Anal Atresia Impact on Cariogenic Risk balance: Case Report

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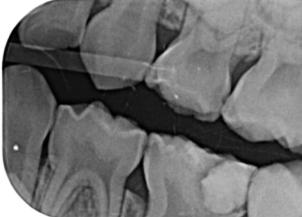
Introduction

Anal atresia is a congenital defect consisting in the absence or obstruction of the anal orifice. The treatment includes surgery from an early age. Some of the post surgery complications are constipation and fecal incontinence, which can be managed on the basis of controlling the amount of fiber in diet. Diet constitutes a risk factor in the development and progression of dental decay.



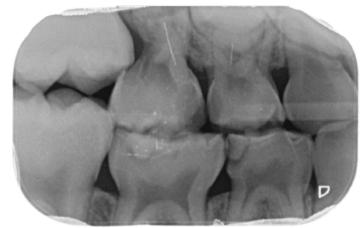


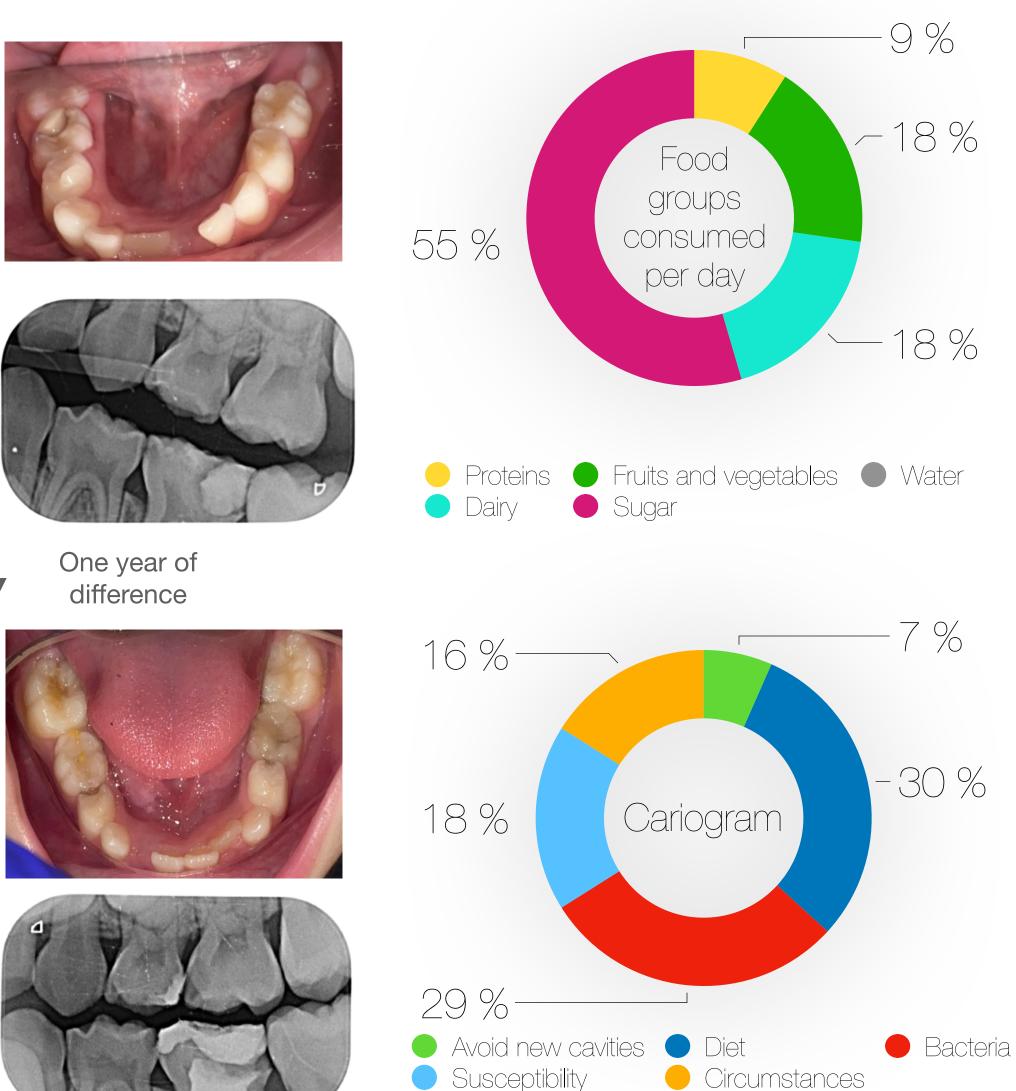




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Case Report

- Male patient, 7 years and 4 months old, Frankl scale 2.
- Anal atresia (3 surgical interventions), constipation and fecal incontinence.
- Sporadic use of diapers.
- First stage mixed dentition, high cariogenic risk, caries activity (df 8 and DMFT 0).
- · Generalized gingivitis induced by dental biofilm.
- Previous care with pregraduates (two composite resins and pulpectomy).
- Three months check-ups

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The patient returned for check-ups after being absent for one year. Comparing previous images, it showed that incipient caries turned into cavitated lesions, and some of them with pulp compromise.

The mother was interviewed to evaluate risk and protective factors. Diet is the main risk factor of the patient. He has 6 daily intakes, of soft and sticky consistency, with high consumption of sugars and fermentable carbohydrates. The mother reports that the diet is low in fiber, to avoid episodes of fecal incontinence at school and bullying.

Conclusion

It is important to consider multiple cariogenic risk factors to avoid caries progression. In this patient is difficult to modify his diet, due to a history of fecal incontinence, therefore dietary modifications must be made by a nutritionist. Other factors can be controlled, such as the use of fluoride, brushing and achieving adherence to treatment, and therefore to periodic check-ups.

References

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