

Analisis kehilangan gigi molar pertama mandibula terhadap trauma oklusi dan status periodontal: studi retrospektif di RSKGM FKG UI = Analysis of mandibular first molar loss to trauma from occlusion and periodontal status: a retrospective study in RSKGM FKG UI

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Abstrak

ABSTRAK

Latar Belakang: Kehilangan gigi dan trauma oklusi merupakan salah satu faktor pendukung penyebab penyakit periodontal. Belum ada penelitian mengenai analisis kehilangan gigi molar pertama mandibula terhadap trauma oklusi dan status periodontal di Indonesia. Tujuan: Memperoleh analisis kehilangan gigi molar pertama mandibula terhadap trauma oklusi dan status periodontal. Metode: Studi retrospektif menggunakan data sekunder dengan pendekatan potong lintang dari rekam medik Departemen Periodonsia RSKGM FKG UI periode 2012-2017. Hasil: Didapatkan 184 subjek yang mengalami kehilangan gigi molar pertama (M1) mandibula dengan jumlah kasus trauma oklusi terjadi pada 42 gigi premolar kedua (P2) mandibula dan 63 gigi molar kedua (M2) mandibula. Trauma oklusi yang terjadi pada P2 dan M2 mandibula memiliki nilai resesi gingiva, kedalaman poket, dan kehilangan perlekatan klinis yang lebih besar dibandingkan dengan keadaan tidak trauma oklusi. Terdapat perbedaan bermakna ($p < 0,05$) nilai resesi gingiva, kedalaman poket, dan kehilangan perlekatan klinis antara gigi P2 mandibula trauma oklusi dengan tidak trauma oklusi. Terdapat perbedaan bermakna ($p < 0,05$) nilai resesi gingiva dan kehilangan perlekatan klinis antara gigi M2 mandibula trauma oklusi dengan tidak trauma oklusi. Kesimpulan: Kehilangan gigi M1 mandibula dengan trauma oklusi berpengaruh terhadap resesi gingiva, kedalaman poket, dan kehilangan perlekatan klinis pada gigi P2 dan M2 mandibula.

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ABSTRACT

Background: Tooth loss and trauma from occlusion are kind of factors that contributing in periodontal disease. There has been no research on the analysis of mandibular first molar loss to trauma from occlusion and periodontal status in Indonesia. Objective: Get the analysis of mandibular first molar loss to trauma from occlusion and periodontal status. Method: A cross-sectional study using medical records in Department of Periodontics RSKGM FKG UI 2012-2017. Result: There were 184 subjects that had mandibular first molar (M1) loss with total 42 mandibular second premolar (P2) and 63 mandibular second molar (M2) cases related to trauma from occlusion (TFO). Gingival recession, pocket depth, and loss of attachment of P2 and M2 mandibular teeth with TFO were worse than non-TFO. There were statically significant differences ($p < 0,05$) of gingival recession, pocket depth, and loss of attachment between P2 mandibular teeth with TFO and non-TFO groups. There were statically significant differences ($p < 0,05$) of gingival recession and loss of attachment between M2 mandibular teeth with TFO and non-TFO groups. Conclusion: Mandibular first molar loss with trauma from occlusion is related to gingival recession, pocket depth, and lost of attachment on mandibular second premolar and mandibular second molar.