

*mutans* and *S. wiggisiae* there was a positive correlation between caries experience and bacterial load ( $r=0.458$ ,  $p<0.001$  and  $r=0.358$ ,  $p<0.001$  respectively).

**Conclusions** The associations of *S. mutans* and *S. wiggisiae* with childhood caries may reflect cooperation between the two species. These results will serve as preliminary baseline data for our current study of preventive agents in children. This study is supported by the CRC Oral Health and GC Corporation.

Health in Orphanages Project (HOPE), India: Dental caries and associated risk factors

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**Objectives** (1) to describe caries prevalence and experience rates, and (2) identify risk factors for caries among children residing in orphanages in the State of Kerala, India.

**Methods** Caries was assessed using WHO criteria and reported using the dmft/DMFT index. A brief questionnaire captured information on child oral health behaviours. Mean (SD) and median scores (IQR) were used to describe caries rates. Multivariable logistic regression was conducted to identify disease predictors.

**Results** Overall 1137 children residing in 31 orphanages across the State of Kerala were recruited to the study. Children were between the ages of 1-18 years and females made up 82% of the sample. Six-year-old caries prevalence was 77% and mean dmft score was 3.60 (SD 3.50). Twelve-year-old caries prevalence was 44% and mean DMFT score was 1.35 (SD 1.96). For 6-year-olds, those who visited the dentist were 4 times more likely to have caries (OR 3.97; 95%CI 1.62,9.71). For 12-year-olds, those that reported being shown how to clean their teeth were less likely to have caries (OR=0.62; 95%CI 0.38,0.95).

**Conclusions** Caries rates among children in orphanages were relatively high. There is an urgent need to continue to investigate general and oral health of children in orphanages across India and for local stakeholders to develop and implement effective and efficient interventions to sustainably manage the health of these very vulnerable children.

Does attitudes of parents towards oral health influence caries prevalence and its consequences among 6-7 years old children?

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**Objectives** To evaluate the impact of parents' attitude on oral health of 6-7 year old children in Tehran using PUFA/pufa index.

**Methods** Of the 19 educational districts, 8 districts were selected randomly and in each district one boys' school and one girls' school were selected randomly in 2016 in Tehran city. After ethical clearance, a self-administered questionnaire was administered to parents to collect demographic and oral health related data. Children were examined using disposable mirror and probe by two calibrated examiners ( $\kappa=0.7$ ).

Caries status and its consequences was recorded using PUFA/pufa index using disposable mirror and probe in day light. Oral hygiene status was recoded according to OHI\_Simplified index. Data was analysed using SPSS software ver 20.0.

**Results** Of 430 children were examined, 31% had 1 or more teeth with pulp involvement, abscess, ulceration or fistula ranged from 0 to 8 teeth. In the linear regression analysis considering parents' attitude towards oral health, demographic and oral health related variables there was significant association between number of teeth with pulp involvement, abscess and fistula and child brushing habit ( $B = -0.338$ ,  $p<0.05$ ), and debris index (OHI-S) ( $B=0.816$ ,  $p<0.05$ ).

**Conclusions** Regardless of attitude of parents, brushing habit of children and their oral hygiene status were associated with the number of infected teeth in deciduous dentition.

Socio-behavioural, and family-related correlates of oral hygiene status

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**Objectives** To evaluate the effect of socio-demographic, behavioural and family-related variables on oral hygiene status of a sample of Indian school children