



## Editorial

# Psychosocial Factors in Oral Health

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In recent years, mental health has been identified as a critical point in the integration of general health and even more so after the confinement derived from the COVID-19 pandemic, as it radically changed the day-to-day life, having repercussions on lifestyle, the way of interacting, learning and socializing in the general population. Although some experienced stricter restrictions than others, mental health was affected<sup>1</sup>. While research in our area has focused on recognizing the influence of various factors that directly influence the state of oral health, such as hygiene habits, brushing technique, use or non-use of attachments, general health conditions such as diabetes, hypertension, and cancer, among others, the influence of other factors has also been identified, especially those of a psychosocial nature, as they can influence the course of the disease and impact on the quality of life of individuals.

Psychosocial factors include psychological stress, personality traits, anxiety, and depression, among others. Specifically in the case of psychological stress in dentistry, numerous situations can be related that could trigger it and are influenced by other conditions of the patient, such as general health, age, level of schooling, socioeconomic level, work activity, etc. Oral conditions that may manifest or aggravate include periodontal disease, bruxism, temporomandibular disorders, oral lichen planus, burning mouth syndrome, and recurrent aphthous stomatitis, among others<sup>2</sup>. These conditions generally go through a period of control, and a period of exacerbation. In cases of diseases such as oral lichen planus, recurrent aphthous stomatitis, and burning mouth syndrome, there is a bidirectional response, such that it is not possible to establish at this stage which comes first, the psychological stress that generates the predisposition for an exacerbation of the disease or whether it is the exacerbation of the

disease itself that triggers the increase in psychological stress. In other conditions, it is very likely that, with the increase in psychological stress, the clinical data will increase, as in the case of temporomandibular disorders or bruxism. From a more in-depth point of view, the influence of stress on the immune system has been identified, causing periods of inflammation which, in the case of some conditions such as autoimmune diseases, could provide information on the etiology of these diseases<sup>3</sup>.

Therefore, we can conclude that there is a need to study oral conditions from a more holistic point of view, as it is clear that the focus should not only be on clinical findings or local therapeutics but on mental health influences. A better understanding of psychosocial factors will allow a better understanding of what happens in each case and its influence on the disease, impacting the approach, treatment and eventually on patients' wellbeing and oral health-related quality of life.

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