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**«ЗДОРОВ'Я ЛЮДИНИ У СУЧАСНОМУ СВІТІ:  
ПИТАННЯ МЕДИЧНОЇ НАУКИ ТА ПРАКТИКИ»**

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**ЗБІРНИК ТЕЗ НАУКОВИХ РОБІТ**

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## **ACTUAL PROBLEMS DEALING WITH TYPOLOGICAL ASPECTS ASSESSMENT IN DENTISTRY**

Dental problems are rather distributed and studied by scientists in different countries in children thus describing ethno-age typological aspects in dentistry. Dental traumas are in the dentists attention focus in Iran [16, 35-38], Brazil [9, 91; 8, 52-58].

Iranian women exhibit more dental anxiety and fear comparatively to men and this work can be ethno-gender typological aspect reflection [17, 248-253].

Separately ethno-gender age is paid attention: dentists established dental higher distribution in Iranian boys [4, 234].

Important typological aspect is control locus. In part there are works about its assessment for determining the dental anxiety and fear by Australian and Swedish dentists [20, 453-459], Australian separately [3, 279-287], Finnish in diabetics (with dental and diabetic control locus correlation finding out) [10, 127-131].

Control locus is assessed at caries and gingival problems before and after oral health education with ethno-age aspect in Indian students [15, 42-48], in connection with dental anxiety in them [2, 9-14], separately in Swedish adolescents [14, 249-255].

Control locus is described together with ethno-gender-age typological aspect in Spain in the students [5, 327-337], in Indian dental students [1, 110-115].

Behavioral strategies (coping and fighting) belong to another important typological aspect the study and taking into account of which are actual in dentistry. We found works about coping in American patients at surgical preparation [11, 435-439; 12, 1237-1243].

American dentists assessed patterns of children's coping with an aversive dental treatment [13, 236-246], Irish – at sedation at caries [6, 30-36] thus describing behavioral strategies together with ethno-age typological aspects.

Dentists from Netherlands assessed children's coping with pain during dental care with using the external, internal and destructive strategies [19, 456-461]. As the results showed internal strategies were used most frequently, external coping strategies were used less frequently, and destructive strategies were hardly used. Moreover children with pain experience and fearful children used more coping strategies, with fearful children using more internal strategies. This work describes behavioral strategies together with locus control in children taking into account their nationality and thus unites for typological aspects together.

Coping strategies in children at dental treatment, dental anxiety at the dentists' visit if the child has got childhood caries taking into account age and gender was he subject of the next work of endodonts, pedodonts from Netherlands [18, 173-178]. Dentists from Croatia, Bosnia and Herzegovina concluded that there were no significant differences in children's fear and anxiety based on age, sex, or socioeconomic variables; children used internal coping strategies most frequently and external coping strategies were rated by the children as the most effective; they did not find differences in number and type of effective coping strategies in children with high dental fear and anxiety in comparison with children with the low one; there was an evidence of the coexistence of dental fear in parents and older children [7, 515-521].

As our results demonstrated control locus of medical and dental students from Iran was internal. Iraqi and Egyptian medical students showed external control locus, while the dental students – the internal one. Iranian and Iraqi medical students expressed fighting behavioral strategy while dentists – the coping one. Egyptian students both of medical and dental profile demonstrated fighting strategy as the major in their behavior.

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