

CONTRACEPTIVES IN DENTO-MAXILO-FACIAL MODIFICATIONS

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ABSTRACT

Dentistry, as a science, feels the overwhelming impact of knowledge needs and raises the share of research interest in all its subspecialties, legitimized from this perspective.

Considering the human body as a unitary whole and given the increased frequency of oral manifestations during the onset and evolution of general diseases, the practical importance of oral pathological manifestations in diagnosis, prognosis and therapeutic attitude in internal diseases.

General pathology influences and is, in turn, influenced by oral pathology. Oral manifestations can play a key role in establishing early diagnosis in a serious condition, which can be ameliorated by appropriate therapy.

Oral health and the prevention of diseases of the oral cavity is a material of increasing interest from both patients and medical staff. This interest is explained by the increased frequency of oro-dental diseases, which is a challenge in promoting oral health as effectively as possible. The right method of contraception is not always easy to discover, especially when it comes to contraception.

Lack of information has pushed women to go and buy pills directly from a pharmacy without prescription or a previous gynecological examination. This conduct is wrong, because there are hormonal dosages suitable for each woman.

Contraceptives have many beneficial effects; in addition to contraception, it is the treatment of conditions such as polycystic ovary syndrome or endometriosis.

Other benefits: relieves dysmenorrhea (pain during menstruation); relieves excessive bleeding during menstruation; improves premenstrual syndrome, has cosmetic effects by reducing acne, seborrhea, hirsutism, decreases the risk of ectopic pregnancies, decreases the risk of ovarian, endometrial, colorectal cancer. Many medical conditions begin or evolve with characteristic or common oropharyngeal symptoms.

Keywords:

changes in dental-maxillo-facial, birth control, maxillofacial changes.

INTRODUCTION

The dento-maxillary apparatus, as an integral part of the body, is subject to the influence of the factors that determine its evolution, it consists of elements with different structures and complex functions between which a morpho-clinical-functional interdependence is achieved[1].

This interdependence is installed

during the development period, is maintained throughout the entire period of activity and determines, in healthy conditions, the maintenance of a functional balance and an appropriate trophicity. These qualities are dependent on the organo-functional balance of the the whole body. This interrelationship between the pathology of the oral cavity and the rest of the body is demonstrated, demonstrating

the role of pathogenic mechanisms in periodontal diseases[2,3].

Antigenic substances are products of dental bacterial plaque and various substances released by gingival tissues. They produce antibodies in the serum of patients and stimulate the proliferation of lymphocytes.

The amount of oral manifestations and different therapeutic approach differ based on the general condition. Often, a disease diagnosed by the dentist requires establishing a first time general treatment, dental treatment setting. The disease may contraindicate, delay or restrict the scope of treatment, dental[4,5].

Ideally, oral lesions to be resolved prior to or concurrently with the general because the vicious circle is created, can maintain the condition in question or it may worsen prognosis.

Diseases of the oral cavity may be local or may present with oral manifestations constituting the oral syndrome within a general disease. The dentist must be endowed with a wealth of medical knowledge. The richness of symptoms and oral signs requires a very careful and complex examination[6,7].

Diseases of the oral cavity may be local in nature or may present as oral manifestations constituting the oral syndrome within a general disease.

The oral cavity, having a complicated architecture, will have to be explored methodically. The lips, their mucosa, the corner of the lips, the gingivolabial groove, the oral vestibule, the internal face of the cheeks, the external face of the gums said with the oral floor and the ceiling

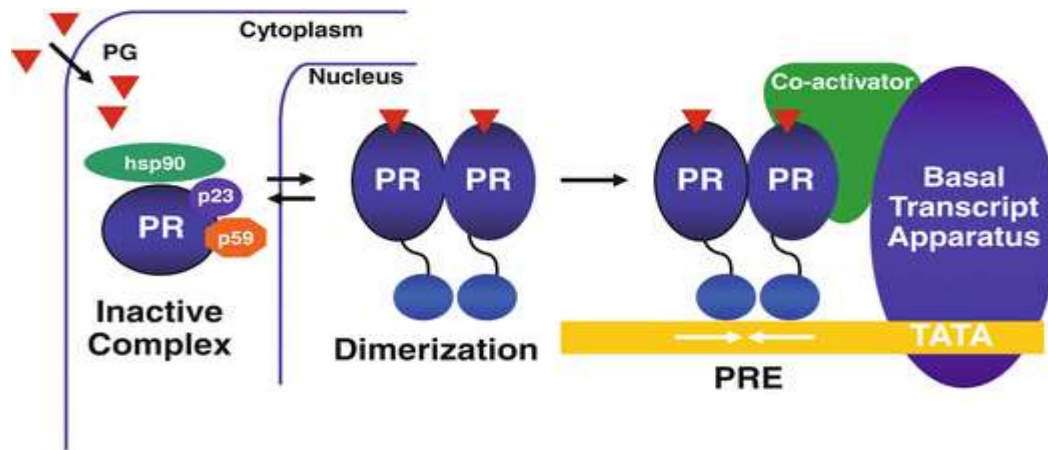
or hard palate and the veil. It is completed with the examination of the submucosa, neighboring organs-tonsils and lymph nodes[8,9].

