Knowledge, Attitude And Awareness Of Oral Piercings Among Dental Students

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ABSTRACT:
BACKGROUND:
Piercing is a way to modify the body, usually by puncturing the skin and mucosa to introduce a piece of jewellery. Currently, in western societies, piercing is growing in popularity, particularly among adolescents and young adults, who view it as denoting marginality, beauty, or group identity. The most frequently punctured body parts are the tongue and lips but other areas may also be used for piercing, such as the cheek, uvula, lingual frenum, and lips. Several oral and systemic complications may be associated with this practice; however, limited data related to these complications can be obtained in the literature.

AIM AND OBJECTIVE:
The aim of the study is to assess the knowledge, attitude and awareness of oral piercings among dental students.

METHODOLOGY:
A survey was carried among 100 dental students in Saveetha Dental College in Chennai. A self-assessed questionnaire containing 11 questions were filled up by the respondents. The obtained data was further processed and analysed.

RESULT:
This study concluded that 85% of the students are aware of oral piercings. Majority of the students say that aesthetics is the main reason for oral piercings. 60% of the students are aware about the materials used for oral piercings and 55% of the students know that the common site for oral piercings is tongue. 76% of students are aware of the complications and they think that the pain is the most common complication. 67% of the students think that the injury to the surrounding structures can happen due to oral piercings.

CONCLUSION:
With our study we suggest programs to improve the awareness about oral piercings. Further more research work with more number of dental student population is required.

INTRODUCTION:
The term "piercing" refers to a practice carried out in order to insert the jewellery on a site drilled through needles into the skin, usually without anesthesia. It is a way to modify the body.(1) Oral piercing has become popular among young adults during the recent decade. It is associated with religious, tribal, cultural or sexual symbolism- currently became popular in industrialised countries.(1,2) Piercing is growing in popularity, particularly among adolescents and young adults, who view it as denoting marginality, beauty, or group identity.(3) It has been practiced by many tribal societies, particularly in Africa, Asia, and South America, as far back as can be traced and has involved a variety of materials, including wood, metal, pottery and ivory(4,5). Various body parts are preferred for this type of adornment; most commonly the ears, nostrils, eyebrows, navel, and tongue. In the body areas of concern to the dentist, the most frequently punctured body parts are the tongue and lips,
but other areas may also be used for piercing, such as the cheek, uvula, and lingual frenum. Less common locations were the lingual fraenum, the dorso-lateral tongue and the uvula. (3) The shape and size of the jewelry to be pierced are determined by the body part to be pierced and personal preferences. (6)

The jewelry are made with non-toxic and hypoallergenic materials. (1) The most common type of jewellery used in the tongue is the barbell. A common modification of this is the labret, where 1 of the “spheres” is replaced by a smooth flat disc. A third type of piercing is a ring with 1 or 2 spheres (7-11). Despite their harmless appearance, oral piercings are related to a series of local and systemic risks. However, the adverse effects of piercing insertion and use are little known in the literature. It is emphasized that oral professionals must be aware of piercings, inform the patients about consequences, treat possible complications, and recognize lesions caused by removed devices. (2)

MATERIALS AND METHODS:
This questionnaire based study was carried among dental students for a period of one month to evaluate the knowledge, awareness, and attitude of oral piercings. Almost students from every year participated in the survey. They were handled questionnaires which consisted of 11 questions and asked to tick the options which they were aware of. The results were analysed and the statistics was obtained.

The questionnaire consisted of the following questions:

1) Have you ever heard about oral piercings? Yes/no

2) According to you, what do you think people practice oral piercings for?
   - Aesthetic reasons
   - Due to their tribe
   - Religious beliefs
   - Others

3) Do you know what are the materials preferred for oral piercings? Yes/no

4) If yes, what are the materials?
   - Wood
   - Metal
   - Ivory
   - Stainless steel
   - Labrets
   - Barbells
   - All the above

5) Are you willing to do a oral piercing? Yes/no

6) What are the sites in the oral cavity that can be pierced?
   - Tongue
   - Lips
   - Uvula
   - Lingual frenum
7) Do you think that people with oral piercings have a good oral hygiene? Yes/no

8) Are you aware of the complications of oral piercings? Yes/no

9) If yes, what are the complications?
   - Pain
   - Excessive bleeding
   - Swelling
   - Syncope
   - Formation of reactive tissue
   - Drainage of purulence
   - Nerve damage
   - All the above

10) Do you think that there are any advantages of the oral piercings apart from the esthetics? Yes/no

11) Can oral piercings cause injury to the surrounding oral structures? Yes/no

RESULTS:

Heard about oral piercings?

