

ORAL AND PERIORAL PIERCING – RESEARCH AMONG TEENAGE STUDENTS

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Abstract

Keywords: *Piercers, piercing, teenage students.*

Introduction: Oral and perioral piercings are known since the ancient times but they became popular in Europe and USA as a social phenomena during the last two decades of the 20th century and the beginning of the 21st century. Oral piercing is usually a metal or plastic decoration which is fixed to the tongue, cheeks or other soft tissues of the oral cavity. It seems that there is an increasing interest in teenage students in Bulgaria decorating themselves with oral piercings.

Objective: To make a research of using in oral and intraloral piercing among teenage students in Bulgaria

Materials and methods: In Bulgaria questionnaire was completed by 476 teenage students.

Results and discussion: It can be summarized that almost 20% of the teenage students could put on an oral piercing despite the complications it could cause. 13% from investigated teenage students reported that they will never remove the piercing no matter the reason. No significant relation in the mean age was found between teenage students with and without piercing for two comparable groups.

Introduction

Oral and perioral piercings are known since the ancient times but they became popular in Europe and USA as a social phenomena during the last two decades of the 20th century and the beginning of the 21st century. Oral piercing is usually a metal, plastic decoration and the combination between different materials inserted into the tongue, cheeks, lips and uvula. Most commonly into the oral cavity can be observed more than one piercing. The prevalence of oral and/or perioral piercings in Western Union and USA is a relatively high according to the different epidemiological studies [1,2,3,4]. In Bulgaria lack systematic investigations about incidence of oral piercing and its complications, except single reports [5,6,7,8]. But there are material evidence of increasing interest in Bulgaria among teenage students for putting on a piercing and oral tattoo [9].

Aim: To make a research of using in oral and intraloral piercing among teenage students in Bulgaria.

Materials and methods

In Bulgaria questionnaire was completed by 476 teenage students.

Statistical methods:

- descriptive analysis involves describing the structure of processes and occurrences;
- Chi-squared test – used to determine whether there is a significant difference between the expected frequencies, compares two quantify variables;
- Student's t-distribution – compares two quantify variables;
- Mann–Whitney U test - nonparametric test.
- The level of significance was $p < 0.05$.

Results

To investigate the intention of fixing an oral piercing, if students were informed for possible complications associated with procedure and continuous carrying respectively (Figure 1). 10,3% reported that in spite of knowledge of concomitant complications they were fixed oral piercing and 9% probably were fixed (Figure 1).

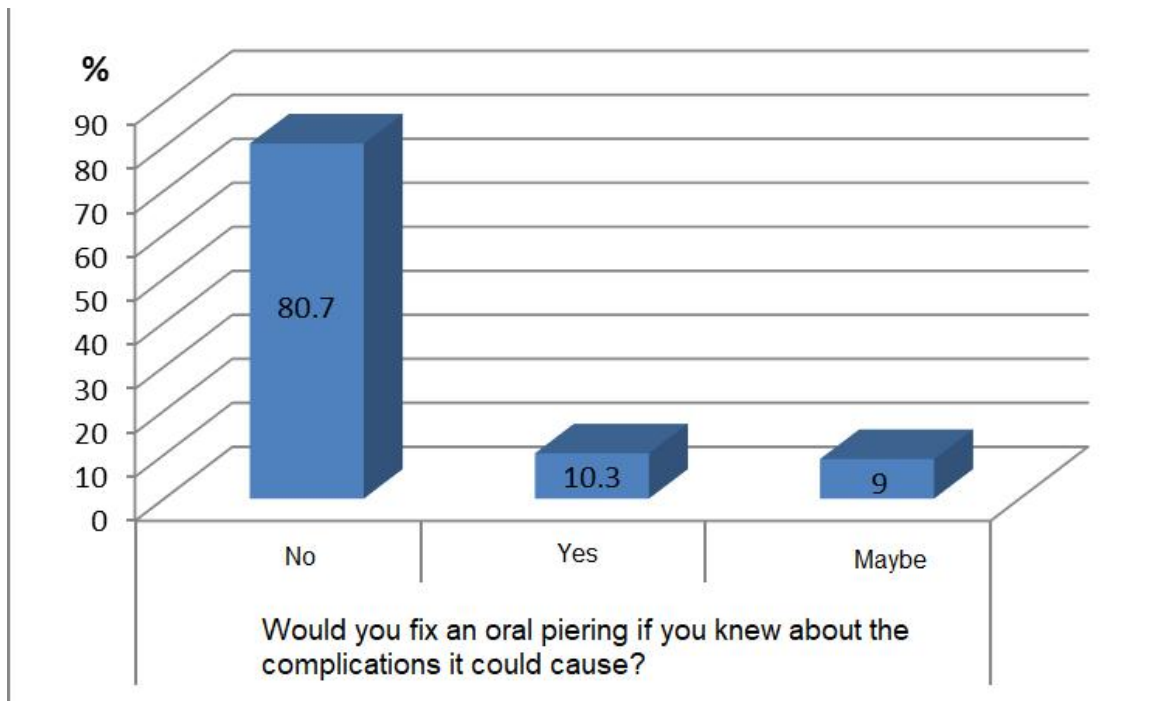


Figure 1: Intention to fix piercing by previous informed about concomitant complications

13% from investigated teenage students reported that they don't want to remove the piercing and 24,4% want to remove the piercing depends on appreciable situations of life.

