

Classification of Signs and Causes of Edentulism in Humans

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Perspective

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DESCRIPTION

Edentulism, often known as toothlessness, is the absence of teeth. It comes about as a result of tooth loss in organisms that have teeth by nature. Edentulous organisms also refer to those that have never had teeth. A couple of examples include the anteaters and sloths, which were once classified in the taxonomic order edentata because they lack posterior teeth and have underdeveloped or absent front teeth. Edentulism in naturally dentate organisms encompasses more than just tooth presence or absence. Because the teeth, jaws, and oral mucosa are dynamic (changing over time), it is biochemically complicated. Clinically significant for edentulous people are processes like bone remodelling (loss and gain of bone tissue) in the jaws and inflammation of soft tissue in response to the oral microbiota. For instance, the teeth frequently first became loose due to bone resorption in the jaw. Even after the teeth are lost, the jaw in an edentulous area continues to resorb; nevertheless, the placement of dental implants can trigger new bone production and osseointegration. People often take their teeth's importance and functionality for granted, but a closer look at their significance will show just how crucial teeth are. A patient's quality of life is often reduced after tooth loss, and the resulting compromised oral function can lower one's self-esteem and negatively affect their psychological health. Patients could feel ashamed to smile, eat, or speak.

Multiple factors may contribute to the disorder known as edentulism. Extremely rarely, a condition called anodontia, where teeth never grow, can cause toothlessness. The majority of the time, it results from adult permanent tooth extraction. Dental caries, periodontal disease (gum disease), trauma, or other pathologies of the face and mouth (such as cysts, tumours) may or may not be to blame for this. Dental caries is thought to be the main reason for tooth loss in people under the age of 45, whereas periodontal disease is the main reason for tooth loss in people beyond the age of 45. The American College of Prosthodontists has created a system of classification. The classification is based on diagnostic results, which aids practitioners in choosing the best course of treatment for patients.

Classification

Class I-Minimally compromised: A panoramic radiograph must show residual bone height of at least 21 mm at the lowest vertical height of the mandible, residual ridge morphology that prevents the denture base from moving horizontally or vertically, and the location of muscle attachments that support denture base stability and retention.

Class II-Moderately compromised: This class is distinguished by the continued degradation of the denture-supporting anatomy. It is also characterized by specific patient management and lifestyle considerations as well as systemic disease interactions. Characteristics include: A panoramic radiograph must show residual bone height of at least 21 mm at the lowest vertical height of the mandible, residual ridge morphology that prevents the denture base from moving horizontally or vertically, and the location of muscle attachments that support denture base stability and retention.

Class III-Substantially compromised: This classification level is where surgical revision of supporting structures is needed to allow for adequate prosthodontic function. On a panoramic radiograph, residual alveolar bone height of 11 to 15 mm was detected at the mandible's lowest vertical height. The denture base is least resistant to horizontal or vertical movement when residual ridge morphology is present. Location of muscle attachments has a moderate impact on the stability and retention of the denture base.

In 2010, 2.3% of the world's population, or 158 million people, were affected by edentulism. When compared to men, where the rate is 1.9%, women have a higher prevalence of 2.7%. People from the lower end of the socioeconomic spectrum are more likely to experience edentulism. The annual productivity losses caused by tooth loss are thought to total roughly US\$63 billion worldwide.