Contraception consists of all the methods used to avoid unwanted pregnancies. The methods provided may be barrier (condom, female condom, etc.), chemicals (for example, drugs that contain levonorgestrel and ethinyl estradiol) and other types.

Barrier methods also help against the transmission of sexually transmitted diseases. This notion is closely related to the notion of Family planning, a phenomenon that has gained quite a relatively recent popularity. The Pearl Index, named after the American biologist Raymond Pearl (1879-1940), is an index that assesses the effectiveness of the contraceptive method given on a scale from 0 to 100, where the lowest score is the best[10,11, 12].

Contraceptives or monohormone pills work in several different ways. The evolution of modern oral contraceptives → together with the introduction of the concept phase, it seemed that was reached maximum dose reduction with an acceptable failure rate using progestogens are then handy. The respective progestogens were still type androgenic. Another way to improve the pill was to discover a new progestogen. Since 1981, three new progestogens have been introduced: desogestrel, norgestimate and gestodene, which have a stronger progestogenic action(Fig.1).

The pills currently used in the new generation of low dose progestogens are so safe, acceptable and have such a low failure rate that it will be very difficult to improve them.



Leonhardt SA et al. *Steroids* 2003;68:761-70.

Fig.1 Aspects of physiology of progesterone [13]

The new oral formulas are developed with existing progestogens and estrogens or even with new ones. They mainly act by thickening the cervical mucus and thinning the woman's endometrium. The endometrium is the lining or mucosa that lines the inner surface of the uterus, where an egg attaches or implants after being fertilized by a sperm. If this mucosa or "lining" is thinner than normal, it is more difficult for the egg to attach to it, which will prevent a pregnancy from developing. In addition, birth control pills that contain only progestin may prevent or interfere with ovulation. They are very effective if taken correctly[14-19].

In addition to the many side effects, contraceptives also pose a number of risks to women's health. A serious risk of using oral contraceptives, especially combined contraceptives, is the increased risk of blood clots. It can lead to complications such as: deep vein thrombosis, stroke (CVA), pulmonary embolism.

Intermenstrual bleeding, nausea and bloating are some of the most commonly reported side effects of contraceptives. While the majority of side

effects are minor, some may be serious and require immediate medical attention. So, the adverse reaction include depression, migraine them or hypertension.

There are several factors that play a role in the occurrence of side effects, including the strength of contraceptives and the type of hormones they contain. Some types of oral contraceptives are more or less likely to cause certain side effects compared to other types of contraceptives.

Side effects of contraceptives in general are: dizziness, headache, bloating, nausea, melisma, breast pain, fatigue or unusual weakness, the appearance of facial hair, weight gain, increased sensitivity to sunlight. Contraceptives are a common culprit for stroke[20-26].

When the effects are acute (severe depression, groin pain, sudden headache, chest discomfort, cough accompanied by blood, difficulty with coordination, sudden change in vision, difficulty breathing, tightness in the chest, weakness or formications at lower or upper limbs, yellowing of the skin or ocular sclera), consult a doctor.

Women who smoke more than 10

cigarettes a day use oral contraceptives, but also those over the age of 35 who use oral contraceptives have a higher risk of stroke, blood clots and heart attack and suffer from high blood pressure; they may experience stomach pain and jaundice.

If you have myopia or other eye problems, using oral contraceptives can make your eyesight worse.

The main most common oro-dental manifestations are: hyposalia or asialia (decrease or absence of salivary secretion), aptialism (global salivary deficit), xerostomia (absence of saliva, translated by dry mouth), sialorrhea (increased salivary secretion and leakage out oral), erythema and ulcers of the oral mucosa, dysphagia, sometimes even bone necrosis with perforation of the cheeks, partial or total edentations, etc.

The reactivity of the oral mucosa to oral contraceptives, changes in salivary secretion and the oral environment are favorable factors. In addition to drug stomatitis, salivary, dental, periodontal, maxillary and neuromuscular complications will be mentioned[27].

The description of the lesions is sometimes necessary for an etiological diagnosis because the appearance of stomatitis orients us on the medicinal

origin. The edema of the oral mucosa with the possible attachment of the gum can be the initial manifestation of any stomatitis.

