Introduction: A malocclusion is a misalignment or incorrect relation between the teeth of the dental arches when they approach each other as jaws close. Malocclusions are a common finding, although it is not usually serious enough to require orthodontic and sometimes surgical treatment to correct the problem. If severe, it can cause discomfort while they work. Correction of malocclusion may reduce the risk of decay and help relieve excessive pressure on the temporomandibular joint. Materials and Methods: The survey was taken among 84 Goldsmiths working in Chennai. They were asked to fill the questionnaire and the results obtained were used to come to a conclusion on their awareness and knowledge on malocclusion. Results: This study observed the malocclusion status in 84 Goldsmiths. Among these, 23% were Class 1, 24% were Class 2, and 33% were Class 3. There was a statistical non-significance distribution of the three categories of malocclusions ($x^2 = 18$, $df = 16$, $P = 0.324$). Conclusion: There was a significant prevalence of malocclusions among the Goldsmiths and a suitable remedial awareness should be initiated. KEY WORDS: Goldsmiths, Knowledge and awareness, Malocclusion, Orthodontic treatment
functional limitations. It has been shown to affect periodontal health, increase the prevalence of dental caries, and cause temporomandibular joint problems.

Unacceptable dental appearance has been found to exert a negative impact on self-image, career advancement, and peer group acceptance. This, in turn, will have an adverse influence on an individual’s level of social interactions. Such esthetic concerns and adverse influence on psychosocial well-being are the primary factors for decision to start orthodontic treatment. In the past three decades, a major reorientation of orthodontic thinking has occurred regarding adult patients; the reasons may be changed lifestyle, patient awareness, and multidisciplinary dental therapy that have allowed better management of the more complicated patient population, thereby greatly improving the quality of care and treatment prognosis. There are many reasons why adult orthodontic therapy should be encouraged, including the improvement of function and occlusion, and improvement of esthetics as well as the psychological aspects. This study was carried out to know the level of awareness regarding orthodontic procedures among Goldsmiths among the specific age group as there is very high prevalence of malocclusion.

The malocclusion prevalence is related to knowledge, attitude, and practices (KAPs)-related orthodontic treatment. Literature assessing the KAP related to orthodontic treatment among Goldsmiths in Tamil Nadu.

MATERIALS AND METHODS

The survey was taken among 84 Goldsmiths working in Chennai within an age limit of 15–30. This questionnaire was to know their awareness and knowledge on malocclusions. They were asked to fill the questionnaire and the results obtained were used to come to a conclusion on their awareness and knowledge on malocclusion. The questions involved whether they were aware of the appearance and difficulties defaced during work and social life. It involved their awareness of oral hygiene such as smell and stuck food.

RESULTS

The data were extracted and subjected to statistical analysis using the SPSS software. The statistical test used in their study was Chi-square test.

Figure 1 shows class 1 malocclusion were more prevalent among goldsmiths followed by class 2 and class 3. A total of 10 questions were asked and Figure 2 represents the percentages acquired in the questionnaire for the questions for which Figure 3 shows the graphical representation. Figure 4 denotes the statistical distribution of the three categories of malocclusions ($x^2 = 18$, $dF = 16$, $P = 0.324$).

DISCUSSION

This study observed the malocclusion status in 84 Goldsmiths. Among these, 23% were Class 1, 24% were Class 2, and 33% were Class 3. There was a statistical non-significance distribution of the three categories of malocclusions ($x^2 = 18$, $dF = 16$, $P = 0.324$). 60% of the Goldsmiths were unaware of malocclusions and did not take any dental visits regarding their malocclusions. They have a routine life to follow and are so absorbed in their work to think of these factors. Although they
Malocclusion is the second most common of the dental diseases in children and young adults, next to dental caries. The prevalence of malocclusion in India varies from 20% to 43%, respectively. The aim of orthodontic procedure is to improve dental occlusion, which results in better smile and good functioning in harmony with the face. Some of the major reasons for malocclusions were early tooth loss, trauma, dental caries, and genetics. Overall, it has been seen as an increase in awareness of orthodontic treatments as a dental specialty among adults. Many individuals are aware that orthodontic treatment of malocclusion and craniofacial abnormalities, by ensuring proper relationship of TMJ, may improve phonation, facial esthetics, with beneficial effects on the general and oral health, and results in improvement in the quality of life. Information about the oral health knowledge among Indian population is still very limited, especially for rural people, who constitute >70% of the population.

This type of study can give an indication of changing attitudes toward malocclusion among preadolescents. Around less than half of the participants were aware of an orthodontist and the procedures done by them. The younger the people the more they were aware of their social appearance, but due to lack of awareness, they were absent minded and did not consider their oral hygiene. Those who did seem to get treatment were found to have really bad oral conditions than the ones who were happy with their dentition. Malocclusion can be considered a public health problem due to its high prevalence and prevention/treatment possibilities. A number of studies have been demonstrated its impact on quality of life and it has been considered the third highest oral health priority by the WHO.

It is important to provide information to those who are unaware of the problems. Goldsmiths are usually engrossed in their work and have a busy schedule. They run a uniform life from work to back home. Due to workload, they are tend to chew pan and lack of proper hygiene can result in early tooth loss. Most of the Goldsmiths only earn enough to run their family with great difficulty. One of the major reasons on their ignorance to oral problems may be the cost of dental procedures and lack of patience. Treatment has to be made available at a lower cost affordable for all so that they will be more comfortable to make a move. If given a chance, 65% of the Goldsmiths are willing to get their malocclusions corrected it provided at a lower cost. Prevention is always better than cure. We should make them aware of the faults on not correcting at the time. It is high time to focus on patient comfort that will encourage the people to come forward with their problems than wait until it gets worse.

CONCLUSION
Awareness is the key to prevention. Malocclusion if not treated can lead to other severe problems worse than the condition itself. This group of Goldsmiths showed moderate level of awareness regarding orthodontic procedures. As they believe that, it helps in esthetics, better oral hygiene, mastication, and healthy lifestyle. Proper and adequate awareness should be imparted among the people. As our mouth is a mirror of our system is health it is important to be aware of our oral hygiene and other conditions. Preventing measures should be imported among the people for better results.

REFERENCES

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