# The Impact of Sealants on Caries Prevention in Children

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#### **Abstract:**

Dental sealants play a crucial role in the prevention of caries (tooth decay) in children, particularly in the deep grooves and fissures of their molars, where cavities are most likely to develop. By providing a protective barrier, sealants prevent bacteria and food particles from accumulating in these vulnerable areas, significantly reducing the risk of decay. Studies have shown that children with sealants have a markedly lower incidence of caries compared to those without, highlighting the importance of early intervention in dental health. The application process is quick, painless, and can be performed during a routine dental visit, making it an effective measure for enhancing oral health in pediatric populations. The impact of sealants extends beyond individual dental health; they also contribute to overall public health by reducing the burden of dental disease and the associated treatment costs. As children with untreated caries may experience pain, difficulty eating, and loss of educational opportunities, sealants serve as a preventive strategy that promotes better quality of life. Education and advocacy for the use of dental sealants are critical in increasing their adoption among children, especially in underserved communities where access to dental care may be limited. Overall, sealants represent a practical and effective approach to curbing the prevalence of dental caries in children.

**Keywords:** dental sealants, caries prevention, children, oral health, molars, protective barrier, bacteria, public health, preventive strategy, educational opportunities.

### **Introduction:**

Dental caries, commonly known as tooth decay, remains a significant public health concern worldwide, particularly among children. The World Health Organization (WHO) identifies dental caries as one of the most prevalent chronic diseases globally, with the pediatric population particularly affected. In the United States, research suggests that approximately 42% of children aged 2 to 11 experience dental caries in their primary teeth. This figure underscores the urgent need for effective preventive measures to combat this condition. Among the various strategies employed in caries prevention, dental sealants have gained prominence due to their effectiveness in reducing the incidence

of carious lesions on occlusal surfaces of primary and permanent molars [1].

Dental sealants are thin, protective coatings that are typically applied to the chewing surfaces of molars, where decay is most likely to occur. The primary mechanism of action lies in their ability to prevent food particles and bacteria from accumulating in the deep grooves and fissures of teeth, which are challenging to clean, especially for children who may lack the dexterity and understanding necessary for adequate oral hygiene. By acting as a physical barrier, sealants facilitate the maintenance of healthier tooth surfaces, thereby significantly decreasing the risk of caries. Various studies have demonstrated the effectiveness of sealants, showing

that they can reduce the risk of caries in molars by up to 80% within the first two years following application and by about 50% over the longer term [2].

Beyond their obvious protective benefits, the application of dental sealants can represent a costeffective strategy in the broader context of pediatric dental care. The economic burden of untreated dental caries in children is substantial, involving costs associated with restorative treatments, emergency dental visits, and potential long-term impacts on overall health and educational attainment. Moreover, numerous studies suggest that the implementation of sealant programs in schools or community health settings can significantly reduce disparities in oral health among children from different socioeconomic backgrounds, increasing access to preventive care for those who might otherwise lack it [3].

Despite the demonstrated benefits of sealants, their utilization in pediatric dental practice is not universal. Research indicates that while awareness of sealants is high among dental professionals, the actual application rates can be inconsistent. Factors influencing the adoption of sealant application may include practice setting, insurance coverage, and parental education regarding the importance of dental sealants. Public health initiatives aimed at increasing awareness and access to sealant programs may be essential in overcoming barriers and ensuring that more children benefit from this preventive measure [4].

In addition, various methods of sealant application and types exist, including resin-based and glass ionomer-based sealants. The choice of sealant material can depend on factors such as the patient's risk of caries, the dental professional's assessment, and specific characteristics of the tooth surface. Understanding these nuances is crucial for clinicians and public health policymakers alike, as they endeavor to implement effective dental health programs tailored to the needs of children [5].

By enhancing oral health in early childhood, sealants contribute not only to individual well-being but also to healthier communities overall, highlighting the interconnected nature of dental and general health.

