

ORAL HABITS AS A FORM OF EXPRESSING EMOTIONAL PAIN AND PSYCHOLOGICAL ISSUES OF CHILDREN- A MULTIDISCIPLINARY APPROACH

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Neurotic habits are commonly encountered in children and represent the expression of the accumulated negative intrapsychic tension of which the child is trying to release himself at the unconscious level. This release is made either by triggering pain (lip habits, bruxism, nail biting, self-mutilation by biting the lips and cheeks) or by triggering pleasure (licking or sucking the finger). So, these people fall into the category of neurotic disorders that are considered easy psychiatric problems that should not be neglected. Children do not have the ability to become aware of a real trauma.

Dental practitioners have spoken about pernicious habits at the oral level, but what I want to present in this article is the awareness of the causes of these pernicious habits, as well as a better interdisciplinary collaboration, because if the dentist can solve a situation at the orthodontic level, that does not mean the problem has been solved and the cause has disappeared. For example, childhood self-mutilation mostly takes place only at the mouth level, but it may worsen during adolescence, reaching the upper limbs in the main vein area. Most of the time, such behavior indicates the signs of a very serious personality disorder, such as Borderline Personality Disorder. The occurrence of neurotic disorders in children is caused by posttraumatic situations such as the death of a parent, the appearance of a new family member, various types of abuse (emotional, verbal, physical or sexual), various calamities (earthquakes, floods, fires).

In conclusion, given the etiology of neurotic habits of pernicious habits in children with an orthodontic effect, a good knowledge of child psychology and a better interdisciplinary collaboration between the dentist, pediatrician and psychologist is required.

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