



Annual World Dentists Summit and

2nd Annual Congress on

Dental Health and Oral Care

October 29-30, 2021 | Webinar

KEYNOTE FORUM

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and

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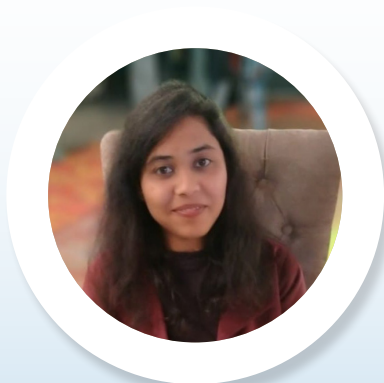
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Tooth – an important source of DNA in forensic odontology

Teeth and bones are the source of DNA available for the identification of dead persons . This unique coordination of teeth and their anatomic location in oral cavity also is good source in identification of dead bodies using forensic odontology in many cases . Though there are many sources of DNA in human body but here the matter of interest is TOOTH . This review summarises the Importance of dental identification plays a key role in natural and manmade disasters and mass casualties in aviation disaster and discusses how teeth plays a vital role in identification. A comprehensive understanding of tooth structure and DNA in human bodies identification and allow for efficient and timely missing persons case work and disaster victim identification response.

Biography

Dr Nancy Saxena , B.D.S INTERN at kothiwal dental college and research centre Moradabad and is about to complete her B.D.S. degree at the age of 24years from Rohailkhand University, INDIA.



Dr Nancy Saxena

Kohtiwal Dental College and
Research Centre, India

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Dental practice in the context of the covid-19 pandemic in the moscow region, russia

The Covid-19 pandemic has made a difference in everyday and professional life. Vaccinations and work to prevent the spread of the virus are being actively carried out, but globally, the incidence of Covid-19 cannot be reduced. It is necessary to organize the work of dental clinics, taking into account the new conditions. Aim: to analyze the situation in dental clinics in Moscow in the context of the Covid-19. Materials and methods: a survey was conducted of 60 dentists in Moscow and included analysis of work under severe constraints in the spring of 2020 and work at present.

Results: of all the respondents, 58.3% doctors work in government clinics, 30% in private clinics, 11.7% combine work in private and government clinics. Analyzing the working conditions during the pandemic, the clinics of the government and private sectors did not differ, since the decree of the Ministry of Health of Russia was implemented. 100% doctors were trained to work in the Covid-19 pandemic, 70% actually worked during pandemic. On the basis of government dental clinics, mobile teams were created to provide assistance for acute pain. Under the severe restrictions of the pandemic, 30% of doctors did not work. Currently, 100% of the respondents are working on a full schedule. Of the respondents, 36.7% people had been ill with Covid-19. Respondents reported symptoms of fever, loss of sense of smell, weakness in 90% of cases. In 9.1% of cases, there was lung damage.



Razumova Svetlana

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At present, 23.3% of respondents have antibodies to Covid-19, no antibodies have been detected in 50% and 26.7% have not been tested. Of all respondents who had been sick, 31.8% doctors noted that have been infected at work and 68.2% noted somewhere else. Family members were sick in 31.7% of the respondents. According to the results, all doctors who worked in the clinic in the spring of 2020 used all protective equipment: disposable gowns, hats, masks, gloves, goggles. In addition, 8.3% of respondents used antiviral drugs. Currently, 100% of respondents continue using all required protective equipment at work 18.7% replaced conventional surgical masks with filters. In 95% of the respondents, doctors noted that clinics have lengthened the interval between patients and introduced additional UV sterilization between patient appointments.

Conclusion: strict adherence to new protocols both at work and in everyday life can have a positive effect on preventing the spread of Covid-19.

Biography

Razumova Svetlana completed her MSc in Applied Human Nutrition at the University of Guelph in Canada in 2020 where her research focused on community-based Indigenous food sovereignty. Presently, Brianna is a PhD candidate and research officer in the Indigenous Oral Health Unit at the University of Adelaide in Australia where she is researching the impact of neoliberalism on oral health inequities experienced by Indigenous peoples in Australia as well as facilitators and barriers (sugar consumption, nutrition knowledge) to establishing oral health routines for Indigenous children.

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“I'd feel like a failure, you know, like i didn't do enough to protect them”: neoliberal subjectivity in indigenous oral health

Neoliberalism was established in the post-Cold War period as a set of dominating ideologies, practices and policies that underpinned the globalisation movement. Neoliberalism champions competitive private markets, deregulation in the name of freedom, personal autonomy and individual responsibility for health. A decade after the initial rise of neoliberalism, health inequities became concerns on the global stage. Oral health inequities aptly reflect social injustices due to the unique relation between material circumstances, access to health services and structural inequities. In Australia, Indigenous children experience early childhood caries at alarmingly higher rates than non-Indigenous children. Recently, neoliberalism has been suggested as an overwhelming contributor to Indigenous oral health disparities. This research is an extension of a single-blind parallel-arm randomised control trial that aimed to identify factors related to the increased occurrence of dental caries in Indigenous children. The objective of this qualitative analysis was to generate an understanding of how neoliberal subjectivity exists for Indigenous peoples in the context of oral health in Australia. Experiences of shame, judgment, ownership, embarrassment, and guilt were commonly expressed during motivational interviews with parents establishing oral health routines for Indigenous children. We argue that neoliberalism, as a function of modern health



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systems, is an extension of colonisation, benefitting the privileged and further oppressing the disadvantaged. As academics, and a crucial part of the neoliberal system, we are ethically compelled to challenge the inequity of power and health in our society and help navigate a way forward.

Biography

Brianna Poirier completed her MSc in Applied Human Nutrition at the University of Guelph in Canada in 2020 where her research focused on community-based Indigenous food sovereignty. Presently, Brianna is a PhD candidate and research officer in the Indigenous Oral Health Unit at the University of Adelaide in Australia where she is researching the impact of neoliberalism on oral health inequities experienced by Indigenous peoples in Australia as well as facilitators and barriers (sugar consumption, nutrition knowledge) to establishing oral health routines for Indigenous children.