### **Dental Sealants, Definition and Types:**

Dental sealants are thin, protective coatings typically made from a type of plastic resin. They are

applied to the chewing surfaces of the back teeth (molars and premolars), where pits and grooves provide an ideal environment for food particles and bacteria to accumulate, leading to decay. The primary purpose of dental sealants is to act as a barrier, preventing food and plaque from settling in these vulnerable areas and ultimately decreasing the risk of cavities [6].

The Centers for Disease Control and Prevention (CDC) emphasizes the importance of sealants as an effective preventive measure. Studies show that sealants can reduce the risk of decay in molars by nearly 80% in the two years following application, making them a valuable tool in the fight against oral diseases [7].

Dental sealants can be classified typically into two main categories based on their formulation: **resinbased sealants** and **glass ionomer sealants**.

### 1. Resin-Based Sealants

Resin-based sealants are the most commonly used type and are composed of a combination of plastic resins. They are known for their durability and resistance to wear, making them particularly effective in protecting molars. These sealants generally come in shades that allow them to blend in with the natural color of teeth, offering aesthetic advantages. Additionally, they often require a curing process, typically using a blue light to harden the material and create a strong bond with the tooth surface [8].

Resin-based sealants' performance is noteworthy, as they can withstand the forces of chewing and last for several years with proper care. They are best suited for permanent molars, which are most susceptible to cavities, especially in children and young adults.

### 2. Glass Ionomer Sealants

Glass ionomer sealants are made from a mixture of acrylic and glass powders and offer unique advantages, particularly in terms of fluoride release. This type of sealant not only protects the tooth surface but also promotes remineralization, which can help in the repair of early carious lesions. Glass ionomer sealants bond chemically to the enamel and dentin, making them a viable option for patients with high caries risk [9].

While glass ionomer sealants are less durable compared to resin-based sealants and may not be suitable for high-stress areas, they are beneficial for primary teeth and as an interim solution in certain clinical scenarios. Their ability to release fluoride makes them especially useful for patients prone to tooth decay [10].

The application of dental sealants is a quick and painless procedure that can typically be completed within a single dental visit. The process generally follows these steps:

- Preparation: The dentist will begin by thoroughly cleaning the tooth surfaces to remove any plaque or debris. This step is crucial to ensure that the sealant adheres properly.
- 2. **Isolation**: The tooth is then isolated using cotton rolls or a suction device to keep it dry. Moisture can compromise the effectiveness of the sealant.
- 3. **Acid Etching**: An acid solution is applied to the enamel surface. This step creates microscopic grooves in the tooth, enhancing the sealant's ability to bond securely.
- 4. **Rinsing and Drying**: After a brief application period, the acid is rinsed off, and the tooth is dried once again.
- 5. **Sealant Application**: The dental sealant is carefully applied to the grooves and fissures of the tooth. Depending on the type of sealant used, it may be cured with a blue light to harden it.
- 6. **Final Check**: The dentist will ensure that the sealant is correctly placed and may make adjustments to ensure a comfortable bite [11].

The entire procedure is typically completed in less than 30 minutes, making it a convenient preventive treatment option.

### **Benefits of Dental Sealants**

The implementation of dental sealants offers a variety of benefits, particularly in enhancing oral health:

- Cavity Prevention: The primary benefit of sealants is their ability to significantly decrease the risk of decay by providing a physical barrier against bacteria and food particles.
- 2. **Cost-Effective Solution**: Preventing cavities saves money in the long run by

- reducing the need for restorative dental treatments such as fillings or crowns.
- 3. **Durability**: When applied correctly, dental sealants can last several years, providing long-term protection for teeth.
- Fluoride Release: Some sealants, particularly glass ionomer types, release fluoride, which can contribute to the remineralization of the enamel, offering additional protection against cracks and decay.
- 5. **Non-Invasive Procedure**: The application of dental sealants is a minimally invasive procedure that requires no drilling or local anesthesia, making it an attractive option for patients of all ages [12].

#### **Considerations and Conclusion**

While dental sealants are a reliable preventive measure, there are considerations to keep in mind. Regular dental check-ups are crucial to monitor the condition of the sealants, as they can wear over time and may need to be reapplied. Additionally, dental sealants are most effective for individuals who exhibit good oral hygiene practices, including proper brushing and flossing [13].