Mean time for piercing carrying is $2,65 \pm 1,823$ years.

No significant relation in the mean age was found between teenage students with and without piercing for two comparable groups ($u=0,220$ $p=0,826$) (Table 1).

Table 1: Teenage students age with and without piercing

Age	Do you have piercing?	Number	Mean value	Standard deviation	Standard error	u	p	Meandifference
	Yes	34	17,47	1,022	0,175	0,220	0,826	0,041
	No	442	17,43	1,041	0,050			

We investigated the intend to fix oral piercing among teenage students with and without piercing (Table 2). 9,3% reported that were fixed oral piercing, 11,3% probably were fixed in the future. From 34 cases with oral piercing, one of them with oral piercing reported that if now has a choice don't decorate own cavity with piercing, other is with hesitation. To compare relative distribution on this index between teenage students with and without piercing was found statistically significant differences (likelihood ratio=121,312, $p=0,000$).

Table 2: Intentional to fix oral piercing among teenage students with and without piercing

			No	Yes	May be
			Do you want to fix piercing?	Do you want to fix piercing?	Do you want to fix piercing?
Do you have piercing?	No	442 100,0%	351 79,4%	41 9,3%	50 11,3%
Do you have piercing?	Yes	34 100,0%	1 2,9%	32 94,1%	1 2,9%
Total		476 100,0%	352 73,9%	73 15,3%	51 10,7%

We investigated the relationship between gender and presence of piercing of teenage students and determined that percentages relative between schoolboys (6,8%) and schoolgirls with piercing (7,3%) are comparable ($\chi^2=0,44$, $p=0,833$) (Table 3). The result from investigation of gender distribution with piercing shows higher percentage for schoolgirls – 22 (74,71%), twice higher than the schoolboys group – 12 (35,29%).

Table 3: Gender distribution of students with piercing

		Do you have oral piercing?		Total	
		No	Yes		
gender	male	number	164	12	176
		% gender	93,2%	6,8%	100,0%
		% Do you have oral piercing?	37,1%	35,3%	37,0%
	female	number	278	22	300
		% gender	92,7%	7,3%	100,0%
		% Do you have oral piercing?	62,9%	64,7%	63,0%
Total		number	442	34	476
		% gender	92,9%	7,1%	100,0%
		% Do you have oral piercing?	100,0%	100,0%	100,0%

Discussion

Above 10% from investigated teenage students ignored risk of possible complications and despite it's knowledge were fixed to oral piercing. The tendency is alert, approximately 20% desire to fix piercing inspite of complications (10,3% answer with yes, 9% - may be) (Figure 1). This is psychosocial phenomenon which required thoroughly analysis of similar cases, this condition is associated with autoaggressiveness.

There are so many interesting facts, that approximately 13% from investigated teenage students reported they don't want to remove the piercing which is twice higher than the percentage from investigated teenage students with piercing (7,1%).

Garcia-Pola, Maria J., et al. investigated 2266 patients requiring dental care over a period of 1 year and reported for 83 piercing wearers (43,4% - males, 56,6% - females), prevalence 3,6 % . The investigation includes piercing wearers from 18 to 27 age groups and they had been wearing the device for a mean of $2,9 \pm 3,8$ years, period is similar to results obtained from our investigation - $2,65 \pm 1,82$ years [10]. In our investigation females up to 18 years, especially above 18 years characterized by high prevalence compare than males with piercing (Table 3). Lack association between adolescents age and choice to fix oral piercing ($u=0.220$ $p=0,826$).

The present investigation established that 9,3% teenage students without piercing desire to fix similar accessory in the future and 11,3% allow a possibility to do it. (likelihood ratio=121,312, P = 0,000) (Table 2). In the present study of teenage students group without piercing, explained that in the future will be fixed piercing and allowed this opportunity are approximately 21%. This shows one significant group, nearby 3 times higher than these with piercing (7,1 %), which is potentially threatened from complications associated with future fixed of oral and perioral piercing. To prevent these healthy risks among teenage students and the knowledge about the possible complications associated with wearing and fix oral piercing will be limited the number of these group.

Conclusion

In the last two decades in worldwide is accounting dangerous tendency toward the incidence of piercing wearing. In countries, such as Bulgaria where lack regulatory control, widening of these fashion, especially below 18 years, requires emergency and complex precautions for limited of this social phenomenon. The risk of developing of different clinical complications is minimize in the countries with regulatory institutionally monitoring into the process of piercing fixation. In relationship with increasing number of patients with piercing, doctors of dental medicine must to know risks, acute and chronic complications associated with piercing into the oral cavity.

The incontrovertible evidence exists to increase interest in Bulgarian adolescents to piercing fixation and oral tattoo. This problem follows European and American tendency without law regulations (for example in USA piercing fixation of under age students without Informed Consent Form from Parents is prohibited in several states).

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