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Quality of Life Description for Elderly Patients using Dentures

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ABSTRACT

Background: One of the key components of the stomatognathic system is the teeth. Health professionals are concerned about the public's understanding of the importance of oral and dental examinations. The fact that only a very small number of Indonesians receive dental and oral care when they have dental and oral problems proves this. The aging process is a natural event that no one can completely avoid. People aged 60 years or older are considered elderly. Tooth loss is a result of this process, which impacts the teeth and periodontal tissues. The activities and functions of the oral cavity can be disrupted if tooth loss is not treated, thereby reducing the quality of life. Another option is to use dentures.

Objective: The quality of life of elderly patients who use dentures is currently unknown. Therefore, through this research, we want to know how the quality of life of elderly patients who use dentures is described.

Method: This type of research is descriptive, with a cross-sectional research design. The number of subjects was determined using the total sample, snowball method. Questionnaires were distributed to respondents in the form of a google form.

Results: The results of this research can be seen through tables based on the answers to the questionnaire given to elderly respondents. The majority of elderly respondents seemed satisfied and comfortable with using dentures. This is based on findings from answers from the elderly. **Conclusion:** The quality of life of elderly denture users is included in the good category.

 KEYWORDS: Elderly, quality of life, dentures, stomatognathic.
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INTRODUCTION

The stomatognathic system is the functional unit of the body that coordinates the functions of mastication, swallowing and speech. The main components of the stomatognathic system are the temporomandibular joint, masticatory muscles and the tooth-periodontal complex that work in harmony and are closely related in a system. Therefore, teeth are one of the important organs in the stomatognathic system. Disorders that occur in the teeth will disrupt the stomatognathic system. ¹

Public awareness of the importance of dental and oral examinations is a concern for health practitioners. This is supported by the fact that the Indonesian population who received dental and oral care when experiencing dental and oral problems was still relatively low, which was only 31.1%. Therefore, the motivation of each individual in maintaining oral health regularly needs to be improved.²

In the elderly, there is a process of slowly disappearing the ability of tissues to repair themselves which is called the aging process. This process affects teeth and periodontal tissues resulting in tooth loss. If tooth loss is not treated, it can interfere with the function and activity of the oral cavity so that it will have an impact on the quality of life. $_{3}$

Elderly is an advanced stage of a person's life and is a natural process that cannot be avoided by every individual. Individuals who have reached the age of 60 years and over are included in the elderly. ⁴ Basic Health Research in 2013 states that oral and dental problems are one of the most

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common diseases suffered by the elderly.⁵ The age of 60 years and above is the final stage of the aging process which has an impact on three aspects, namely biological, economic, and social. ⁶ It is projected that by 2025, Indonesia will experience the largest increase in the number of elderly people in the world. ⁷

Quality of life is an individual's opportunity to live comfortably, and maintain a state of physiological health in line with the balance of psychological health. Quality of life associated with oral health assesses functional, psychological and social factors as well as the experience of pain and discomfort in daily life. Treatment with the use of a denture can cause problems and discomfort in its use, such as physical problems, namely pain and lack of stability of the denture during chewing and speaking, causing a decrease in a person's quality of life. ⁸A good quality of life is something that the elderly really want in order to enjoy a meaningful, happy and useful old age. The loss of all or part of a tooth has the same effect as a life disability. Dentures are expected to improve masticatory function, pronunciation, aesthetics, maintain tissue health and prevent further damage to the structure of organs in the oral cavity. 9Quality of life is an individual assessment of the health conditions that are being experienced. Based on the description above, the researcher's interest to conduct a study with the title "Quality of Life Description for Elderly Patients Using Dentures."

METHODS

The type of research conducted was descriptive, with a research design cross-sectional. This research was conducted from June to November 2024. The study population was elderly people who were at least 60 years old, using dentures and filling out questionnaires in the form of google forms. Determination of the number of subjects is determined by the total sample, snowball method. Data management and analysis that was first carried out was data entry, then descriptive analysis was carried out which was presented in tabular form.

RESULT

The results in this study can be seen in the following table: **Table 1. Distribution of Respondents Based on Gender**

Gender	Frequency	Percentage (%)	
Female	26	63,4	
Male	15	36,6	
Total	41	100	

Table 2. Distribution of Respondents Based on Age

Age (year)	Frequency	Percentage (%)
60-64	25	61
65-69	5	12,2
70-74	4	9,8
75-80	6	14,6
80-84	1	2,4

85-90	0	0
Total	41	100

Table 3. Distribution of Respondents Based on Education

	1	
Education	Frequency	Percentage (%)
Junior high school	0	0
High school	3	7,3
Bachelor's degree	29	70,7
Master's degree	6	14,6
Doctoral degree	0	0
Others	3	7,3
Total	41	100

Types of dentures	Frequency	Percentage (%)	
Partial removabl denture	e25	61	
Full denture	7	17,1	
Fix denture	6	14,6	
Don't know	3	7,3	
Total	41	100	

Table 5. Distribution	of	Respondents	Based	on	Duration
of Denture Use					

Duration	Frequency	Percentage (%)
< 1 year	22	53,7
1-5 year	15	36,6
6-10 year	2	4,9
>10 year	2	4,9
Total	41	100

