

Training Manual on Oral Health Promotion for
HEALTH WORKERS

National Oral Health Programme

Ministry of Health and Family Welfare

Government of India

Conceptualised and Developed by:

Centre for Dental Education and Research

WHO-Collaborating Centre for Oral Health Promotion

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BACKGROUND

Primary Health Care is the bulwark of the public health care system in India. Many developed countries with health indicators that are several folds better, have turned focus on strengthening primary care and make it accountable. Frontline workers are the powerhouses of the Primary Health Care system. This workforce is extremely diverse and is known by different eponyms in India, viz., Accredited Social Health Activist(ASHA), Auxiliary Nurse Midwife(ANM), Anganwadi Worker (AWW), Multipurpose Worker (MPW), Mid-Level Providers (MLP) and Nurses. The Health and Wellness Centres, slated to be the upgraded subcenters in close proximity to the communities will be the hubs of significant activity at the primary level.

Among the multifarious duties performed by the frontline workers, health education and promotion stand tall. Oral Health Promotion is suggested to be integrated in this domain.

Primary Health Care has the potential to reduce the morbidity that is the result of oral diseases like decay, gum diseases, oral cancer and potential cancerous conditions of the mouth. This may help lower the cost to the system and the individual, better than any other approach. This may help reduce the need for secondary and tertiary care as well.

Prioritisation of oral health promotion at the primary level is the key for improved oral health outcomes. Prevention is the sinew of oral health promotion. Expanding the skillset of frontline workers for an inclusive approach that addresses oral health is the focus of this manual. It is expected to back a robust training programme.

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The manual aims at enhancing the understanding of frontline workers on oral health, their abilities to communicate regarding this with families and promote behaviours that are conducive to good oral health, following a life course approach starting from the pregnant women to neonates, children, adults, family, geriatric individuals and special groups, It would also help in management of a few dental emergencies like trauma to teeth.

Universalising primary care which includes oral health care is the bigger goal, which could be realised soon with determined efforts that can reduce the rapidly escalating demand for treatment and care at higher levels of the health system. Working towards this may revolutionise the entire system of oral health care delivery in India.



National Oral Health Programme (NOHP)
Ministry of Health and Family Welfare



जगत प्रकाश नड्डा
Jagat Prakash Nadda



सत्यमेव जयते



स्वास्थ्य एवं परिवार कल्याण मंत्री
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MESSAGE

The National Oral Health Programme (NOHP) is an initiative launched in 2014-15 with an overarching aim to provide affordable, accessible and quality oral healthcare.

It gives me immense pleasure to know that such an informative and yet practical manual on Oral Health promotion for Health Workers has been brought out. Oral health, which is also referred as oral hygiene, is a critical component of overall good health. Small steps towards developing good habits like brushing teeth twice daily and properly, rinsing the mouth after each meal, limiting consumption of sweet, sticky food items and not using tobacco products ensure prevention of oral and dental diseases.

With less awareness about oral health in our country, people very often suffer from dental problems which, once allowed to progress can be quite expensive to treat and manage. Through dissemination of the information in this manual, I hope every single Health Worker of our country will be equipped with the tools and knowledge for assessing the oral health and hygiene of people.

I am confident that the efforts of every single Health Worker in the vast healthcare system of our country will bring positive changes in the oral health awareness of the citizens.

I wish the programme as well as all implementing agencies success in improving oral health of general public with this initiative.



(Jagat Prakash Nadda)

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Message

This manual on Oral Health promotion for Health Workers is being introduced at a time when India is dealing with a dual disease burden – tackling both communicable and non-communicable diseases. The best long-term strategy for achieving control of these diseases, all the while ensuring optimal utilization of available resources, is to invest in training our human resources and in disease prevention. And this manual will go a long way in achieving this strategy for control of common oral diseases.

Equipped with the information in this manual, health workers will be empowered with not just the knowledge of most common oral diseases but also the ability to identify and manage them in their communities. The disease information pertains to people of all age groups; from pregnant women to infants, children and adolescents to adults and geriatrics. This manual will also empower health workers to identify lifestyle risk factors that could result in the development of oral diseases, such as use of tobacco products or consumption of a diet high in sugar.

Along with the diverse communication materials developed under the National Oral Health Programme thus far - such as radio jingles, TV commercials, posters and pamphlets – this manual will make great strides in generating awareness and knowledge about the importance of oral health. I wish the programme and its technical partners great success in all its endeavors.

(Anupriya Patel)

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MESSAGE

स्वास्थ्य एवं परिवार कल्याण राज्य मंत्री
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MINISTER OF STATE FOR
HEALTH & FAMILY WELFARE
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I am delighted that the Ministry of Health & Family Welfare is bringing out a Manual on Oral Health Promotion for the Health Workers. Oral health encompasses optimum health of teeth, gums, cheeks and lips. Conditions of oral cavity can adversely affect our general overall health and wellbeing. It can not only cause debilitating pain and discomfort but can also affect our ability to derive nutrition from food and result in systemic conditions. Besides sound oral health has a definitive bearing on our physiology and our overall health.

For a community to be knowledgeable and aware of the importance of oral health, the community leaders have to be role models. We need to follow basic oral hygiene practices, eating a healthy, balanced diet and refraining from use of tobacco products like cigarettes, gutka, khaini, etc. This manual is the first step towards educating health workers and empowering them, in turn, to educate the community.

The National Oral Health Programme has developed various Behavior Change Communication materials and this manual will be a great addition to the same. I am sure that such a precise, educative and interactive manual will provide value addition to the training of health workers. I wish the programme a resounding success.

(Ashwini Kumar Choubey)

New Delhi
March, 2018

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Government of India
Department of Health and Family Welfare
Ministry of Health & Family Welfare
Dated : 14th March, 2018



MESSAGE

This manual for Health Workers on Promoting Oral Health is the need of the hour. India's National Health Policy released in 2017 lays great emphasis on strengthening primary health care across the country and prevention of common diseases. Good oral and dental health constitutes an important part of general health in all age groups. This manual is also timely as the country begins the process of setting up Health & Wellness Centres that are envisaged to provide a package of basic primary health care services to all its citizens. This package of services includes dental services as one of its essential components.

A Health Worker is a central figure in every community and has the potential to greatly influence oral health practices in the people of the community. This manual will equip them with knowledge about the common oral diseases. By acting upon this knowledge, health workers can not only become role models in maintaining good oral hygiene but can also further spread that knowledge to all her/his community residents.

The visual appeal of the manual is enhanced through the detailed and beautiful images that also make the information so easy to understand and remember. Suggested activities and games take the learning experience a step further for the entire community.

I wish the National Oral Health Programme the very best of luck in all its wonderful initiatives.


(Preeti Sudan)

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दिनांक/Dated: March 15, 2018



Foreword

Oral health, as defined by the World Health Organization, is "a state of being free from mouth and facial pain, oral and throat cancer, oral infection and sores, periodontal (gum) disease, tooth decay, tooth loss, and other diseases and disorders that limit an individual's capacity in biting, chewing, smiling, speaking, and psychosocial wellbeing."

In line with the focus on prevention of oral diseases, this manual on Oral Health Promotion for Health Workers is being introduced under the National Oral Health Programme. This manual will guide the health workers on ways to prevent the most common dental problems occurring in the community. It informs on simple, easy-to-adopt, preventive practices like proper and regular tooth brushing, a healthy diet and development of mouth rinsing habit after every meal.

Health workers are often the first point of contact for individuals in the community. With the knowledge acquired upon reading this manual, health workers will be able to detect the common dental diseases early, manage them and make appropriate referrals. From this manual they will also learn how to train people on examining their own oral health and hygiene.

This manual has the potential to create a community that is informed and creating awareness about the importance of and need for oral health services. I wish the programme great success in achieving its goals and objectives.


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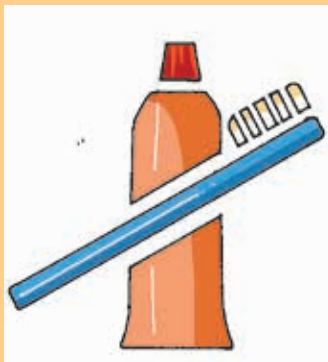
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YOUR ROLE AS A FRONTLINE WORKER



Avoiding sweet and sticky foods



Brushing twice a day



Regularly consulting a dentist

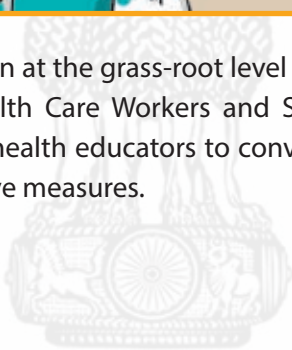
Oral health is an integral part of overall health. Oral Health problems like tooth ache associated with decay, gum diseases, irregular alignment of teeth, and mouth cancer are prevalent in India, some to an extent of nearly half of the population. Identifying and treating such a wide range of diseases incurs an economic burden on the country.

Therefore, it is important that a strategy be developed to nip these problems in the bud and put forth **prevention** as a single point agenda to tackle them.

Formal training in dental schools is a definite requirement for treatment of dental diseases. Prevention on the other hand can involve health workers, school teachers and personnel in other sectors who have access to interactions with large groups of people.

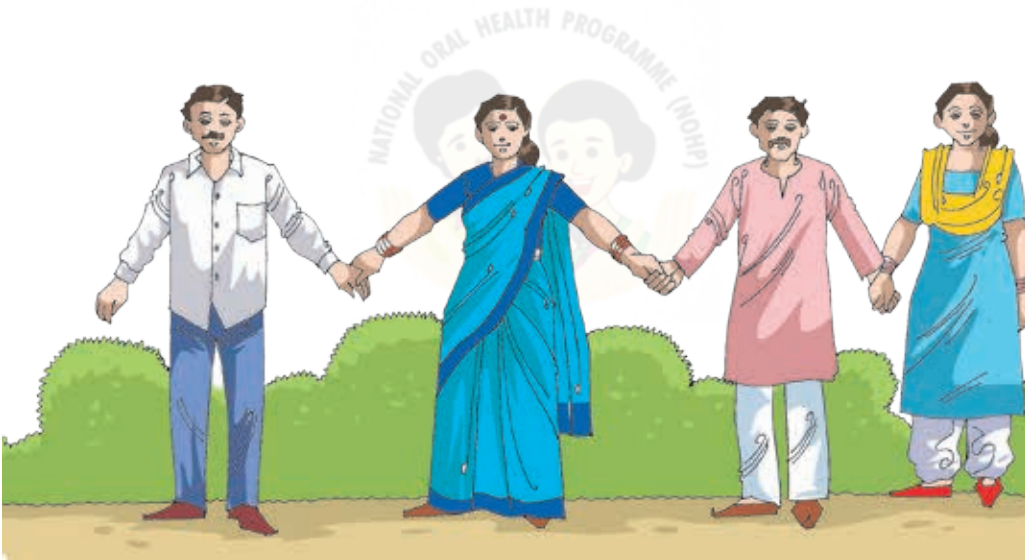


Dental Health Education at the grass-root level can help curtail oral health problems to a large extent. Health Care Workers and School Teachers in rural and urban areas can be the best health educators to convey the message on good oral health practices and preventive measures.



