Abstract: Dental caries epidemics are in development in our country. Recent studies show high frequency of dental caries starting from childhood and increasing with age. Oral individual or collective dental health is considered a very important part of global health and of individuals’ quality of life.

Keywords: epidemics, dental caries, prophylaxis

Rezumat: Țara noastră este în plină epidemie de carie dentară. Morbiditatea stomatologică apreciată prin studii recente arată frecvențe îngrijorătoare, începând din copilărie și în creștere cu vârsta. Starea de sănătate buco-dentară, individuală și a colectivității, constituie o parte importantă a sănătății globale și a calității vieții omului.

Cuvinte cheie: epidemie, boală carioasă, profilaxie.

Dental medicine assistance comprises prevention, identification and early treatment of all affections within the oro-maxial-facial area which in most of the cases start or are related to the dentomaxillary system.

The outlook of the Bucharest school of dentistry is that dental carries represents a pathologic process without analogy in the rest of the body which cannot be integrated in any of the known pathologic entities. Dental decays are seen as a dynamic process, developed at the interface between the bacterial plate and tooth and the transformation of the decayed initial reversible non cavitary lesion into a cavitary lesion is the result of a disorder of the equilibrium between the permanent processes of demineralization and remineralization. Dental carries is a multifactorial disease characterized by a localized destruction of the dental hard tissues under the action of the microorganisms. WHO classifies the dental carries on the third and fourth places within the picture of the health problems of the world’s population, after the cardio-vascular diseases, malign tumours and road accidents.

The social malady character of this affection is brought about the large number of affected people and the affection degree of an individual’s teeth that is quite early even from the growing up age. Being a chronic disease with insidious evolution and symptomatology, dental carries determines frequent pulp and parodontal complications, representing a permanent threat for spreading the disease in the neighbouring areas and for the release and support of the disease focus.

Being an irreversible and progressive destructive disease, dental carries, simple or complicated, is the most frequent cause of braking down the morpho-functional equilibrium of the component parts of the dentomaxillary system.

What should characterize the dental medicine assistance at any level is the subordination of the curative-prophylactic acts to the principle of ensuring the dentomaxillary equilibrium, with a view to maintain the health of the entire organism. Due to the fact that the majority of affections do not cause an alteration of the general health state and by their nature, the dentistry treatment does not require long term surveillance of the patient, dental medicine assistance is largely an ambulatory assistance. Nevertheless, there are certain affections (tumours, traumatisms etc.) that by their treatment require patient’s care in specialized centres. The ambulatory assistance is provided in dental medicine surgeries by dentists, assisted by middle sanitary staff. The increasing number of dentists allowed the development of a strong network integrated in the general and specialized medicine assistance system, which allows the population’s access to these services. Regarding the children collectivities, dental medicine assistance becomes very useful there, where it can be organized on the principle of the curative-prophylactic active assistance of the dental medical units. Private dental medical surgeries existing both in the urban and in the rural environment provide free treatments to school pupils under 18 years old through the contracts concluded between these medical units and the Health Insurance House. The dental medical surgeries which function within schools also provide free treatments to school pupils and children.

Within a speciality with such a large morbidity rate of dental affections, it is compulsory that the dental medicine assistance network should be preoccupied by taking concrete measures of prophylaxis. Viewed as one of the most frequent affections, dental carries and its complications and prophylaxis encounter large difficulties because of the complexity of the causes which are the basis for the occurrence of this process. Also, if we take into consideration that dental carries is a consequence of...
man’s evolution and that against this evolution which marks a certain degree of civilization, we can do practically nothing, we understand that we cannot expect to eliminate the disease, but at least to decrease the index of dental caries. If we take into consideration the dental pathology at the same time with the interdependence between the simple decay and the complicated one, the extended dental destructions, edentations, dentomaxillary anomalies and their consequences on the occlusal-articular parodontal equilibrium and of the other elements of the dentomaxillary system, the prophylaxis within dental medicine has another meaning. Thus, any therapeutic act (therapy of the simple decay and of the complicated one, prothetic therapy of restoration, treatment of dentomaxillary anomalies etc.) has a prophylactic effect even if it is seen in the sense of maintaining the equilibrium between the components parts of the dentomaxillary system.

The efforts of the governments and of dental services within the industrialized countries have already offered sure results in the improvement but especially in stopping the evolution of the dental caries, by the allocation of certain funds which support multiple programmes of prophylaxis. In the developing countries, more funds are consumed on curative and function restoration treatment than on prophylaxis actions.

CONCLUSIONS
1. Our country finds itself in full epidemic of dental carries.
2. WHO places dental carries on the third and fourth places within the picture of the world population health state.
3. The dental medical assistance is an assistance generally developed in ambulatory.
4. The number of the prophylaxis measures applied in our country should be much higher.

BIBLIOGRAPHY