Along with antidepressants and some heart disease medications, contraceptives can lead to gingivitis. By circulatory changes of the supporting tissue of the teeth, respectively at the marginal periodontium. Permanent monitoring of the gums and presentation to a specialist from the first symptoms is required.

This causes them to become more sensitive and ``have an overreaction`` to whatever might irritate. When the hormone levels are high, the gums become more sensitive to bacterial plaque and bacteria. When the gums become inflamed, they swell and bleed. If it is treated, inflammatory and gums can lead to bone loss around the tooth and, in the long term eventually to tooth loss[28,29].

In adolescents, hormones can cause the gums to turn red, become inflamed and bleed. In some cases, the exaggerated response of the gums to the bacterial plaque can cause the gums to increase in volume. Thus appears a prominence called Epulis. Female hormones (estrogen and progesterone) cause an increase in blood flow to the gums(Fig.2).



Gingivitis is manifested by changing the consistency of the gum - it becomes soft, and the color - to purplish red. Also, the interdental papillae become inflamed and detached from the teeth, there is pain, a feeling of gingival itching, the gums bleed very easily, even when brushing with a soft

hair toothbrush. Gradually the disease evolves towards deep structures, the gum begins to withdraw from teeth, then entraining the alveolar bone, periodontal pockets appear. Gingivitis precedes and promotes the appearance of periodontitis(Fig. 3).



Fig. 3 A diffuse gingival enlargement covering most of the anterior arch [34]

One of the factors that promote periodontitis is the use of contraceptives. Dental plaque which remains on teeth more than two - three days curable below the gum line, forming dental calculus. Tartar causes plaque to be difficult to remove and acts as a reservoir for bacteria. Moreover, you can not get rid of tartar by brushing your teeth and flossing - professional descaling is needed to remove it.

There are very important the use of dental floss and brushing twice a day with the toothpaste with fluorine and regular checkup with a dentist. Proper daily removal of plaque and bacteria reduces inflammation, discomfort and ingestion.

In some women there is an iron deficiency, often not large enough to cause anemia and can be identified by performing a blood test for ferritin. Ferritin is a protein that stores iron in the body and its low levels can be associated with a burning sensation in

the mouth or a recurrent appearance of mouth ulcers. In the case of deficiencies of folic acid, vitamin B12 and zinc, they are important substances in the formation of collagen[30-35].

Often, recurrent oral ulcers that do not respond to treatment can be eliminated with a three-month treatment with tablets of Brewers Yeast (brewer's yeast), which supplement the amounts of vitamin B1, B4 and B6.

If you are undergoing dental extractions, you can be exposed to the risk to develop a painful complication called dry alveolitis. This is a condition section caused by missing the blood clot, which is dissolved prematurely by plasminogen system- usually within 72 hours after tooth extraction. Women who use oral contraceptives are almost twice as likely to develop dry alveolitis compared to those who do not take contraceptives (June 2016 Journal of the

American Dental Association).

Saliva cleans the teeth and removes the bacteria that cause cavities on the teeth. When the mouth is dry, the amount of saliva decreases and those people are exposed to the risk of cavities.

The appearance of bone loss at the level of the jaw can eventually lead to tooth loss. The drop in estrogen levels that occurs when installing menopause will expose risk is taking a reduction of bone density (resembles gingival retraction).

When gums recede it expose a larger area of the tooth and it becomes more sensitive, especially in warmth and coldness. Gingival retraction increases the risk of tooth decay When you have a dry mouth, the risk of cavities increases[36, 37].

The composition of saliva and the rhythm of salivary flow are of great importance for the health of the oral

cavity. Saliva is a barrier against irritation by lubricating the oral mucosa. When salivary flow is greatly reduced, the mucosa becomes a favorable environment for periodontal disease and the appearance of cavities. Saliva produces the optimal environment for maintaining the integrity of teeth. Calcium concentrations in saliva prevent tooth dissolution and film glycoproteins prevent abrasion. The ability of saliva to maintain a constant pH has a protective role against microbial agents.

The composition of saliva reflects certain pathological conditions. The rhythm and composition of saliva are hormonally regulated and influenced by various drugs. The salivary glands serve as target organs for hormones. Sex hormones can influence the rhythm and composition of saliva, especially in specifying the day of ovulation; there was an increase in salivary phosphate during ovulation.

CONCLUSIONS

Contraceptives cause gingivitis; gum problems are also aggravated and because such pills so much used by women in

their worldwide.

It requires continuous monitoring of the gums and presentation to a physician from the very first symptoms .

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