

# 7<sup>th</sup> International Conference on Primary Healthcare & Management

November 21, 2022 | Webinar

Dania Wail Islam, Prim Health Care 2022, Volume 12

## Molar Incisor hypomenaralised (MIH)

### Dania Wail Islam

American Board of Pediatric Dentistry, university of Malaya, Saudi Arabia

The new abbreviation of molar incisor hypomineralisation, MIH, was first launched in 2001. Increasing attention has been paid to this pediatric dental problem worldwide along with improving level of children's dental health. Since 2001, a total of 96 original articles have been published on children's molar incisor hypomineralisation using the MIH-abbreviation in the title or in the abstract. The main clinical characteristics of MIH-lesions are demarcated brownish or chalky white opacities of enamel, atypical restorations, post-eruptive breakdown of enamel, and extractions due to MIH. Microscopically, the opacities reveal reduced microhardness, reduced mineral content, large areas with porosities, and defective enamel rod and surface ultrastructure. Some of the MIH-molars are highly sensitive to tooth-brushing and instrumentation. Moreover, children with severe MIH-lesions are at risk of developing severe dental fear and anxiety due to repeated exposure to restorative and operative dental care. MIH-lesions are most common among first permanent molars and incisors, but are also seen in deciduous second molars. The overall prevalence of MIH is about 13-14%, ranging between 2.8 and 21.8%. The problem seems to be fairly common not only in Europe but in Australia, New Zealand, India, China and South America as well. In spite of extensive research and publications, the etiology of MIH-lesions is far from clear. Several reasons like prematurity, gastrointestinal problems, pneumonia, frequent fever episodes, measles, chicken pox, bronchitis, hypoxia, hypocalcemia, and exposure to antibiotics and dioxin have been linked to MIH-lesions. Due to the still unknown etiology, all levels of prevention should be exercised and combined with meticulous restorative dental care of these pediatric patients. Local anesthesia may be problematic in hypersensitive MIH-molars, and adhesive techniques in restorative care of severe MIH-lesions can be challenging due to the defective ultrastructure of enamel. Moreover, extending borders of the restoration to areas where no further risk of tissue breakdown exist can also be challenging.

### Biography

Dania Wail Islam is Diplomat of the American Board of Pediatric Dentistry and Consultant of Pediatric Dentistry & early orthodontics, Assistant Professor at university of Malaya, Saudi Arabia. She is also member of the International association of Pediatric dentistry and member of the American Academy of orthodontics, member of the Saudi association of Pediatric dentistry, a member of the Malaysian association of the Pediatric Dentistry. Her Area of research interests includes dental anomalies, early orthodontic , dental trauma , hospital dentistry, medically compromised children.

---

**Received:** October 26, 2022; **Accepted:** October 28, 2022; **Published:** November 21, 2022

---