- 85% Yes
- 15% No
WHY DO PEOPLE PRACTICE ORAL PIERCINGS FOR?

- Aesthetics: 62
- Due to their tribe: 15
- Religious beliefs: 6
- Others: 2

DO YOU KNOW THE MATERIALS PREFERRED FOR ORAL PIERCINGS?

- Yes: 60
- No: 25
SITES THAT CAN BE PIERCED?

DO PEOPLE WITH ORAL PIERCINGS HAVE GOOD ORAL HYGIENE?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>13</td>
<td>72</td>
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</table>

AWARE OF COMPLICATIONS?

<table>
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<tr>
<th>Yes</th>
<th>No</th>
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<tr>
<td>24%</td>
<td>76%</td>
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IS THERE ANY ADVANTAGE OF ORAL PIERCINGS?

- **NO**: 87%
- **YES**: 13%
DISCUSSION:

Oral jewellery has become a relatively new phenomenon. It has grown in popularity, especially among adolescents and young adults. In this study conducted among 100 dental students, majority i.e 85% have heard about oral piercings.

According to Kustner et al., the principal reason is the zest of the youth for being in style and in fashion. Other factors may include religion, traditional issues, rituals, or the feeling of being a member of a social group or even the feeling of superiority above the other members of the social “caste”. Anthropologists describe piercing as a way for an individual to identify with a specific group, to denote one’s financial or marital status or even as a method of beautifying the body. However, in this study it was found that awareness for Aesthetics as a reason for an oral piercing is high followed by the tribe.

Piercing jewellery is predominantly made of metal, usually stainless steel, gold, niobium, titanium, or metal alloy. Recently, synthetic materials like Teflon and nylon or plastic have also been used. Oral piercing sites for jewelry placement include the lips, cheeks, frenum, uvula. However, the most common site for oral piercing is the tongue. Piercings that are most frequently applied in the oral and perioral area are captive-bead ring, labret and barbell. However, in this study, 60% of the students are aware of the materials preferred for oral piercings and the awareness was high for the stainless steel jewellery. Majority (55%) of the students are aware that the tongue is the common site for an oral piercing. On the other hand, this study shows that more than 50% are unaware that the barbells and labrets can also be used as the jewellery for the piercing. 89% of the dental students were not interested in an oral piercing keeping in mind the complications.
It is possible for people with jewellery in the intraoral and perioral regions to experience problems, such as pain, infection at the site of the piercing, transmission of systemic infections, endocarditis, oedema, airway problems, aspiration of the jewellery, allergy, bleeding, nerve damage, cracking of teeth and restorations, trauma of the gingiva or mucosa, and Ludwig’s angina, as well as changes in speech, mastication and swallowing, or stimulation of salivary flow.(3)

In a review paper by Campbell et al., the sequelae of piercing were categorized into acute and chronic and the postoperative complications of oral piercing were analyzed.(15) Pain has been reported as the most common consequence of oral piercing and the most common cause for the patients to seek consultation.(16) In this study, 76% of the students are aware of the complications and the awareness was high for pain followed by swelling. 87% of the dental students think that there are no advantages of oral piercings apart from the aesthetics.

According to vierra et.al dental pain, trauma in the tongue, gingival recession, tooth fractures, gum and palate traumas, tooth fracture were some of the injuries found in the surrounding tissues due to the oral piercings. In this study, 67% are aware that the piercing can cause injury to the surrounding tissues and 72% think that people with the oral piercings do not have a good oral hygiene.

CONCLUSION:
Oral piercing is a trend that has emerged again in the last decade in the West and it is evident mostly among young members of society. Although complications from the use of oral piercing may involve simple, self-limiting local changes, direct and indirect damage to both soft and hard oral tissues, there is always the possibility of potentially fatal problems. They need to play an active role in educating patients about the dangers of oral piercing before the patients indulge in this body art and should be informed as well and should be more prepared to recognize such patients, their oral situation, and ways of preventing the consequences deriving from oral piercings. Patients who have oral piercings should be regularly examined and taught about the possible short- and long-term complications they might face.

REFERENCES:
(2) Venta et al. Oral piercings among first-year university students. OOOOE, Volume 99, Number 5.