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You have the edge

- As the torch bearers of community health in your region / ward / locality you all are at a definite advantage to carry forward the fact that dental diseases have a bearing on overall health
- You are more approachable and your reach is wider
- Your appropriate referrals to the local dentists will boost up awareness further
- Information dissemination among masses related to good oral health is a moral duty

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OBJECTIVES

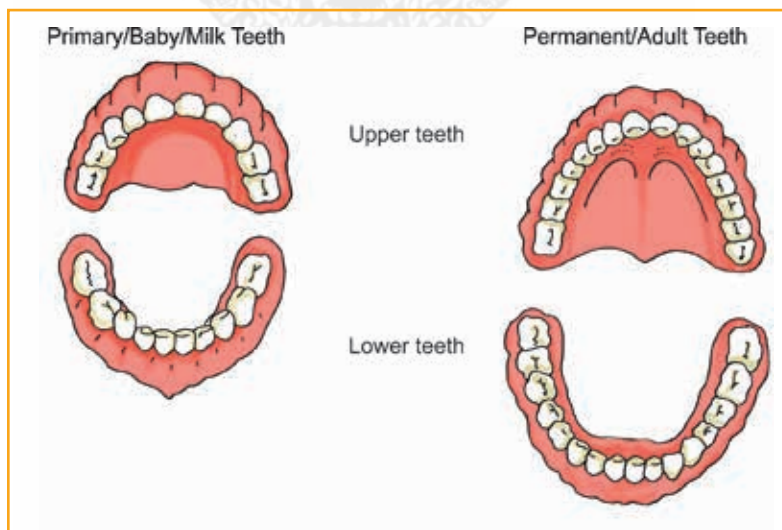
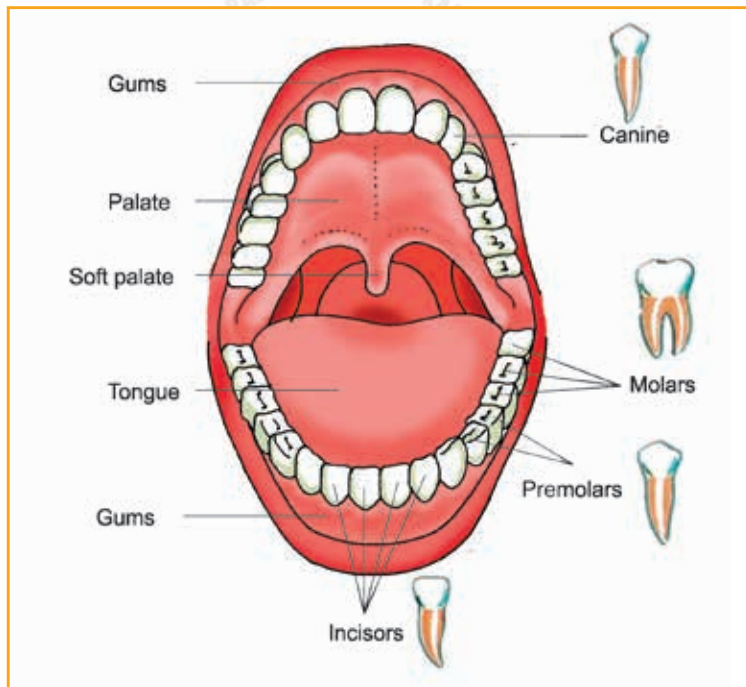
After reading this manual, you will know how to:

- Promote oral health
- Identify and prevent common oral diseases
- Give first-aid in dental emergency
- Care for special groups
- Appropriately refer



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Healthy Mouth



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HEALTHY MOUTH

The mouth leads to the oral cavity. The oral cavity has teeth, gums and the following parts

Tongue

The tongue is a freely movable muscular organ present in the oral cavity. It aids in taste, speech, chewing and swallowing. The upper surface of the tongue has projections called papillae which bear taste buds.

Palate

The roof of the mouth is formed by the palate. The bony part of the palate is called hard palate and behind the hard palate is the soft palate.

Cheek

The mouth/oral cavity is bound by the upper and the lower lip and the inner side is the cheek. The oral cavity is lined by a specialized layer of the skin called mucosa.

Teeth

- Teeth are vital structures of the body with a definite blood and nerve supply
- Humans have two sets of teeth
 - Milk teeth/ Baby teeth/ Primary teeth
 - Adult teeth/ Permanent teeth
- The first to appear are Milk Teeth and are helpful to the child not only for chewing but also in providing guidance to the developing jaw and permanent teeth.

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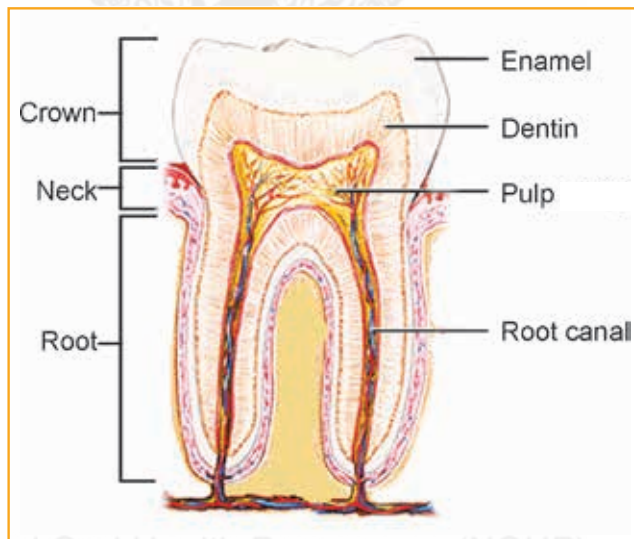
There are four different types of teeth in human beings.

1. **Incisors:** They are the front teeth, four in the upper arch and four in the lower arch. They are shaped to bite and cut food into small pieces
2. **Canines:** They are conical teeth at the corner of the mouth. Their function is to tear or shred food.
3. **Premolars:** These are two on each side of both the jaws just behind the canines. The function of these teeth is to hold and crush the food. Premolars are present only in adults.
4. **Molars:** They are three in number on each side of the jaws and have bigger chewing surfaces for cutting food into smaller particles.

There are two incisors, one canine, two pre-molars and three molars making eight teeth in each half of the jaw and a total of **thirty-two teeth** in permanent dentition

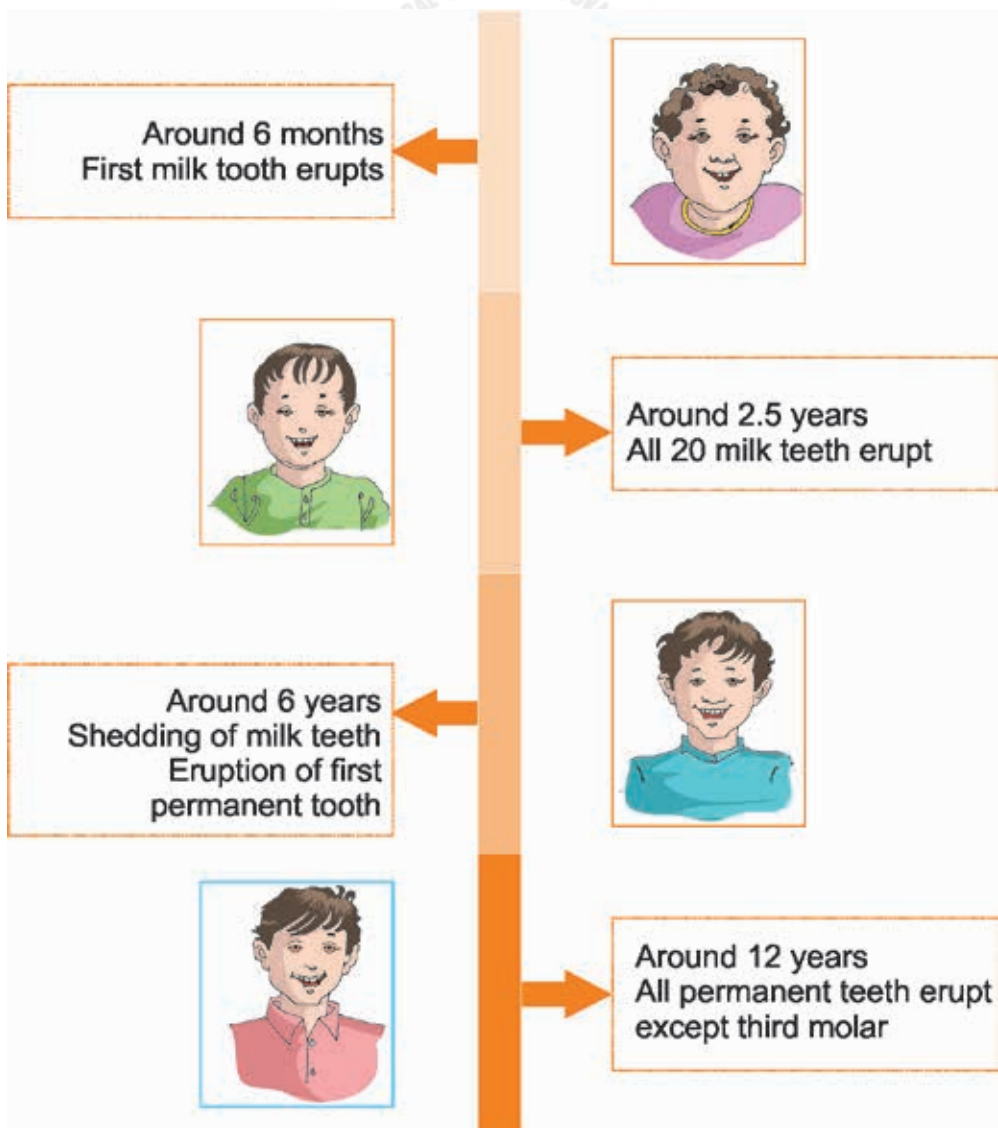
Parts of Teeth

- The pearly white visible part of the tooth is the **crown** and the longer portion anchored inside the gum and the bone is the **root**.
- The outermost hardest white cover is known as the **enamel**. The inner relatively less hard part is the **dentin**. It surrounds the **pulp** containing blood vessels and nerves of the tooth.



Parts of a tooth

Sequence of Tooth Eruption



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Healthy Gums



Healthy teeth and gums
in a child



Healthy teeth and gums in
an adult mouth

- All the teeth are embedded in the jawbone which is covered from outside by a specialised layer of the skin, called the Gums / Gingiva.
- Healthy gums are generally pink in colour. They are firmly attached to the bone underneath.

Do You Remember

1. What are the different parts of the tooth?
2. List the four types of teeth
3. How many sets of teeth do we have?
4. How many permanent teeth do we have?
5. What is gingiva?
6. When does the first tooth come out in the mouth of a child?

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COMMON ORAL DISEASES

The common oral diseases are:

- **Tooth decay / Dental caries**
- **Gum diseases/ Gingivitis**
- **Irregular teeth / Malocclusion**
- **Oral cancer** and its warning signs

The signs and symptoms of these, with easy ways of identification and prevention are detailed in the next few pages.

Tooth decay / Dental caries

Tooth decay appears as a brown or black discolouration on the tooth, which on progression leads to formation of cavity. Tooth decay affects baby and adult teeth .

Signs:

- Brownish/black discoloration
- Hole / cavity on the tooth or in between two teeth
- Broken tooth
- Tooth pain on touch
- If left unnoticed, complications like
 - Pus discharge
 - Swelling



Black discoloration



Hole/cavity in between two teeth



Hole/cavity in between two milk teeth

Black discoloration



Pus discharge and swelling due to decay

Symptoms of dental decay and abscess:

- Pain on chewing on that particular side
- Food lodgement on or in between the teeth
- Sensitivity on consuming hot/cold food
- Swelling, referred pain, severe discomfort and associated fever on leaving the decay untreated for a long time

What causes dental decay?

Bacteria

Bacteria are very small organisms not visible to naked eye. Normally present in the oral cavity of every individual. These bacteria live in a slimy, transparent layer on tooth as Dental Plaque.

Plaque is normally not visible on tooth surface.

Tooth surface

The grooves, pits and fissures naturally present on chewing surfaces of teeth are difficult to clean. Bacteria tend to accumulate here leading to tooth decay.

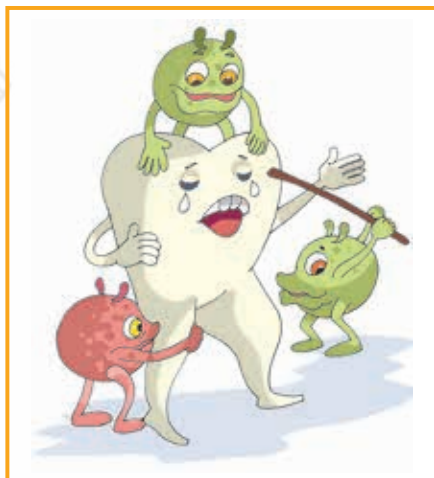
Decay may also occur if food is left between two teeth for a long time.

Time lapse

If food is left in the mouth for a long time, bacteria tend to accumulate, release acids and thus lead to decay.