# **Mechanism of Action: How Sealants Prevent Carries:**

Dental caries, commonly referred to as cavities, is a pervasive oral health issue affecting individuals of all ages worldwide. The onset of caries is primarily attributed to the interaction of dietary sugars, plaque-forming bacteria, and tooth structure, leading to demineralization and decay. With the increasing prevalence of caries, preventive measures have garnered significant attention, among which dental sealants stand out as a highly effective intervention [13].

Dental sealants are thin plastic coatings applied to the chewing surfaces of teeth, particularly premolars and molars. These surfaces are characterized by pits and fissures, which are prone to plaque accumulation and carious lesions. Dental sealants are typically made from glass ionomer or resinbased materials, which exhibit strong adhesive properties, allowing them to bond effectively to the tooth enamel. The application process involves cleaning the tooth surface, applying an acid etchant to promote adhesion, and then curing the sealant with a special light to harden it [14].

#### The Mechanism of Action

The preventive action of dental sealants against caries can be understood through several interrelated mechanisms:

- 1. Barrier Effect: The primary action of dental sealants is to serve as a physical barrier that protects the underlying tooth structure from bacterial invasion and food particles. By covering the pits and fissures, sealants significantly reduce the surface area available for plaque formation. This barrier inhibits bacteria, such as Streptococcus mutans and Lactobacillus casei, which are primarily responsible for the initiation of carious lesions [15].
- 2. Reduction of Biofilm Development:
  Biofilms complex communities of bacteria embedded in a protective matrix play a critical role in the pathogenesis of dental caries. By sealing off the grooves and pits on the tooth surface, sealants impede the formation of biofilms. The reduced bacterial colonization limits the production of organic acids that lead to enamel demineralization, thereby maintaining the integrity of tooth structure [15].
- 3. **Nutrient Limitation**: Sealants not only prevent bacteria from gaining access to the tooth surface but also restrict essential nutrients from reaching potential bacterial colonizers. This nutrient limitation is vital, as it diminishes the metabolic activity of cariogenic bacteria, thus contributing further to a caries-free environment [15].
- 4. Enhanced Remineralization: Some sealants, particularly those made from glass ionomer materials, have the added benefit of fluoride release. Fluoride is known to enhance the remineralization process of enamel, making it more resistant to acid attack. This dual mechanism providing a barrier while also delivering fluoride adds a layer of protection that significantly decreases caries rates [15].
- 5. Chemical Bonding: The chemical composition of modern dental sealants allows for a strong bond with enamel. This adhesive property is critical in ensuring that the sealant remains intact over time,

- optimizing its protective effects. Sealants must withstand the forces of mastication and the potential wear from food consumption [15].
- 6. Longevity: Studies indicate that dental sealants can remain effective for several years, provided they are adequately placed and maintained. Regular dental check-ups are essential to monitor the integrity of sealants and to ensure that any reapplication is done when necessary. The lasting nature of sealants amplifies their protective effects against caries on newly erupted molars and premolars during crucial developmental stages [15].

# **Public Health Implications**

The significance of dental sealants extends beyond individual oral health, incorporating broader public health perspectives. According to numerous studies, the implementation of sealants in community-based preventive programs has been associated with a marked reduction in caries prevalence among children and adolescents. Sealants are particularly beneficial for those in high-risk groups — including low-income children and those with limited access to dental care — where the burden of caries is disproportionately high [16].

Public health initiatives promoting the use of dental sealants not only alleviate the financial burden of dental treatment but also enhance the quality of life for affected individuals. When incorporated into school-based dental programs and regular health check-ups, sealants serve as a robust preventive measure that contributes to the overall reduction of dental caries incidence [16].

# Efficacy of Sealants in Reducing Caries Incidence:

Dental caries, more commonly known as tooth decay, is a widespread public health concern that affects individuals of all ages across the globe. It is characterized by the demineralization of tooth structure due to the acidic byproducts derived from bacterial fermentation of dietary sugars. Early intervention is crucial in preventing the progression of caries, and one of the most effective preventive measures is the application of dental sealants. Dental sealants are thin, protective coatings applied to the chewing surfaces of molars and premolars, primarily designed to prevent tooth decay [17].

