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# ***Pregnancy and Oral Health in Hong Kong***

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Objectives: To assess the oral health status, oral experiences, oral health knowledge and behaviour of pregnant women in Hong Kong. Methods: Pregnant women visiting out-patient obstetrics and gynaecology clinics in hospitals were invited to participate. Participants self-completed a questionnaire and were invited to undergo a clinical examination. Results: One hundred and fifty-four pregnant women participated in the study. Common experiences during pregnancy were nausea and vomiting (72.7%, 112) and cravings for sugary food (77.9%, 120). Common oral symptoms included bad breath (65%, 100), bleeding gums (62.3%, 96), and sgeusiady (54.5%, 84). Most women incorrectly perceived that their child would experience fever during the eruption of teeth (93.5%, 144) and were unaware that gum disease may relate to preterm and low-birth-weight babies (58.5%, 90) or that the bacteria that can cause tooth decay can be passed on to their child after the baby is born (55.9%, 86). Few women reported to have received oral health education during pregnancy (7.1%, 11). Oral health knowledge scores were associated with family income ( $p=0.03$ ). Dental attendance pattern was associated with income level ( $p<0.01$ ) and educational attainment ( $p=0.002$ ). Fifty-eight percent (90/154) participated in the oral examination. Over 90% of the women had dental caries experience. The mean DMFT was 5.04 (SD 3.73). Untreated decay teeth was associated with education level ( $p=0.006$ ) and age ( $p=0.03$ ). The mean plaque score was 46.9% (SD 20.4). The mean bleeding score was 41.8% (SD 21.7) and was associated with family income ( $p=0.02$ ). Conclusion: A wide variety of clinical oral health problems and oral symptoms were observed among pregnant women in Hong Kong. Knowledge about oral health changes during pregnancy was insufficient. Socio-demographic variations in dental knowledge, behavior, caries experience and periodontal health were observed.

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