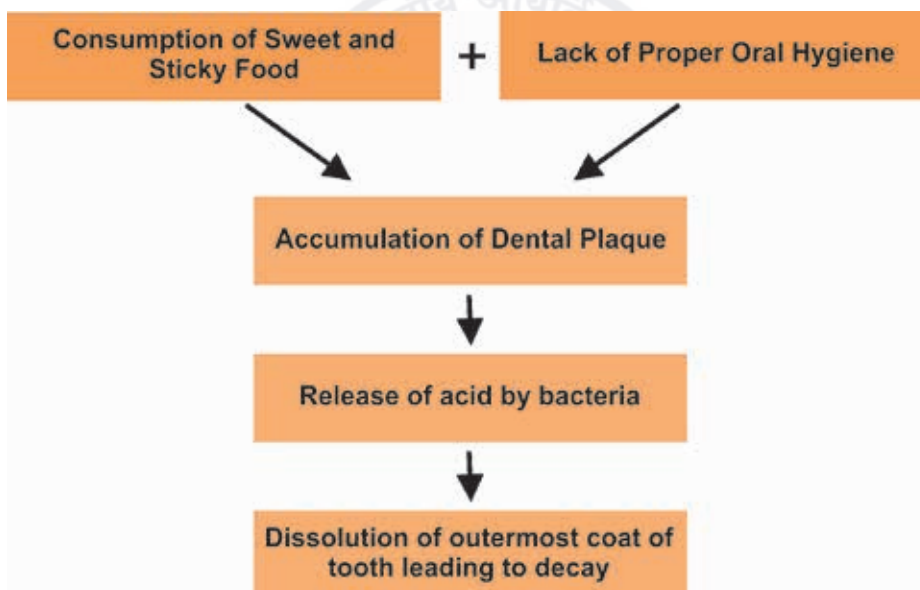
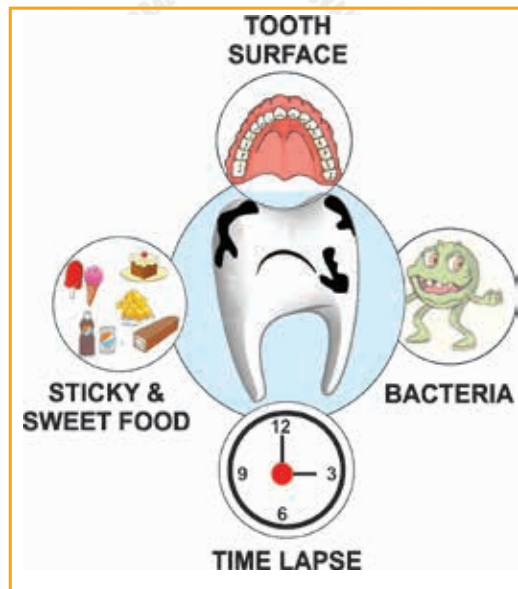
Sweet and sticky food

Consumption of sweet and sticky food like toffees, chocolates, cakes, biscuits frequently and in-between meals leads to decay.



Bacteria attacking tooth

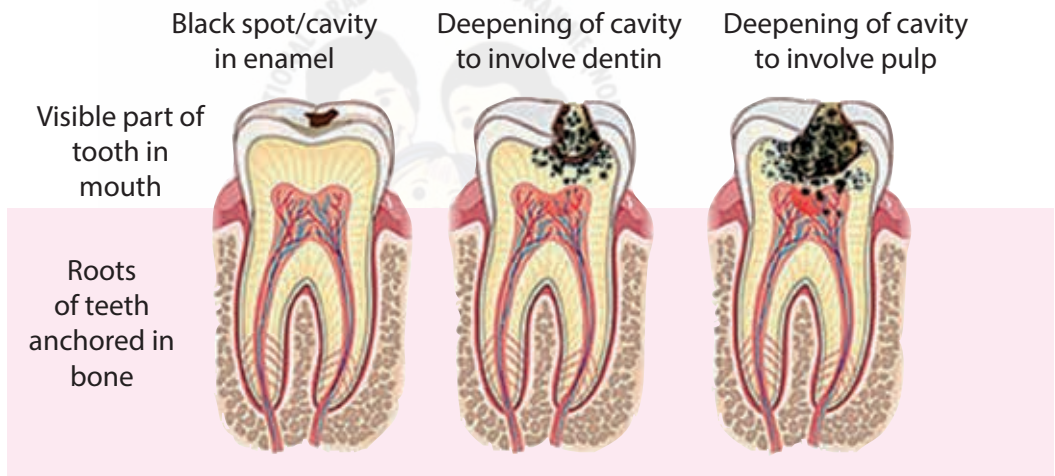
The Causes of Dental Decay



Process of Dental Decay

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Progression of dental decay



Nursing Bottle Decay/Early Childhood Decay

- It is seen in babies on bottle feed.
- Involves rapid destruction of multiple teeth.
- Most commonly affects upper front and lower back teeth.
- Lower front teeth are spared as they are covered by the tongue during feeding.



Avoid letting baby sleep with sweet nipple or bottle in the mouth



Nursing Bottle Decay

Signs

- Brownish black discoloration
- Broken upper front teeth
- Continuous presence of sweetened milk / sticky / sweet food in the mouth

Symptoms:

- Early loss of milk teeth
- Difficulty in eating
- Pain and dental abscess
- Unpleasant appearance

Effects:

- Early loss of milk teeth
- Delayed eruption of permanent teeth
- Difficulty in eating
- Unpleasant appearance
- Malnourishment

Your role	
Do	Advise
■ Identify the blackspot/dyscoloration/pain/ pus discharge ■ If painful gently apply little clove oil inside the tooth cavity without touching the gum or oral mucosa ■ Prescribe one dose Paracetamol tablet ■ Refer to the nearest dentist	■ Rinsing mouth thoroughly with water after every meal / snack ■ For small babies give water as a last feed ■ Brush teeth twice a day ■ Avoid self medication of pain killers ■ Avoid placing camphor/ tobacco / petroleum products/ pain balm/ salt at the site of pain ■ Avoid application of heat / any pain relief cream in the area of pain either externally or in the mouth ■ Avoid picking teeth using any objects

Gum Diseases

Early stage of gum disease is called **Gingivitis**

Signs and Symptoms

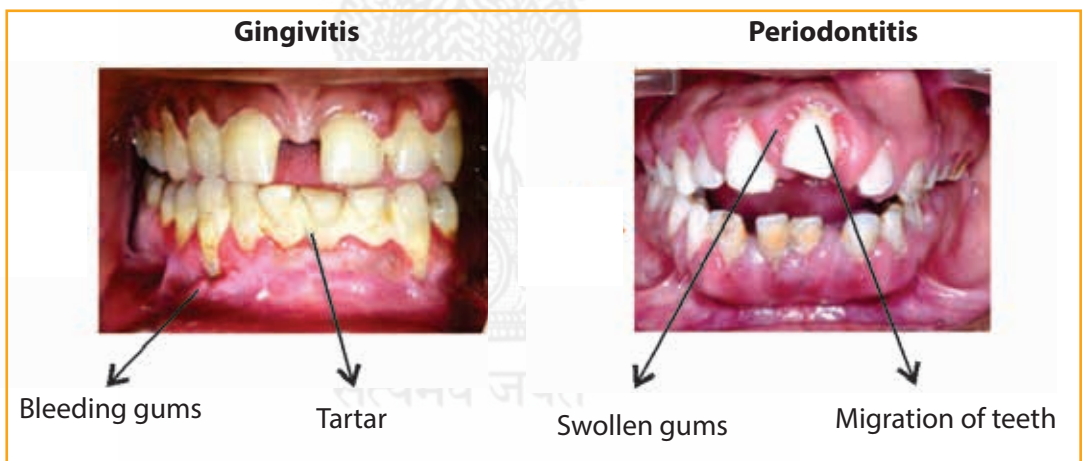
- Foul odour from the mouth/bad breath
- Deposits on teeth
- Bleeding gums
- Swollen gums

Progression

If Gingivitis is not treated, it may progress to a severe stage of the disease known as **Periodontitis**. It is also called Pyorrhea.

Impact of gum diseases on overall health:

- Advanced stages of pyorrhea can effect sugar control.
- In Diabetes, Periodontitis is a known complication.



Signs and Symptoms

- Dull constant ache
- Bleeding from gums
- Loose teeth
- Foul odour/bad breath
- Gaps between teeth



Bad breath

Causes

- The gum diseases are caused by poor oral hygiene and plaque accumulation.
- The bacteria present in plaque form toxic substances that may cause inflammation of gums.
- If plaque is not removed regularly, it may harden to form calculus (tartar).
- The rough surface of tartar attracts further deposition of plaque and bacteria.
- This leads to progression of the disease and destruction of underlying bone

Your role	
Do	Advise
■ Patient having diabetes, heart diseases or on any regular medication will require extra precaution for dental treatment. ■ Refer to dentist for expert dental opinion. ■ Pregnant mothers also need referral to dentist for dental check up.	■ Rinse mouth with water ■ Tooth brushing ■ Avoid picking teeth using any objects

Irregular Alignment of Teeth / Jaws (Malocclusion)

Any deviation from the normal alignment of teeth and / or upper / lower jaw. It may compromise the appearance or the functions like speech and chewing.

Signs

- Abnormally forward or backward teeth / jaw
- Gaps between the teeth
- Uneven crowded teeth
- Cross bite / reverse bite
- Asymmetry of face
- Pain in the joint between upper and lower jaw

Symptoms

- Difficulty in pursing lips
- Unpleasant appearance
- Difficulty in keeping teeth clean because they are crooked

Causes of malocclusion

- Early loss of milk teeth due to dental decay.
- Oral habits causing abnormal pressure on teeth and surrounding structures such as thumb and finger sucking, tongue thrusting, mouth breathing, nail biting

Effects of Malocclusion

Can severely affect the child's

- Appearance
- Low on confidence and self-esteem
- Increased chances of dental decay and gum problems
- Teeth that are abnormally forward may get injured easily



Forwardly placed teeth



Irregular alignment of teeth



Thumb sucking habit



Nail biting habit

Cleft Lip/ Palate

A split in the lip or the roof of the mouth seen at birth is called cleft.

Signs and Symptoms

- Split lip/ palate or both
- Feeding, swallowing and speech difficulty
- Unpleasant appearance of the face



A split in the lip



Child with Cleft Lip & Palate

Your role	
Do	Advise
■ Identify habits ■ Refer to the nearest dentist ■ In case of cleft, follow Rashtriya Bal Swasthya Karyakaram (RBSK) Protocol and refer to the District Early Intervention Centre (DEIC) under RBSK.	■ Advise parents on stopping bad oral habits ■ Educate on feeding practices for cleft children

शरीरमाद्यं खलु धर्मसाधनम्

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Missing tooth / teeth

Loss of tooth or teeth

- The jaws without teeth are called “edentulous”
- Partially edentulous- when a few teeth are missing from either upper or lower jaw
- Completely edentulous - when all teeth are missing

Signs and symptoms

- Missing teeth
- Inability to chew
- Difficulty in speech in case of missing front teeth
- Unpleasant appearance and compromised smile



Mouth with no teeth

Causes

- Neglected, long standing decay which progresses to broken tooth and complete loss of tooth
- Untreated pyorrhea, mobile teeth leading to complete loss of tooth / teeth
- Trauma/ road traffic accidents which lead to loss of front teeth
- Systemic diseases and bone disorders which weaken support and lead to tooth loss



Mouth with missing front tooth

Your role

Do

Identify and refer to the nearest dentist for replacement of missing teeth

Fungal Infection of the Mouth

Most common fungal infection of the mouth is **Candidiasis**, also called oral thrush

Signs

- Whitish curd like patch which can be removed by rubbing

Symptoms

- Burning sensation/ pain
- Cracked corners of mouth
- Foul odour
- Difficulty in swallowing / chewing
- Altered taste



Candidiasis

Causes

- Immune compromise
- Ill fitting denture
- Continuous use of antibiotics/ steroids
- Use of inhalers by asthmatics
- Neglect of oral hygiene
- Chemotherapy/ radiotherapy
- Dry mouth

Your role	
Do	Advise
■ Identify ■ Refer to the nearest dentist ■ Ask for history of systemic health problems	■ Advise on discontinuing the use of ill fitting / faulty dentures ■ Correction of dentures ■ Rinsing with salt water ■ Tooth brushing ■ Advise on consumption of more water and keeping mouth wet

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Oral Cancer and its early detection

Oral cancer is one among the six most common cancers in the world.

In India, it is one of the three most common cancers.

Risks

- Betel nut/Smokeless/Smoking tobacco consumption in any form
- Long standing irritation due to sharp teeth and faulty dentures
- Frequent and long standing alcohol consumption

Warning signs

- Long standing non-healing ulcer for more than 2 weeks
- A white or red raised patch in the mouth
- Restriction in mouth opening.
- A lump or growth in the mouth
- A lump in the neck

Symptoms:

- Difficulty in chewing/ swallowing
- Reduced mouth opening
- Burning sensation in the mouth, change in voice



White patch in mouth



Long standing non-healing ulcer

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Your role	
Do	Advise
■ Identify the risk factors ■ Examine the mouth ■ Follow the Population Based Screening Protocol for Oral Cancer and refer to nearest dentist	■ Advise Brief Intervention for quitting tobacco/ betel or such products • Delay the consumption of tobacco • Distract/ divert the mind from tobacco towards any other activity like music/reading/conversing with friends • Drink water frequently and keep the mouth wet to reduce the craving for tobacco • Deep breathe/ Do exercise to control the cravings



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Trauma to the teeth and face

Teeth and face may get injured easily.

- Playing/cycling/running
- Physical violence
- Sports injuries
- Falls

It may occur at home/schools/ playgrounds or anywhere else.

