removal, explaining theIncreased risk of caries in patients with a low unstimulated salivary flow rate. The capacity to clear Sugars from the mouth remains constant over time as long as unstimulated salivary flow rates are Maintained, but is drastically reduced when these are diminished. Additionally, elimination does not Occur equally in all areas of the mouth. It is faster in the areas that are closest to the places where The salivary gland ducts drain into the mouth, as saliva circulates faster there than in areas where it Forms a pool. Again, the speed of clearance from the mucosa and teeth varies considerably (0.8 to 8 Mm/min); even on the teeth, clearance will be slower from the surfaces that are more retentive and More difficult for the saliva to reach.

Observations: Total no. Of 22 patients were examined for various dental problems. Those requiring extensive treatment were referred to MGM Dental College and Hospital, Kamothe.

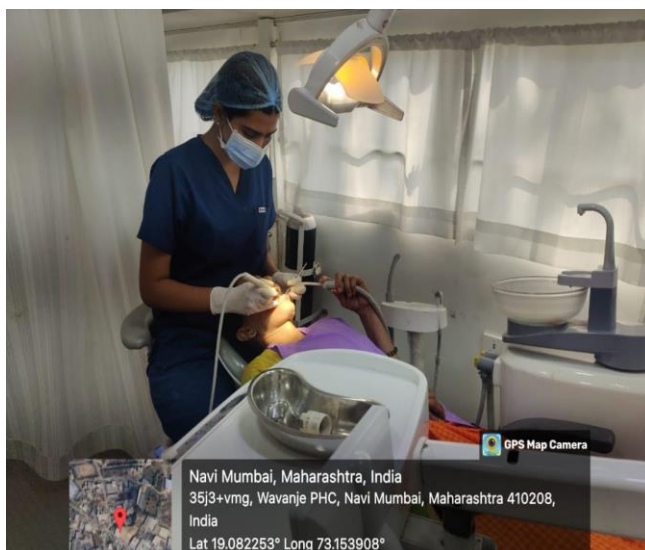
Oral health status

Condition	No. of individuals	Percentage %
Dental caries	8	36
Gingivitis	6	27
Root piece	4	18
Prosthesis	4	18



Interpretation & conclusion

1. One of the most important functions of saliva is to remove microorganisms and dietary components from the mouth
2. saliva as such plays a part in reducing the acids in the plaque, it also contains specific buffer mechanisms such as bicarbonate, phosphate and some protein systems which not only have a buffer effect but also provide ideal conditions for automatically eliminating certain bacterial components that require a Very low pH to survive.



Treatment done by team member at
camp site

List of attendies

Name of Staff	
1	Dr. Rafeeq Nalband
2	Dr. Neeraj Kolge
Name of Interns	
3	Mrunmai patil
4.	Apurva kini