

established with controlling MRI. Orthopedic stability of TMJs was established with definitive occlusal treatment (restoration of wear teeth tissues with composite fillings). Because of accompanying osteoarthritis and better stabilisation of TMJs as well as teeth protection from bruxism a stabilisation splint was fabricated. Bruxism is a pathophysiological disorder of unclear aetiology. The most noticeable sign of bruxism is excessive teeth wear which can cause pathological occlusal relationships. The mechanism of aetiopathogenesis of TMD is insufficiently explained and occlusion is considered to be a secondary aetiological factor. Anxiety can be a pathophysiological factor of bruxism and can lead to persistence of chronic temporomandibular pain.

Oralno zdravlje novaka Hrvatske vojske

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Uporabom DMFT (KEP indeks) i FST (zbroj zdravih zuba i zuba liječenih ispunom) indeksa prikazano je oralno zdravlje i oralne zdravstvene navike novaka Hrvatske vojske. Klinički je godine 2001. pregledano i o zdravstvenim navikama ispitano 505 19-godišnjih novaka iz vojarne u Koprivnici. Oralni status zuba (osim umnjaka) opisan je DMFT indeksom (decayed, filled, and missing teeth) i uspoređen s FS-T indeksom (filled and sound teeth). Utvrđen je broj pranja zuba u danu te razlog i broj posjeta novaka stomatologu tijekom godine. Ispitana je ovisnost rezultata o specifičnosti gradske i seoske socijalne zajednice. Izračunan je stupanj saniranosti zubi novaka izrazom $FT \times 100/DMFT$. Istraživanje je pokazalo prosječni DMFT indeks 7,32 (DT: 3,15, MT: 1,29 i FT: 2,88). Prosječna vrijednost FST indeksa iznosi 23,56, a saniranost zuba 47,8 %. Utvrđena je statistički znatna razlika prema prebivalištu kod DT, MT, FT i FST indeksa. Ispitanici iz seoskih sredina imaju više zuba zahvaćenih karijesom, a

ispitanici iz gradskih sredina imaju veću saniranost zuba (66 %). Ispitanici koji tri ili više puta na dan peru zube te redovito posjećuju stomatologa imaju znatno više vrijednosti FT i FST indeksa. Bolje je zdravstveno stanje zuba ispitanika gradskih sredina (više vrijednosti FT indeksa te sporija kumulativna distribucija i statistička znatnost FST indeksa). Nema statistički znatne razlike u vrijednosti DMFT indeksa u usporedbi s ispitanicima seoskih sredina. U novaka Hrvatske vojske utvrđene su visoke vrijednosti DMFT indeksa. FST indeks prikladnije je od DMFT indeksa primjenjivati u populacijama s višim stupnjem zahvaćenosti zuba karijesom. Provedeno istraživanje pomaže da se utvrdi zdravlje zuba novaka Hrvatske vojske i pridonosi osmišljavanju optimalnih preventivnih programa.

Oral Health of Croatian Army Recruits

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DMFT index and FST index were used to determine the oral health and oral health care habits of Croatian Army recruits. In 2001 505 19-year-old recruits in the barracks in Koprivnica were clinically examined and asked about their health care habits. Oral status of all teeth (except wisdom teeth) was described by DMFT index (decayed, filled, and missing teeth) and compared with FST index (filled and sound teeth). The number of tooth brushing per day and the reason and number of visits to the dentist each year were determined. The dependence of results in the specific urban and rural community was tested. The level of teeth sanitation of the recruits was calculated by the formula $FT \times 100/DMFT$. The study showed average DMFT index 7.32 (DT: 3.15, MT: 1.29 and FT: 2.88). The average value of FST index was 23.56 and teeth sanitation 47.8 %. Statistically significant difference according to domicile in DT, MT, FT and FST index