Signs:

- Broken tooth/ knocked out tooth
- Bleeding
- Wounded and swollen lips
- Lost front tooth
- Back teeth not meeting

Symptoms:

- Pain
- Bleeding
- Numbness
- Progressive reduction in mouth opening after trauma



Broken upper front teeth



Knocked out/avulsed tooth

Your role		
Do	Dont's:	Advise:
■ Arrest bleeding with pressure/ cold pack ■ Save the knocked out tooth/ broken tooth fragment and place it in milk/ water/ tender coconut water ■ Refer to the nearest dentist within one hour ■ If the injury involves face/ head, refer to the nearest health facility immediately.	■ Do not rub /scrub the tooth ■ Do not wrap the tooth in a soiled cloth ■ Do not let the tooth dry ■ Do not throw the tooth or the broken fragment	■ Promoting safe environments for preventing trauma



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Dental Fluorosis

Presence of brownish yellow spots or roughened surface on the teeth due to high amount of fluoride in drinking water supply is called dental fluorosis.

In severe form, fluoride may get deposited in the bones. This is known as skeletal fluorosis.

Signs:

- Chalky white teeth
- Brownish yellow stains
- Pitting



Your role

Do

Identify the condition and refer to nearest dentist

Do You Remember

1. What is a cavity?
2. What is dental plaque?
3. What is nursing bottle decay?
4. What is periodontitis?
5. What will happen if gum diseases are not treated in time?
6. What are the ill effects of crooked teeth?
7. What is cleft lip and cleft palate?
8. Who is at the risk of developing oral cancer?
9. Enumerate the signs that may be seen in a person with oral cancer.
10. When should a patient with dental trauma report to a dentist?

TARGET GROUPS

Special attention to be given to:

- Expectant mothers
- Infants and children
- Old age Individuals
- Medically Compromised/Hospitalised individuals



Expectant mothers

Why?

- Hormonal changes in the body and its effect on the gums leading to inflammation, swelling and bleeding from gums.
- If gum disease is neglected, it may also affect the baby, leading to low birth weight of the new born and pre-term labour.
- Tobacco and alcohol abuse during pregnancy leads to birth defects like cleft lip and palate.



Your role	
Do	Advise
■ Instruct the pregnant women about the possible oral health problems during pregnancy. ■ Identify the oral health problem and refer to the nearest dentist.	■ Tooth brushing with soft brush and pea size amount of tooth paste twice daily. ■ Rinsing mouth thoroughly with water after every meal ■ Rinsing mouth with warm salt water in case of bleeding gums. ■ Consulting a dentist in case of tooth ache / any other oral problem ■ Avoid self medicating for tooth ache / swelling during pregnancy ■ Visiting a dentist for dental treatment is safe during the first and the third trimester of pregnancy.



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Quick reference for Oral Health during pregnancy

Motherhood—a reason to Smile



Let the Dentist know about your pregnancy. Your treatment can be planned accordingly

Quitting brushing will lead to further accumulation of plaque and aggravate disease. Consult your Dentist and seek professional advice

Don't self medicate for any tooth related problems. Consult your Dentist at the earliest .

Consultation visits for cleaning, tooth removal are safe to be performed during the second trimester.

Poor oral hygiene leading to severe pyorrhea can effect pregnancy outcomes.

Baby's gums need to be cleaned using a moist, clean cloth.

Start brushing the child's tooth with a baby toothbrush as soon as the first tooth erupts in the mouth

After the first birthday of the child, take him/her for check up to the Dentist.



...remember that Oral health is Overall health.....

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Infants and children

Why?

- After birth baby's mouth faces new environment
- Continuous presence of milk /sweetened milk or food in the mouth
- Attempt to introduce oral hygiene early on in life
- Irritability and problems when teeth begin to erupt

Educate about gum pad cleaning

Gum pads are seen in the mouth of infants/ babies

Steps for gum pad cleaning

The mother must be instructed as follows-

- Wash hands with soap and water
 - Prepare a clean, moist, soft cotton cloth
 - Wrap the cloth around the forefinger and damp it in drinking water
 - Gently put your finger inside your baby's mouth
 - Wipe the upper and then the lower gum pad once
 - The gum pad cleaning has to be done preferably after the last feed.
- Residual milk should not be left in the mouth. Water can be the last feed
 - Mothers must be instructed to start cleaning teeth using a baby tooth brush with drinking water once the first teeth begin to erupt.

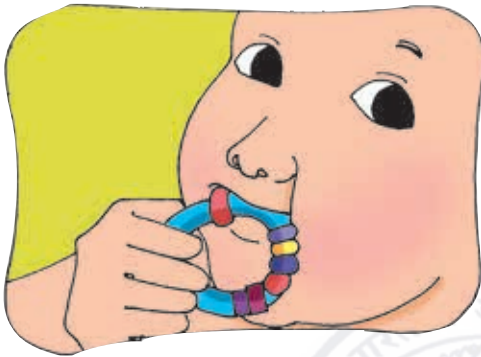


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Teething

- Mothers must also be advised on teething.
- This is a normal phenomenon seen during eruption of teeth.
- The baby tends to get irritable, begins biting on hard objects.
- Gastric disturbances and diarrhoea are common during this phase.
- The mothers must be instructed to give raw carrot/ apple for the baby to bite on.
- A soft tooth brush may also be given to the baby to make them get used to the feel of a brush while the teeth begin to erupt.



Tendency to place different objects in mouth during teething



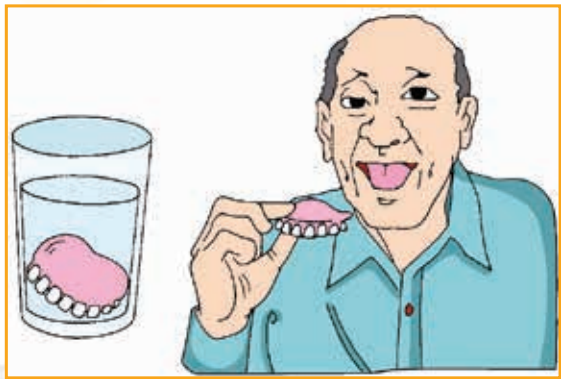
Care-giver assisted tooth brushing

Your role	
Do	Advise
■ Educate on gum pad cleaning	■ Advise on teething ■ Advise on tooth brushing when the first tooth erupts ■ Advise on moderating the consumption of sugary snacks like gur, sweets, sugary juices ■ Advise the parent on assisting the child's tooth brushing till 3 years of age ■ Advise on supervising the child's tooth brushing between 3-7 years of age

Geriatric Age Groups

Why?

- Impact of systemic diseases
- Intake of medicines
- Changes in the bone and the teeth during ageing
- Loss of teeth due to weakening of the bone and receding gum margins



Denture care

Your role	
Do	Advise
■ Identify problems like • Missing Teeth, broken teeth only roots remaining /sharp teeth • Denture related issues • Swelling of gums • Pain • Sensitivity to hot/cold food • Chewing problems	■ Advise consulting a dentist ■ Advise replacement of missing teeth ■ Advise consulting the physician for systemic problems ■ Advise correction of faulty dentures ■ Advise care for dentures • Clean dentures • Leave the dentures in water when not in use

Medically Compromised / Hospitalised Individuals

Why?

- Impact of hospitalisation
- Lack of oral hygiene during the period of hospitalisation
- Change in diet and feeding patterns
- Impact of underlying systemic disease
- Inability to maintain oral hygiene as seen in disabled/ special children



Your role	
Do	Advise
■ Identify and educate on the common dental problems that may occur ■ Educate on tooth brushing ■ Educate the caregiver on the importance of oral hygiene	■ Advise on using massaging gums and rinsing mouth thoroughly if tooth brushing is not possible ■ Advise the caregiver on giving a healthy diet ■ Advise regular consultation with the dentist ■ Advise on consulting the doctor to understand the impact of the medications on oral health

Do You Remember

1. Use a _____ to clean the gum pads in an infant.
2. It is important to clean the baby's mouth after every bottle feed.
(True / False)
3. Which of the following is not correct ?
 - a. Expectant mother should not stop brushing the teeth
 - b. Expectant mother should visit the dentist during pregnancy for dental treatment
 - c. Expectant mother should be advised on care of infants teeth
 - d. None of above
4. Artificial dentures should be regularly cleaned?
Yes /No
5. Special attention needs to be given for addressing oral health problems in those who are hospitalised. These include
 - a. Maintaining good oral hygiene
 - b. Rinsing with water when medicated syrups are consumed
 - c. Periodic checks by nurses / caregivers
 - d. All of the above



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PREVENTION IS BETTER THAN CURE

At home care

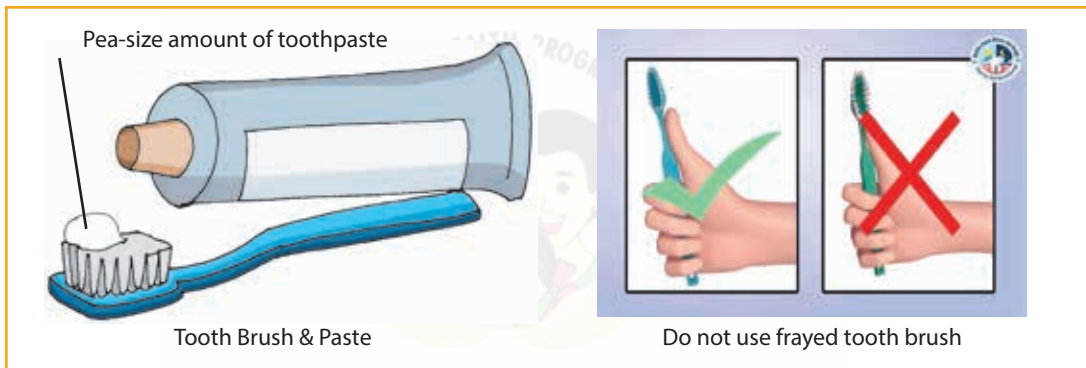
The common dental diseases listed so far are easily preventable following simple measures at home. Some of these include

- Tooth brushing and tongue cleaning
- Mouth rinsing
- Regular self examination of the mouth
- Quitting consumption of all forms of tobacco and betel nut
- Breaking bad oral habits
- Consumption of healthy non-cariogenic diet
- Dental trauma management
- Visiting a dentist regularly

Tooth brushing

- This is an important part of effective plaque control.
- Tooth brushing has to be done with the toothpaste.
- A pea size amount of tooth paste and a soft bristled brush must be used
- Two types of tooth brushes – baby/ adult brush may be used according to the age.

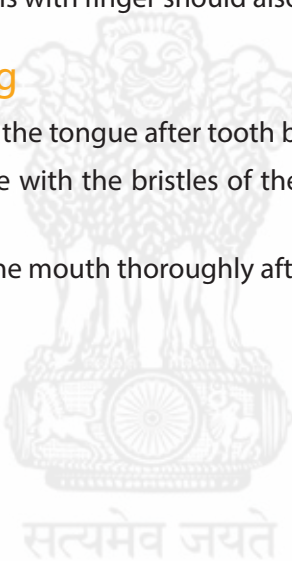
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- Milk teeth also need to be brushed and maintained in good health since this prevents premature shedding.
- The tooth brush has to be changed once in three months or when it begins to fray.
- Brushing must be done twice a day
- Massaging the gums with finger should also be advised after tooth brushing.

Tongue Cleaning

- Advise on cleaning the tongue after tooth brushing.
- This has to be done with the bristles of the brush by applying gentle back and forth strokes.
- Advise on rinsing the mouth thoroughly after brushing



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Brushing instructions:



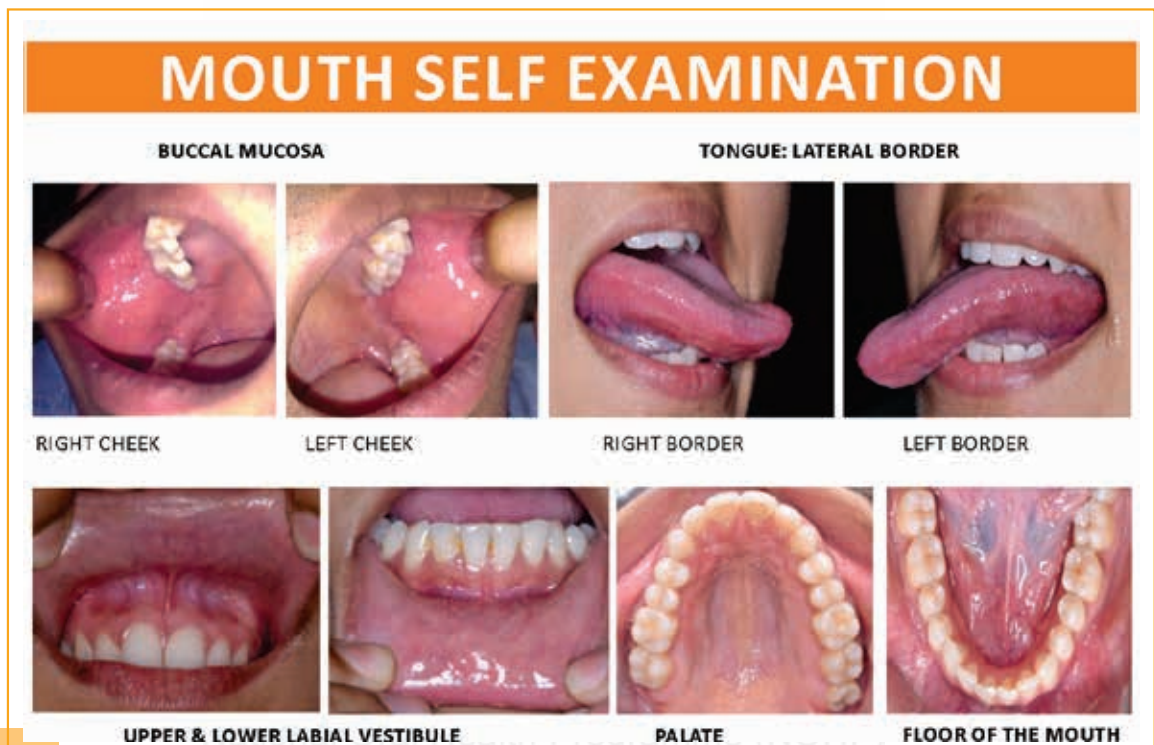
Mouth Rinsing

- Should be advocated as a part of routine oral hygiene
- It must be advised that consumption of sweetened beverages/ snacks and meals has to end with a thorough mouth rinse with water
- Mouthwashes can be used after consultation with dentist.