 Table 6. Distribution of Respondents Based on Confident

 Smile with a Denture

Confident	Frequency	Percentage (%)
Yes	40	97,6
No	1	2,4
Total	41	100

Table 7. Distribution of Respondents Based on ProblemsExperienced with Dentures

Problems	Frequency	Percentag e (%)	
Discomfort	7	17,1	
Difficulty chewing	7	17,1	
Pain in the gums	2	4,9	
Aesthetic problems	0	0	
Never	25	61	
Total	41	100	

Table 8. Distribution of Respondents Based on Don't Want to Wear Dentures Anymore

Don't want to we	ar dentures Frequency	Percentage
anymo	re	(%)
Yes	2	4,9
No	39	95,1
Total	41	100

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Table 9. Distribution of Respondents Based on Comfort of
Chewing Food with Dentures

Comfort of Chewing Frequency Percentage (%)				
Never	0	0		
Rarely	2	4,9		
Sometimes	4	9,8		
Often	9	22		
Always	26	63,4		
Total	41	100		

Table 10. Distribution of Respondents Based on InhibitsSpeaking Comfort

Inhibits Comfort	SpeakingFrequency	Percentage (%)
Never	34	82,9
Rarely	4	9,8

DISCUSSION

The final stage in human development is elderly. The natural process in the elderly causes a decrease in tissue capacity to replace, repair, and maintain normal structure and function, so that it will result in health problems in the elderly. Changes in the oral cavity, such as partial or complete loss of natural teeth, are one of the health problems that affect many elderly people. Elderly people who lose teeth will experience discomfort that will interfere with social interaction, appearance, masticatory function, and speaking comfort. In addition to making life uncomfortable, these oral health problems can also have an impact on a person's physical, mental well-being and social interactions. ¹¹

Maintaining the potential of the elderly is crucial to achieving the highest possible standard of living as the elderly represent an important national asset. The phrase "quality of life" is often used in various contexts relating to how health and illness affect an individual's experience. Subjective wellbeing, happiness, satisfaction, goodness and similar concepts are sometimes associated with it. Quality of life is a dynamic and individualized combination of biological and psychosocial experiences shaped by social and personal contexts. The influence of oral health on patients' individual experiences is also referred to by dentists as "oral healthrelated quality of life". The elderly can obtain the best quality of life by paying attention to oral health and overall health.¹² Seniors who have a high quality of life tend to be more independent, healthy, successful and productive. ¹¹ The World Health Organization (WHO) Program Policy states that dental health is a determinant of quality of life and is fundamental to overall health. Early mortality can be reduced with proper oral health care, and there is a correlation between oral health and overall health.¹²

Data processing in this study was obtained from the results of filling out a questionnaire distributed using google form. Based on the research findings from a total of 41

Total	41	100	
Always	0	0	
Often	0	0	
Sometimes	3	7,3	

Table 11. Distribution of Respondents Based onUncomfortable Eating in Front of Others due to DentureUse

Uncomfortable Eating in Front of Others	1 0	Percentage (%)
Never	37	90,2
Rarely	1	2,4
Sometimes	2	4,9
Often	0	0
Always	1	2,4
Total	41	100

respondents, women constituted the majority of respondents, namely 26 (63.4%). The fact that there are more elderly women than men may be the cause of this. Compared to men, women pay more attention to appearance, oral cavity and teeth. Hormonal changes that occur in the menopausal phase in women can cause a decrease in bone density which ultimately affects tooth loss and masticatory function. In addition, decreased salivary flow can lead to periodontal disease and cavities that can lead to tooth loss.¹¹

Most respondents in this study were aged 60-64 years with 25 (61%). This age is included in the elderly age category which is still in good health when compared to other old age categories. Increasing one's age tends to be accompanied by a decrease in body function. 13

The findings of this study show that 29 (70.7%) respondents have a bachelor's degree (S1) which is the highest level of education. Elderly people who rarely do oral examinations can cause oral disorders in the elderly, including tooth loss. It can be seen that the level of education of the elderly is very influential. The higher the level of education achieved by the elderly, the greater the awareness of the importance of maintaining oral health. ¹¹

The type of denture that is widely used by respondents is the type of removable partial denture, namely 25 (61%). The cost of making a fixed denture which is more expensive than removable denture can be one of the reasons why many elderly people use removable denture. There were 3 (7.3%) respondents who did not know the type of denture used. This is unfortunate because it seems that there are elderly people who still lack understanding of the type of denture.Based on the duration of denture use, 22 (53.7%) respondents had used a denture for less than 1 year. Only a few respondents have used denture for more than 1 year. This could be due to the lack of understanding of the elderly about the importance of replacing missing teeth as early as possible. Respondents who felt confident when smiling using dentures