Regular Mouth Self Examination

- Educate about and encourage self examination of mouth.
- It is recognised as a simple way to also detect the warning signs of oral cancer as described in the picture, following 7 simple steps.



The following table gives a gist of early signs that should be kept in mind while examining the mouth.

Condition	Identification points
Tooth decay	Black spot/discoloration of tooth Cavity / hole in the tooth Sensitivity to hot and cold, sweet and sour Food lodgement in the cavity/ between teeth Pain / swelling / pus discharge
Gum diseases	Foul smell Bleeding gums Deposits and discoloration of tooth Loose teeth Widening gap between teeth Swollen gums
Irregular arrangement of teeth and jaws	Crowding of teeth/reverse bite Protruding / Backwardly placed teeth /Inability to keep the lips closed
Abnormal growth, patch or ulcers	White / red patch Non healing ulcer (for more than 2 weeks) Reduced mouth opening Change in voice Lump in the neck Burning sensation Inability to eat spicy food
Cleft lip/ palate	Split lip / gap in the palate Inability to feed the baby
Dental Fluorosis	White/yellow/brown discolored patches on tooth

Quitting consumption of all forms of tobacco and betel nut

Advise all individuals during interactions at home or during the Village Health Nutrition Day and during interactions with communities to not initiate tobacco consumption and to quit use of all forms of tobacco (smoke less or smoking), betel nut and any such regular chewing habit.

The following may be used as the points for advocating brief intervention

Delay	Delay consumption of tobacco or betel nut at the time of urge/ craving
Distract/ Divert	Distract the mind / divert attention from tobacco towards other activities like music/ reading/ meditation/ conversing with family or friends/ eat nutritious food Try consuming clove/ cardamom
Drink Water	Drink water frequently and keep the mouth wet to reduce craving for tobacco / betel nut
Deep breathe and do exercise	Perform relaxation exercises like yoga and breathing exercises. Do any physical activity like walking/ jogging / running / cycling / swimming



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Breaking bad oral habits

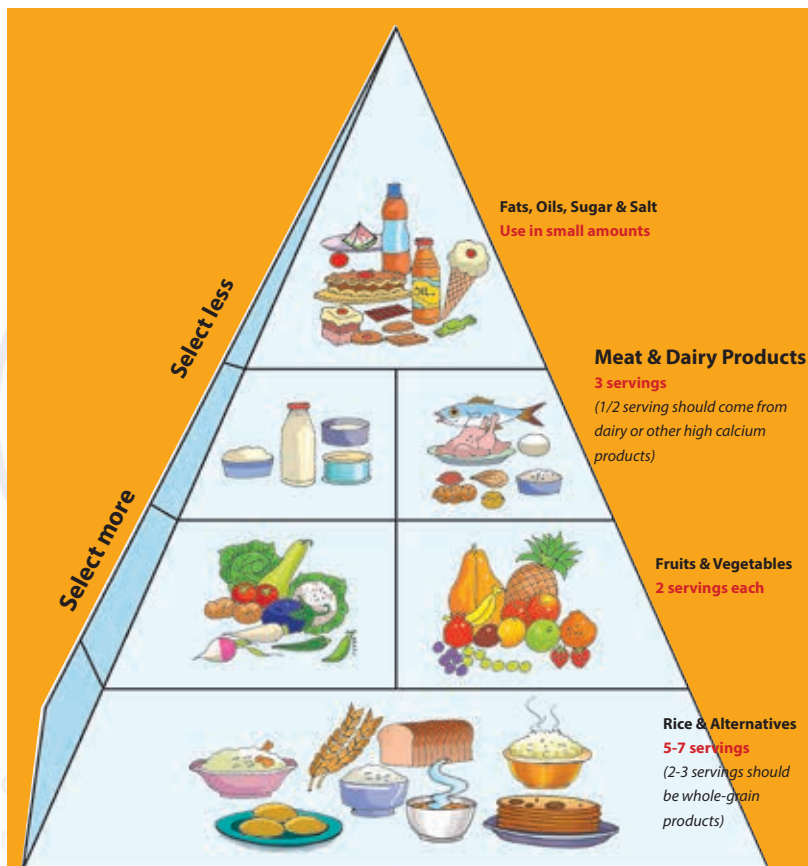
Thumb/ digit sucking-Advise to parents if habits persist beyond 4 years.

- Give enough attention, love and care to the young child.
- Advise on showing the child his/her own image in the mirror when he/she is thumb sucking/digit sucking
- Advise painting the nail with substance of bad taste/ odour which may prevent the child from sucking on the thumb / finger
- Advise on making the child wear long sleeved clothes to prevent thumb sucking while sleeping

Consumption of healthy non-cariogenic diet

A balanced diet should be recommended at all ages

- Advise on consumption of raw and fibre rich fruits and vegetables
- Advise on avoiding sweetened beverages, soft drinks, sticky and sweet food.
- Advise on avoiding frequent snacking between major meals.

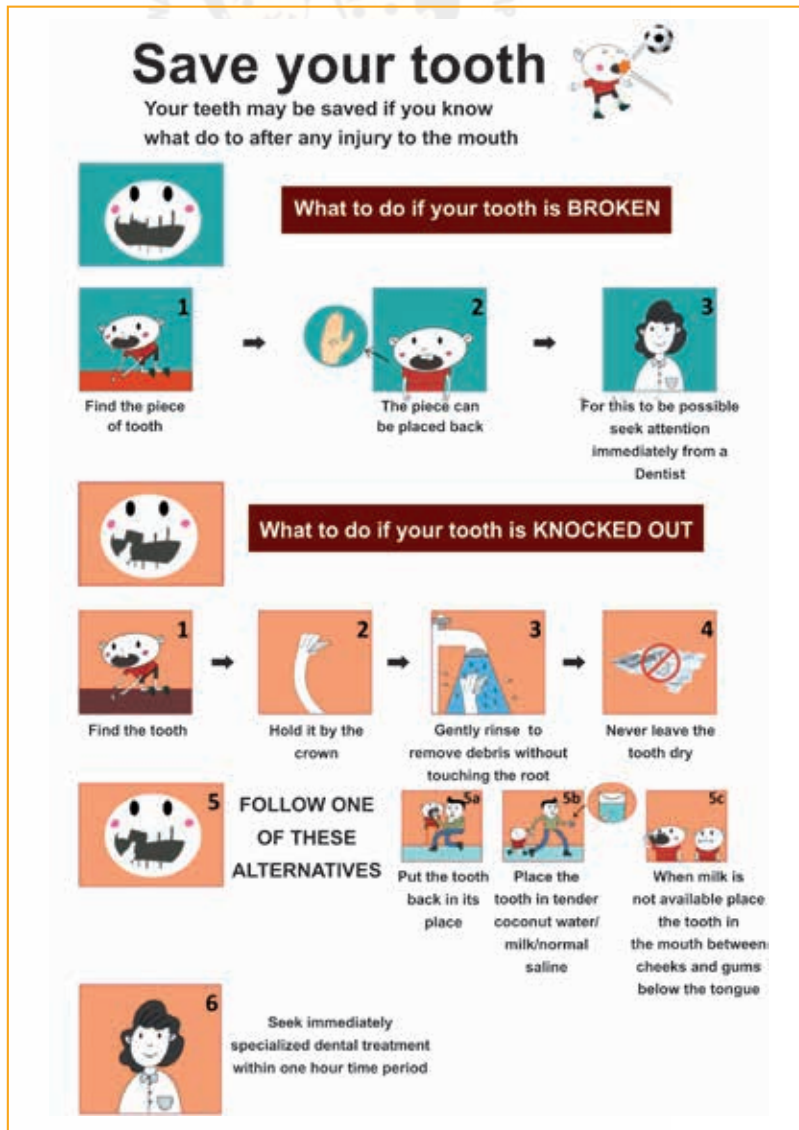


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Dental trauma management

First-aid for dental trauma to save the broken/knocked-out tooth may be given at home by following the steps in the infographic.



Follow these steps to manage any dental emergency:

Dental Emergencies

		
Toothache • Rinse the mouth with salt water • If there is swelling, place cold compress on your cheek, do not use heat or any form of tobacco as a remedy • Visit your dentist at the earliest to identify and seek apt treatment for your toothache	Mouth Injury • A - Assess the injury and reassure the child • B - Bleeding management by applying pressure gently to the injury site • C - Control Pain Use painkillers after doctors consultation • D - Dentists help	Broken tooth / Knocked- out tooth • Find the tooth/ piece of tooth • Preserve the piece/ tooth in milk/coconut water/your saliva • Do not leave the piece/tooth dry • The piece/tooth can be put back in place by a Dentist • Seek help from a Dentist within one hour

Visiting a dentist

It is important to advise families and the communities to visit dentist at least once a year for a routine dental check-up, early diagnosis and prompt treatment



Professional measures

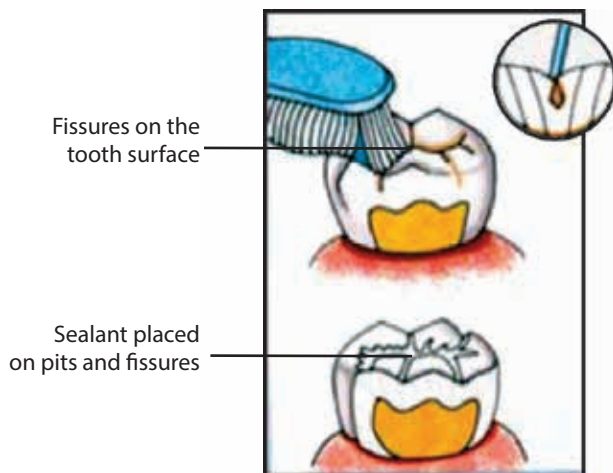
In addition to home care, below are a few procedures performed by the dentist to prevent and stop progression of common dental diseases

Prevention of dental decay

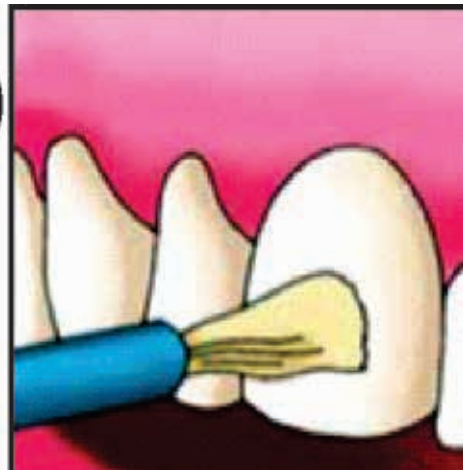
- Pit & fissure sealant placement
- Fluoride application
- Fillings
- Root Canal Treatment

Pit & fissure sealant placement

Sealant placement is a procedure that seals the fissures on chewing surfaces of teeth and prevents decay.



Pit & fissure sealant placement



Fluoride Varnish Application

Fluoride Application

Fluoride varnish application is a procedure that prevents decay on smooth surface

Fillings

Filling is a procedure where decay is removed and the tooth is filled with a filling material.



Decayed tooth



Removal of decay



Filling

Root Canal Treatment

- When the decay progresses to involve pulp, root canal treatment is done.
- It is a procedure where infected pulp, nerves and vessels of the tooth are removed and a filling material is placed.
- Later, a cap is placed on the tooth.



Placement of a cap

Prevention of gum diseases

- Dentist will advise and demonstrate proper brushing technique.
- Dentists may suggest rinsing mouth with warm salt water / chemical based mouth wash whenever applicable.
- Dentist cleans the deposits on the teeth, including calculus by using instrument called scalers. This is called scaling.
- The dentist may also suggest oral hygiene measures in specific target groups.



Scaling for removal of tartar deposits

Prevention of Irregularly aligned teeth

- Care for milk teeth
- Braces
- Appliances for restricting bad oral habits
- Cleft lip and / or palate management

Care for milk teeth

Apart from reinforcing good oral hygiene for maintaining healthy milk teeth at home, the dentist may place fluoride varnish or fluoride releasing fillings to safeguard the decayed milk teeth.

In case of premature shedding of milk teeth, the dentist may also place an appliance that maintains the space for the successor tooth

Braces

The dentist can also plan for placement of orthodontic braces and wires to achieve the proper alignment of teeth.



Clips / Orthodontic Braces

Appliances for restricting bad oral habits

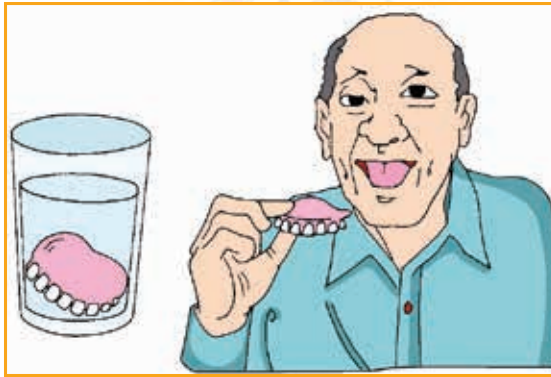
The dentist may also provide appliances and suggest exercises that restrict oral habits.

Cleft lip and / or palate management

The dentist may reinforce on feeding techniques, speech therapy and initiate comprehensive management

Care for missing teeth

- Replacement of missing teeth
- Dentist will make removable or fixed partial / complete dentures for replacement of missing teeth.



Denture care

Prevention of oral cancer

- Upon referral, the dentist will diagnose and direct to a higher centre for biopsy and further management
- The dentist may also advise on tobacco cessation and mouth self examination.

Management of fluorosis

The dentist will diagnose and perform appropriate treatment.

Management of dental trauma धर्मसाधनम्

The dentist will grade the severity of dental trauma and manage appropriately.

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Do You Remember

1. Two things to do every day to maintain good oral health are _____ and _____.
2. Brushing should be done using a _____ and a _____ size of tooth paste.
3. Is it important to maintain milk teeth from shedding prematurely?
(True/ False)
4. Mouth wash should be used only on recommendation of a dentist.
(True/ False)
5. Whenever a tooth is completely knocked out of the socket after a fall, it is recommended to report to the dentist in _____ hr(s)



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POINTS TO REMEMBER

- Most dental diseases are preventable.
- Early detection is the key to prevent every dental problem.
- You have a pivotal role in educating and timely referral of pregnant mothers, infants, children, adults and the elderly for helping them maintain good oral health.
- You are the chosen ones to volunteer, make the best of the opportunity and contribute to beautiful smiles!



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CHECKLIST

- Organise monthly, quarterly and yearly meetings
- Involve people of all age groups and also the local leaders and panchayat
- Make oral health a definitive component of the meetings
- Discuss how everyone in the community can contribute to the maintenance of oral health
- Discuss provision of oral health aids like toothbrushes and encouraging mouth rinsing after every meal
- Encourage mouth self examination
- Train leaders who can ensure oral health messages reach every household
- Conduct an interactive session on oral health
- Utilize oral health education aids provided in this manual
- Ensure the children get their teeth checked in a school
- Ensure appropriate referral mechanism for those with identified oral health needs
- Organise mass tooth brushing activities once in an year
- Conduct a session on healthy diet and oral health on Village Health Nutrition Day
- Organise “Swacch Mukh Swacch Bharat” activities
- Put efforts to make the entire village /town tobacco free

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FREQUENTLY ASKED QUESTIONS

Can decay occur early in childhood, what should be done when decay is noticed early in childhood?

Yes. Continuous bottle feeding of sweetened milk to infants after weaning, particularly at night can lead to rampant decay of all teeth, sparing the lower front teeth. Immediately after the first tooth erupts, it is important that the mother consults a dentist and gets advised on importance of oral hygiene early in life.

What has to be done to avoid staining of teeth?

Regular tooth brushing and mouth rinsing habits can help avoid staining on teeth. In case stains persist, a dentist has to be consulted.

How often should teeth be cleaned by a dentist?

If maintained well, a regular check-up once a year would suffice. Cleaning is essential only when plaque deposits harden to form calculus tenaciously attached to the gum.

Can salt / manjan be used for cleaning teeth instead of tooth paste?

Gul manjan / manjan / tooth powder or any other such material is found to contain abrasive compounds that can lead to wearing off the tooth enamel. Also, it is found that Gul manjan contains tobacco and thus can be addictive leading to oral ulcers / cancer.

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What can be used to clean teeth?

It is advisable to use a soft bristle brush and pea size of tooth paste to clean teeth twice a day. This avoids plaque accumulation and prevents decay and gum diseases.

How to keep teeth healthy?

Brushing once in the morning and always before sleeping along with a practice of rinsing mouth with water after every meal is the best way to keep teeth healthy. Mouth rinsing should also be practised after eating sweet / sticky food like cake, bread, biscuits, chocolates, candies, rice etc.

What is the reason for whitish stains on teeth?

Presence of whitish stains on teeth following a specific pattern covering multiple upper and lower front teeth is indicative of Dental Fluorosis. It occurs due to excessive fluoride in the ground water supplies of that region. It needs to be evaluated by a dentist for severity assessment and necessary action. Also, if found in excess, the authorities concerned need to be alerted about fluoride in water.

What are clefts and why do clefts occur? Can this be treated?

A split or opening in the roof of the mouth or the lip is called a cleft. The cause could be genetic or certain drugs during early pregnancy or also undernourishment during pregnancy. It is important to report to a doctor immediately after birth to understand treatment protocol and feeding practices.

What to do when teeth do not begin to erupt even after the age of 1 year?

Consult a dentist before any further options are considered.

Can irregularly aligned teeth be corrected, if yes when?

Yes. Consult your dentist. Some children need correction of crooked teeth and bite as early as 3 years while some may need treatment around 12 years.

What is the best way to help a person quit smoking / chewing tobacco?

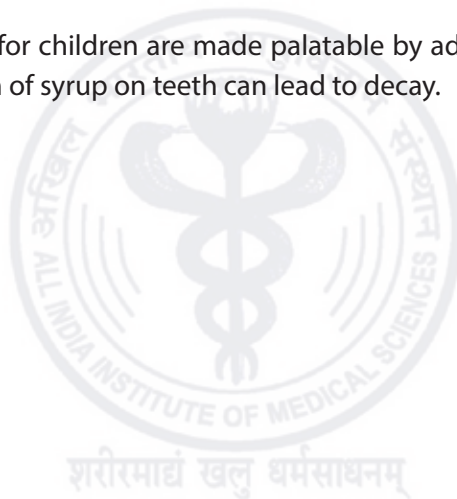
Advising them to delay tobacco use, divert the mind from the thought of tobacco, drink about 4-5 litres of water a day, do exercise and identify a quit date to completely forgo tobacco is something any person can do. In addition, referral to the nearest health facility for personalised counselling can help.

How important is it to fill milk teeth?

Milk teeth guide the eruption of permanent teeth and act as natural space maintainers for the permanent set of teeth. Also, they are important for functional aspects like chewing and speaking. It is thus important to keep milk teeth healthy and get decayed milk teeth filled.

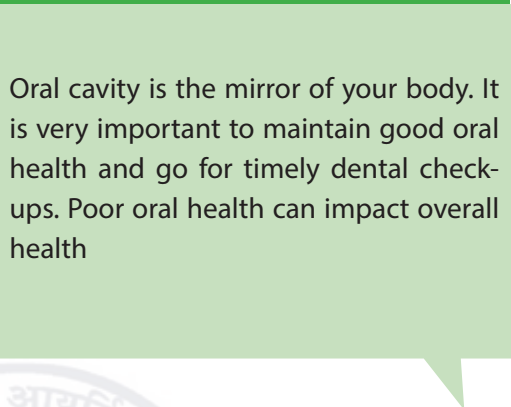
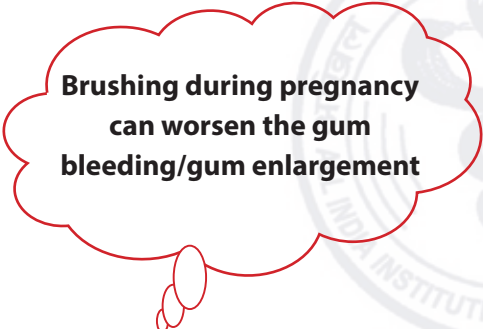
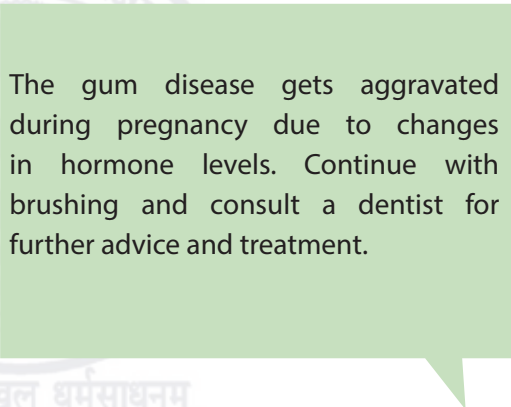
Why should a child rinse mouth after using medicated syrups?

Most medicated syrups for children are made palatable by adding sweetener. If left uncleaned, the retention of syrup on teeth can lead to decay.



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COMMON MYTHS AND FACTS ON ORAL HEALTH

MYTH	FACT:
 Oral health has no impact on General Health	 Oral cavity is the mirror of your body. It is very important to maintain good oral health and go for timely dental check-ups. Poor oral health can impact overall health
 Brushing during pregnancy can worsen the gum bleeding/gum enlargement	 The gum disease gets aggravated during pregnancy due to changes in hormone levels. Continue with brushing and consult a dentist for further advice and treatment.

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MYTH

Cleft is caused because of curse or exposure during eclipse

FACT:

Cleft of the lip or palate in a child can occur due to some reasons like lack of nutrition including Iron and folic acid in the mother, consumption of alcohol/tobacco products during pregnancy, as a result of consanguineous marriages, in certain genetic diseases or syndrome.

Milk teeth should only be brushed after all of them erupt

As soon as the first tooth erupts in the mouth, one must start brushing the tooth/teeth using a baby tooth brush

Cavities on milk teeth can be left untreated as they will shed and new teeth will come in their place.

Cavities if left unfilled, may lead to destruction and loss of milk teeth.

Premature loss of milk teeth may lead to chewing and speaking difficulty in children and result in irregular alignment of permanent teeth.

सत्यमेव जयते

National Oral Health Programme (NOHP)
Ministry of Health and Family Welfare

MYTH

Worms can be removed from teeth upon noticing decay and cavity.

FACT:

There are no worms in a tooth that are visible to naked eye. Small microscopic organisms called bacteria can damage the tooth structure and lead to cavities. However, these organisms are too small to be appreciated without microscopes. The dentist can remove the damaged tooth structure and place a filling to prevent deepening of existent cavities or perform a root canal treatment if the cavity involves pulp.

Tooth powder is a better alternative to toothbrush and toothpaste

Tooth powder/dantmanjan has abrasives in high quantities that can wear off and damage teeth over a period of time. Hence, it is recommended to clean your teeth using toothbrush and toothpaste everyday.

Scaling weakens the teeth and loosens them,

Scaling is done with special instruments to facilitate the removal of tartar and calculus only. They do not have detrimental effects on the teeth or the gums.

Scaling is recommended at timely intervals to maintain good gum health

MYTH

FACT:

Tooth extraction can lead to loss of eyesight

Tooth removal has no known impact on the vision / eyesight.

Keeping /chewing tobacco numbs tooth pain

Tobacco should not be considered as a remedy for tooth pain, one can start warm saline rinses or take medicines as prescribed by a qualified doctor and visit the dentist at the earliest to identify the cause of dental pain and seek dental treatment.

Using gul manjan, coal, brick powder, ash, charcoal powder is beneficial to teeth.

These substances have abrasives that wear out the tooth structure at a fast rate and are not recommended to clean your teeth. Gul manjan has nicotine as one of its components and can get one addicted to the use of tobacco therefore, it must be avoided altogether.

सत्यमेव जयते

National Oral Health Programme (NOHP)
Ministry of Health and Family Welfare

MYTH

**As you age, it is normal
to loose teeth**

FACT:

The life of your teeth depends on how well you keep them. Factors like diet, correct oral hygiene practices, regular dental check up are very vital for healthy teeth.