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were 40 (97.6%) out of a total of 41 respondents. It is clear that the majority of respondents are satisfied with the use of the dentures. There seems to be no problem in using dentures in the elderly. This can be seen from the results of 25 (61%)respondents who have never experienced complaints. Complaints in the form of discomfort, difficulty chewing and pain in the gums were only found in a small proportion of respondents. The majority of 39 (95.1%) respondents stated that they had never considered not using the denture again. This means that the elderly are satisfied and comfortable with the use of the denture.Respondents who always felt comfortable chewing food using the denture were 26 (63.4%). It can be seen that the elderly are quite adaptable to the denture used. It can be seen from the results of the study that elderly respondents who never experienced obstacles in speaking comfort due to the use of denture were 34 (82.9%). The rest of the respondents answered rarely and sometimes.Respondents who never felt uncomfortable when eating in front of others because of using denture were 37 (90.2%). There was only 1 (2.4%) respondent who always felt uncomfortable when eating in front of others because of the denture. It seems that the majority of respondents are satisfied and comfortable with the use of the denture.Based on the results of the research that has been conducted, it appears that the majority of elderly people feel comfortable with the use of dentures. The elderly can chew food well, so that elderly nutrition can be categorized in good condition. The elderly are also satisfied with their dentures, this can be seen from the increased self-confidence of the elderly after using the denture. Overall, it can be said that the quality of life of elderly denture users is in a good category. The findings of this study can be utilized as data and information regarding the quality of life of the elderly related to the use of dentures. Data and information can be the basis for creating optimal oral health initiatives for the elderly community.

CONCLUSIONS

The conclusion of this study is that the elderly have a quality of life that is included in the good category. This can be seen from the answers to the questionnaires that have been distributed in the form of google forms. Elderly people with good quality of life tend to be more independent, healthy, prosperous, and productive.Suggestions from this study are to further improve oral health promotion in the elderly, in order to improve the quality of life of the elderly. This effort can be done by increasing knowledge, attitudes, behaviour, and related actions in maintaining oral health, especially in the use of dentures.

REFERENCES

- I. Suhartini. Fisiologi Pengunyahan Pada Sistem Stomatognati. *Stomatognatic*. 2015;8(gambar 1):122-126.
- II. Pratamawari DNP, Hadid AM. Hubungan Self-Rated Oral Health Terhadap Indeks Kunjungan Rutin Pemeriksaan Kesehatan Gigi Dan Mulut Ke Dokter Gigi. ODONTO Dent J. 2019;6(1):6. doi:10.30659/odj.6.1.6-11
- III. Melati CA, Susilawati S, Rikmasari R. Gambaran kualitas hidup pasien lansia pengguna gigi tiruan lepasan di RSGM Unpad. *Maj Kedokt Gigi Indones*. 2017;3(3):15. doi:10.22146/majkedgiind.17834
- IV. Annisa DF, Ifdil I. Konsep Kecemasan (Anxiety) pada Lanjut Usia (Lansia). Konselor. 2016;5(2):93. doi:10.24036/02016526480-0-00
- V. Oktanauli P, Taher P, Herawati M, Istindiah HN, Widyastuti R. International Journal of Medical Science and Clinical Research Studies Halitosis in Elderly (A Pilot Study in Tresna Werdha Melania Nursing Home). 2024;04(03):520-523.
- VI. Akbar F, Darmiati D, Arfan F, Putri AAZ. Pelatihan dan Pendampingan Kader Posyandu Lansia di Kecamatan Wonomulyo. *J Abdidas*. 2021;2(2):392-397. doi:10.31004/abdidas.v2i2.282
- VII. Senjaya AA. Gigi Lansia. J Skala Husada J Heal. 2017;13(1). doi:10.33992/jsh:tjoh.v13i1.76
- VIII. Veronica Siagian K, Wowor VN. Kualitas Hidup Masyarakat Kelurahan Batu Kota Yang Memakai Gigi Tiruan. PHARMACONJurnal Ilm Farm. 2015;4(4):102-115.
- IX. Wongkar VT, Siagian K V., Tendean LEN. Kualitas Hidup Lansia Pengguna Gigi Tiruan di Desa Toulimembet Kecamatan Kakas. *e-GiGi*. 2019;7(2):106-112. doi:10.35790/eg.7.2.2019.25409
- X. Sari R, Sultan F. Perawatan Edentulous Klas I Applegate Kennedy Dengan Gigi Tiruan Sebagian Lepasan Resin Akrilik. J Ilmu Kedokt Gigi). 2021;4(2):35-40.
- XI. Sari GD, Azizah A. ANALISIS KUALITAS HIDUP KESEHATAN GIGI DAN MULUT PADA LANSIA (Tinjauan Pada Pensiunan PNS Pemko Banjarmasin). An- Nadaa J Kesehat Masy. 2022;9(1):66. doi:10.31602/ann.v9i1.6900
- XII. Kusdhany LS, Sundjaja Y, Fardaniah S, Ismail RI. Oral health related quality of life in Indonesian middle-aged and elderly women. *Med J Indones*. 2011;20(1):62-65. doi:10.13181/mji.v20i1.430
- XIII. Thalib B, Ramadhani KN, Prostodonsia B, Kedokteran F, Universitas G. Nutritional Status and Quality of Life in Elderly Used Complete Dentures in Makassar. J MKMI. 2015;14:44-49.