If you take care of teeth and gums they are with you all your life.



Centre for Dental Education and Research
National Centre of Excellence for Implementation of
National Oral Health Programme
All India Institute of Medical Sciences, New Delhi

Activity – Role Play

Toothache/ Dental Pain



National Centre of Excellence for Implementation of
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All India Institute of Medical Sciences, New Delhi

Characters: Raju, Munni, Mother, Father, ASHA *

Setting-A house

Children are sitting with parents in the living room, Raju is holding his cheek. A knock is heard on the door of the house, father opens the door and ASHA enters

Raju: Aaahhh (child holds his cheek)

ASHA: What is the matter?

Mother: ASHA didi, good you came-Raju has been holding his mouth since morning, he hasn't spoken to us at all

ASHA : What's the matter Raju?

Munni: (laughing)haha.....Raju looks like a frog puffing his cheeks and turning all red!

Father: Oh! Don't trouble him saying all that!

Raju : (Speaking faintly)ASHA didi, my tooth has been hurting since some days, I can't even eat a roti - it pains so much!

ASHA: Raju you should not neglect any such problem. It could be something serious. Come, I will apply some clove oil in the painful area and take you to the Dentist at once.

ASHA : (Speaking to the parents and Munni) Always remember to brush your teeth twice daily. It will keep caries, cavities and most tooth problems at bay. A stitch in time saves nine!

ASHA : Remember Rinse your mouth to keep it clean.
Do not stop brushing
Don't hesitate to visit your dentist-s/he will help identify the reason for your tooth pain and suggest a solution

*Character may be portrayed by Nurse/ANM/ASHA/Primary Health worker etc.

National Oral Health Programme (NOHP)
Ministry of Health and Family Welfare

Activity

Brushing Song

(This song may be used to induce behaviour change)

Sun is Rising –High and bright
Brush your teeth –morning and night

Healthy mouth makes you bright
Brush your teeth-morning and night (2)

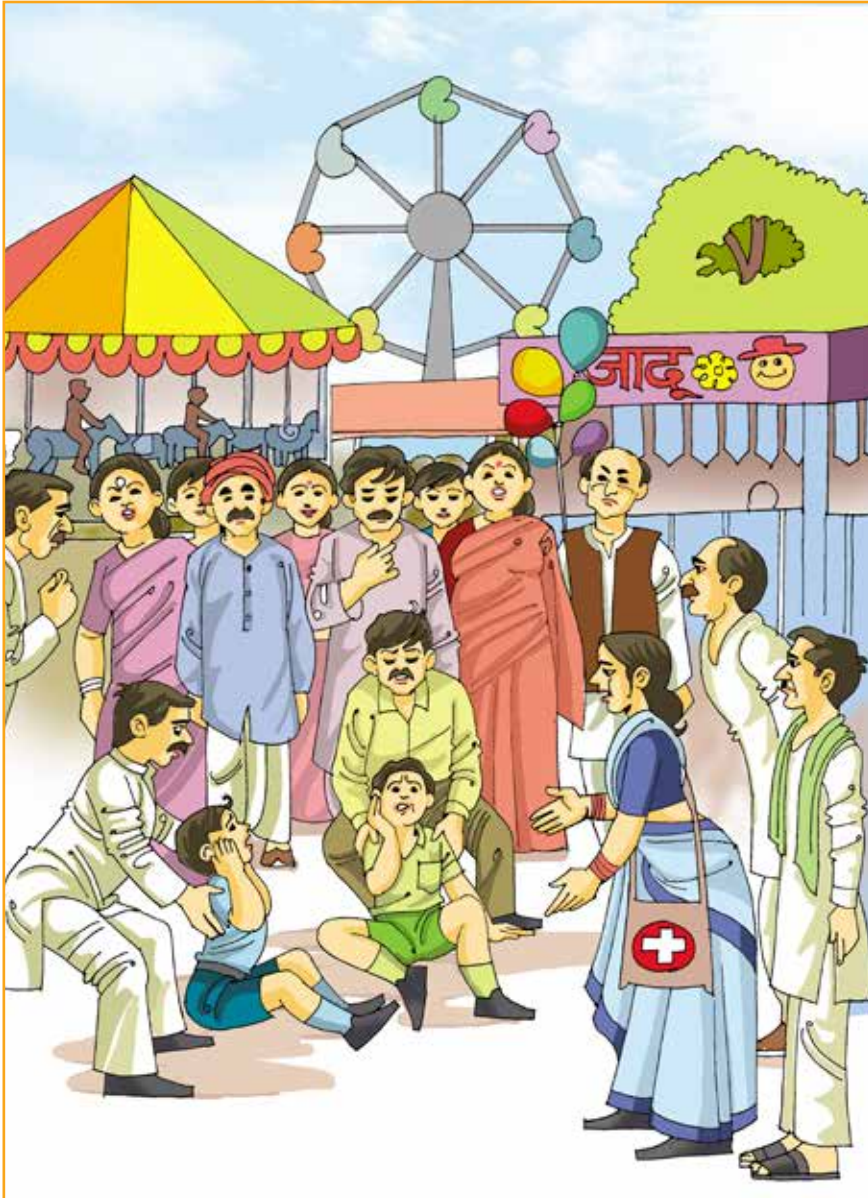
Stars are twinkling in the moonlight
Brush your teeth again in the night



All India Institute of Medical Sciences, New Delhi

Activity –Role Play

Broken tooth



All India Institute of Medical Sciences, New Delhi

Characters: Child 1, Child 2, Adult 1, Adult 2, ASHA *, Crowd

Setting- Village fair

You may depict children running around, market vendors selling items, rides in the background etc.

Child 1: (Speaking to child 2 excitedly) So glad we have finished our homework and we could come to the fair today

Child 2: Yes indeed! I want to go on all the rides, come we must not waste any time.

(Children walk to buy tickets from a ticket counter for a ride)

(Children grab the tickets and run away. One of the children stumbles over and falls on his/her face)

Child 2: AAAhhh.... (falls to the ground and after the fall hold his/her mouth)

Child 1: Are you alright? Why are you covering your mouth?

(Crowd gathers around the children)

Adult 1: This child's tooth is completely removed from the mouth! We need some help! I just saw ASHA didi at a stall, somebody call her quickly!

Adult 2: We shouldn't waste much time, let's first look for the tooth

Adult 1 (Turns to child 1 and says): Meanwhile you run to the juice stall and get me some clean water or coconut water or milk in a container.

Adult 2: Yes you are absolutely right! Remember ASHA didi told us last week in the health education class what to do if the tooth is completely removed from the mouth?

(Child 1 has rushed back with a clean container filled with water from the juice stall)

(ASHA enters looking concerned)

ASHA : I was told the child has lost his tooth? Has anybody found the tooth?

*Character may be portrayed by Nurse/ANM/ASHA/Primary Health worker etc.

Adult 2: ASHA didi we have found the tooth and placed it just as you taught us.

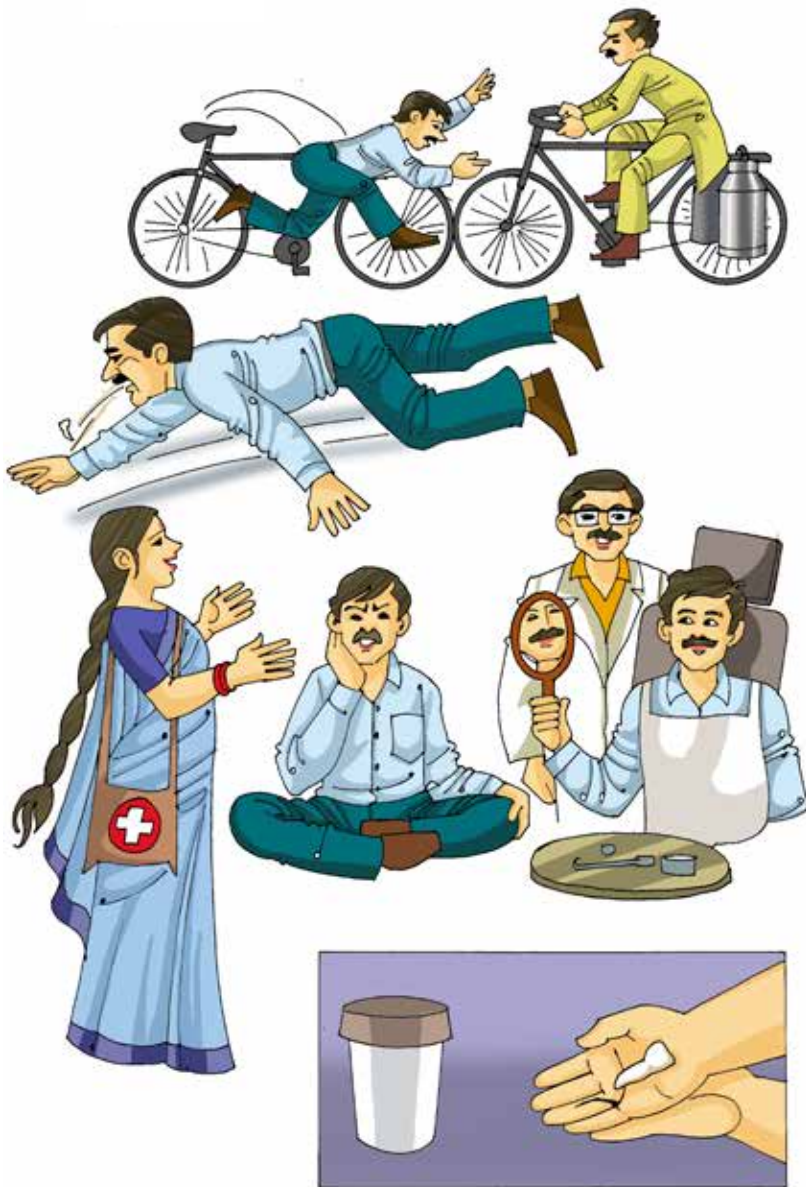
ASHA : Very well done everybody, we must rush the child to the dentist

Remember to follow these three steps in case of a tooth falling off from its socket:

- Find the tooth
- Place the tooth in a clean container filled with clean water/milk/saline/coconut water
- Visit the dentist within 1 hour of the tooth injury, it is the **Golden hour** to save the tooth.



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Activity –Role Play

Knocked out Tooth

Scene 1

Characters - Milk vendor, Adult 2, Adult 3, ASHA *, Dentist , Crowd

Setting-A road in the village

Milk vendor is entering riding a bicycle with some milk cans. Adult 2 enters from opposite direction on a scooter/bicycle. Milk vendor loses balance and bumps into Adult 2. Both have fallen on the ground

Milk vendor: All my milk has fallen, don't you have eyes...look what you have done!

Adult 2: (Holding his mouth)Aaahh

Milk vendor: Its my loss and you are howling! Keep quiet at once!

Adult 2: My tooth, it hurts!

(Crowd gathers)

ASHA (Looking at Adult 1) : What seems to be the matter?

Adult 1: My tooth hurts a lot

ASHA : Let me have a look. (Examines the person)

Adult 3: Is everything alright?

ASHA : This person has a broken tooth we must visit the dentist quickly. Have a quick look if you can find the broken piece

*Character may be portrayed by Nurse/ANM/ASHA/Primary Health worker etc.

Adult 3: I think this is it (Gives a tooth piece to ASHA)

(ASHA pulls out a clean container from her bag and takes some milk from the milk vendor's vessel and quickly puts the tooth piece in it)

ASHA : We must go to the Dentist now. Come quick!

Scene 2

Setting- Dental unit at the village

ASHA* enters with patient and 2-3 people

ASHA : Doctor, this patient met with an accident half an hour back and broke his tooth, could you please have a look?

Dentist: You all acted quick and well in time. The teeth and its surrounding area has a good chance for recovery.

Adult 3: Doctor we were able to find the broken piece, maybe you can fix it back!

(Adult 3 gives container with broken tooth piece in milk to the dentist. Dentist looks at it and says)

Dentist : I see that ASHA didi has done a good job in telling you about tooth injuries and you have converted the message into your actions.

I shall fix up the tooth very well.

Always remember

- The first hour in case of a tooth completely being removed from its socket is the **Golden hour** to save it
- Seek immediate care from your dentist in the event of any such injury.

Activity –Role Play

Ulcer in the oral cavity



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Quit tobacco and betel nut

Characters: Barber, Customer ,Adult 1, Adult 2,ASHA didi *, Dentist

Setting –Barber’s area under a tree

Barber is working on a customer seated in a chair on one hand while adult 1 and adult 2 are conversing as they wait for their turn

Adult 1: Would you like to have some? (Offers tobacco packet to adult 2)

Adult 2: No thanks, last week ASHA didi told me how bad tobacco is for health, I have decided to quit. No tobacco for me!

Adult 1: A little bit will not do any harm!

Adult 1: My mouth has a burning sensation since some days I spotted an ulcer too

Adult 2: Since when do you have the ulcer?

Adult 1: Its been over 3 weeks now

(ASHA is walking past the barber’s area when Adult 2 calls out to her)

Adult 2: ASHA didi, Namaste! Do you have two minutes please?

(ASHA comes near to the two adults conversing)

Adult 2: My friend here is having an ulcer for around 3 weeks, do you think it can be a trouble?

ASHA: I can examine and suggest a remedy after that

(ASHA* sets out some gloves and single use wooden sticks from the bag/kit she is carrying. She examines and says)

ASHA: There is a white patch in the area where you habitually place your tobacco. Your ulcer too is around the same area, you should have reported earlier for your problem. We must not waste any time, I have to refer you to the dentist!

(Adult 1 looks nervous and anxious and leaves the barber’s area with ASHA to visit the Dentist)

Dentist: ASHA didi Namaste! Who have you brought along?

ASHA: Doctor I have noticed a white patch in this persons mouth. Could you take a look please?

Dentist: I see. Why did you not come as soon as your problem started?

Adult 1: I thought it was normal and keeping tobacco in the area of the ulcer would help it heal sooner. My friend did the same doctor!

Dentist: Tobacco kills you.

What you consumed for so long has lead to a change in that area-now this area is at a high risk of developing cancer.

We will have to do biopsy and manage further.

You must promise to never take tobacco again.

Adult 1: I quit from this moment. I want life, not tobacco.



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Activity

Discussion on Village Health Nutrition Day

- Healthy habits are a reflection of healthy teeth. How many habits according to you are healthy for your teeth?



Habits that lead to healthy mouth and teeth

- Rinse after every meal more so after eating sweets
- Brush teeth twice a day
- Regular Dental check-up
- Consume
 - Milk
 - Cheese
 - Green leafy vegetables
 - Fruits
 - Water



Habits that lead to oral diseases

- Not rinsing mouth after each meal
- Wrong brushing technique
- High sugar food that causes tooth cavities
 - Chocolates
 - Toffees
 - Cake/Sweets
 - Cold Drinks
 - Biscuits

ORAL HEALTH EDUCATION GAMES FOR CHILDREN



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MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

TOOTH TWIN!!

Find the two teeth that look alike!



Good luck!

ORAL HEALTH TIPS



Brush your teeth in the morning and night for 2 minutes



Rinse your mouth after each meal



Eat plenty of fruits and vegetables for a beautiful smile



Don't hesitate to visit your dentist. He is your friend



SMILEY CALENDAR

"BRUSH YOUR WAY TO HEALTH"

Colour the sun if you brushed for two minutes in the morning and colour the moon if you brushed for two minutes at night, before bedtime.

Add the suns and moons at the end of each month—this will show your brushing streak!

	1	2	3	4	5	6	7
Week-1							
	8	9	10	11	12	13	14
Week-2							
	15	16	17	18	19	20	21
Week-3							
	22	23	24	25	26	27	28
Week-4							
	29	30	31				
Week-5							

For Brushing in the Morning- 1 mark
For Brushing in the Night, before bedtime- 1.5 marks

1-56: NOT ENOUGH. BUCK UP!!

57-59: GOOD, BUT CAN DO MUCH BETTER!

60-75: EXCELLENT. KEEP IT UP!

Name:.....

Class:.....

Month:.....



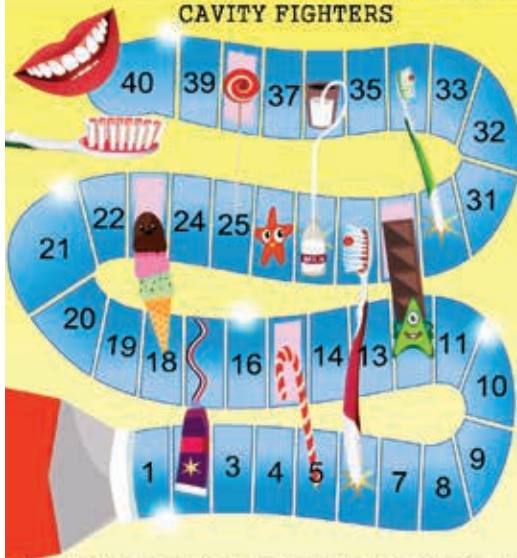
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AHMEDABAD, GUJARAT



MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

CAVITY FIGHTERS



ORAL HEALTH TIPS



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Week-5	29	30	31	For Brushing in the Morning- 1 mark For Brushing in the Night, before bedtime- 1.5 marks			

1-36: NOT ENOUGH, BUCK UP!!

37-59: GOOD, BUT CAN DO MUCH BETTER!

60-79: EXCELLENT, KEEP IT UP!

Name:.....

Class:.....

Month:.....



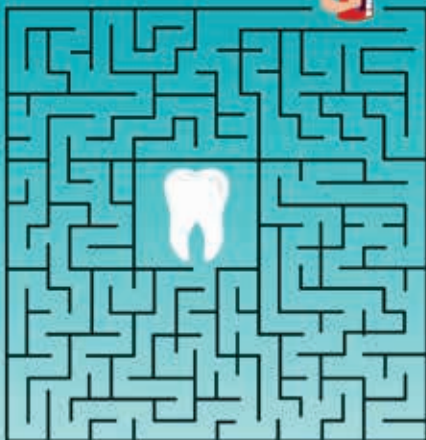


MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

TOOTH HUNT!!

Can you help the boy find his fallen tooth?



ORAL HEALTH TIPS



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Rinse your mouth after each meal



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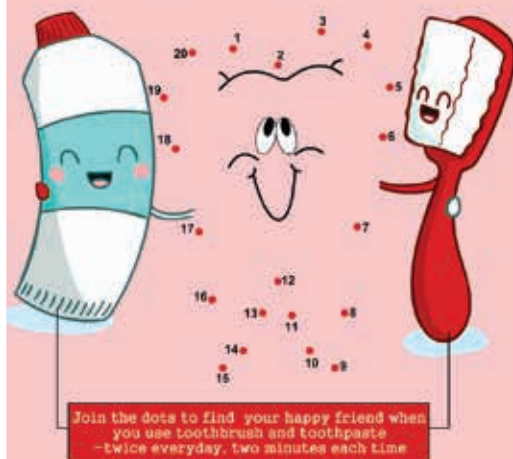
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MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

SMILEY SURPRISE!



ORAL HEALTH TIPS



Brush your teeth in the morning and night for 2 minutes



Rinse your mouth after each meal



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SMILEY CALENDAR

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MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

DENTAL CARE!

Word search



a	e	n	a	m	e	l	b	s	c	d	e
t	f	p	u	i	p	g	h	c	i	j	t
o	l	d	s	t	b	r	a	c	e	s	
o	l	d	e	c	a	y	o	l	e	t	i
t	e	p	n	u	o	n	i	a	a	t	
h	e	f	t	f	r	t	o	n	v	r	n
b	t	f	i	l	l	i	n	g	a	t	e
r	o	i	n	e	c	a	o	u	a	a	d
u	o	k	l	m	m	n	o	m	p	r	q
s	t	o	o	t	h	p	a	s	t	e	b
h	h	e	f	l	u	o	r	i	d	e	l

Braces	Fluoride	Toothpaste	Toothbrush	Scaling
Dentist	Filling	Enamel	Dentin	Pulp
Decay	Tartar	Gums	Tooth	

ORAL HEALTH TIPS



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GLOSSARY

Biopsy: A biopsy is a medical test commonly performed by a surgeon. He collects a small piece of diseased or suspicious tissue for detailed examination under high magnification. In the oral cavity biopsy is often done exclude or confirm cancer from a suspicious looking white or red patch or a ulcer.

Braces: Dental braces are devices used in orthodontics that align and straighten teeth and help position them with regard to a person's bite, while also aiming to improve dental health. Braces also fix gaps.

Calculus: Tartar, or dental calculus, is a build-up of plaque on the teeth that's been allowed to harden

Candidiasis: It is a fungal infection due to any type of Candida (a type of yeast). When it affects the mouth, it is commonly called thrush. Signs and symptoms include white patches on the tongue or other areas of the mouth and throat.

Cavity: Cavities are permanently damaged areas in the hard surface of your teeth that develop into tiny openings or holes. Cavities, also called tooth decay or caries, are caused by a combination of factors, including bacteria in your mouth, frequent snacking, sipping sugary drinks and not cleaning your teeth well.

Chemotherapy: It is a widely used treatment for cancer. The term chemotherapy refers to the

drugs that prevent cancer cells from dividing and growing. It does this by killing the dividing cells.

Cross bite: It is a form of malocclusion where a tooth (or teeth) has a more buccal or lingual position (that is, the tooth is either closer to the cheek or to the tongue) than its corresponding antagonist tooth in the upper or lower dental arch. In other words, cross bite is a lateral misalignment of the dental arches

Crown: It refers to the anatomical area of teeth, usually covered by enamel. The crown is usually visible in the mouth after developing below the gingiva and then erupting into place.

Dental Pulp: The soft tissue forming the inner structure of a tooth and containing nerves and blood vessels. Also called tooth pulp.

Dental Plaque: It is a soft, sticky film that builds up on your teeth and contains millions of bacteria.

Dentine: It is a hard, light yellow, porous layer of tissue directly underneath enamel.

Dentures: Dentures are prosthetic devices constructed to replace missing teeth; they are supported by the surrounding soft and hard tissues of the oral cavity.

Edentulous: Lack of teeth

Enamel: The outermost white part of teeth is called the enamel.

Eruption: Tooth eruption is a process in tooth development in which the teeth enter the mouth and become visible.

Fraying: It means to become worn at the edge, typically through constant rubbing of tooth brush

Genetic: Relating to heredity/family.

Gingiva: The part of the oral mucosa covering the teeth, also called gum.

Gingivitis: A condition of the gums characterized by inflammation and bleeding.

Immunocompromise: Having the immune system impaired or weakened (as by drugs or illness)

Inflammation: A condition in which part of the body becomes reddened, swollen, hot, and often painful, especially as a reaction to injury or infection.

Mucosa: A membrane that lines the oral cavity.

Periodontitis: It is a severe stage of gum disease that destroys the bone that supports teeth. It can lead to tooth loss.

Pitting: Hollow or indentation on the surface of teeth

Pit and Fissures: They are the deep grooves that make up the chewing surfaces of your teeth

Pursing lips: To gather or contract the lips into wrinkles or folds

Radiotherapy: It is a therapy using ionizing radiation, generally as part of cancer treatment to control or kill malignant cells

Referred pain: Pain felt in a part of the body other than its actual source.

Reverse bite: A reverse bite, or protruding lower teeth, is the term used to describe lower front

teeth that sit in front of upper front teeth. This causes the bite to be reversed or the 'wrong way around'.

Root: The part of a tooth below the neck of the tooth.

Scalers: Periodontal scalers are dental instruments used in the prophylactic and periodontal care of teeth (most often human teeth), including scaling and root planing.

Steroids: Also called corticosteroids, are anti-inflammatory medicines used to treat a range of conditions.

Shedding: It is a term given to describe the physiologic process that ultimately leads to replacement of the deciduous teeth by their corresponding permanent successors

Speech Therapy: Training to help people with speech and language problems to speak more clearly.

Syndrome: A group of symptoms that consistently occur together or a condition characterized by a set of associated symptoms.

Tartar: Tartar, or dental calculus, is a build-up of plaque on the teeth that's been allowed to harden

Teething: Teething is the process by which an infant's first teeth sequentially appear by emerging through the gums, typically arriving in pairs. The mandibular central incisors are the first primary teeth to erupt, usually between 6 and 10 months of age.

Trimester: A period of three months, especially as a division of the duration of pregnancy.

Vestibule: The portion of the mouth that lies between cheek/lips and teeth.

FURTHER READING

WHO Expert Consultation on Public Health Intervention against Early Childhood Caries, 2016

<http://apps.who.int/iris/bitstream/10665/255627/1/WHO-NMH-PND-17.1-eng.pdf>

Dental Trauma Guidelines International Association of Dental Traumatology, 2012

<https://www.iadt-dentaltrauma.org/1-9%20%20iadt%20guidelines%20combined%20-%20r%20-%2011-5-2013.pdf>

Operational Framework for Management of Common Cancers

http://cancerindia.org.in/wp-content/uploads/2017/11/Operational_Framework_Management_of_Common_Cancers.pdf

Setting up District Early Intervention Centres: Operational Guidelines

http://www.nhmmp.gov.in/WebContent/RBSK/01-08-16/OG_DEIC.pdf

National Oral Health Programme-Operational Guidelines

<https://mohfw.gov.in/sites/default/files/51318563751452762792.pdf>

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