Dental sealants are typically made from a liquid resin material that is applied to the grooves and pits of the teeth—the areas most susceptible to caries due to their retentive morphology. Once applied, the resin hardens, creating a smooth surface that reduces the likelihood of food particles and plaque accumulation. The underlying principle of sealants lies in their ability to create a barrier between the tooth structure and detrimental factors such as oral bacteria and sugars. By sealing off these vulnerable areas, the sealants prevent decay-causing bacteria from establishing themselves on the tooth surface [17].

Moreover, the application of sealants can be particularly crucial in children and adolescents, who often lack the motor skills necessary for effective oral hygiene practices. Since dental caries predominantly occurs in the first molars and premolars, which usually erupt between the ages of six and twelve, timely application of sealants during these years can greatly reduce the risk of decay [18].

Numerous studies have corroborated the effectiveness of dental sealants in decreasing the incidence of caries. Research published by the American Dental Association indicates that sealants can reduce the risk of caries in molars by nearly 80% in the first two years after application, and by 50% in the years following. Meta-analyses have also revealed that sealants provide a significant preventive effect compared to unsealed teeth, reinforcing the argument for their widespread application [18].

One notable longitudinal study followed children who received sealants on their permanent molars and compared their cavity rates with similar children without sealants over a period of ten years. The results showed that those with sealants had markedly lower incidences of caries, even accounting for variables like socioeconomic status and access to dental care. This aligns with the broader understanding of preventive dentistry, where early and proactive measures can substantially mitigate future dental problems [18].

Despite the robust evidence supporting the effectiveness of sealants, it is also essential to recognize the importance of maintaining good oral hygiene practices and regular dental visits. While sealants significantly reduce caries incidence, they are not a standalone solution. Regular dental checkups are vital to monitor the integrity of the sealants and to perform necessary maintenance, including reapplication if wear and tear occurs [19].

The application of dental sealants is a straightforward procedure that can typically be completed in a single dental visit. Initially, the teeth are cleaned and dried, and an acid solution is applied to roughen the surface of the tooth, promoting better adhesion of the sealant material. Following this, the sealant is applied into the grooves and pits of the tooth using a small applicator. The sealant is then cured, often with a special blue light, which hardens the material quickly [19].

While the benefits of sealants are substantial, there are considerations regarding patient eligibility. Sealants are most effective when applied to cariesfree, newly erupted teeth. Thus, preventive dental care should focus on identifying children at an increased risk of caries due to factors such as dietary habits, socioeconomic status, or limited access to dental care. It is also crucial to educate parents and guardians about the importance of sealants as part of a comprehensive approach to oral health management [20].

The successful integration of sealants into preventive dental care programs can have profound implications for public health. By significantly decreasing the incidence of tooth decay, sealants can help reduce the burden of dental treatments on healthcare systems. This is particularly pertinent in underprivileged communities where access to routine dental care may be limited.

Programs aimed at increasing awareness of the benefits of sealants, especially among high-risk populations, can lead to broader acceptance and utilization of this preventive measure. Consequently, public health initiatives that advocate for school-based sealant programs have shown in effectively reaching populations, thus providing essential preventive care within a familiar environment. These programs not only increase accessibility but also promote health equity by targeting underserved communities where caries prevalence tends to be higher [20].

# Factors Influencing Sealant Utilization Among Children:

Dental caries, commonly known as cavities, are one of the most prevalent chronic diseases affecting children globally. According to data from the World Health Organization, dental caries can lead to significant pain, infection, and even tooth loss if left untreated. Preventive measures, such as dental sealants, have emerged as efficient strategies for combating this widespread health issue. Sealants are

thin plastic coatings applied to the biting surfaces of the back teeth, specifically the molars, to help prevent cavities. Although the efficacy of sealants is widely recognized, their utilization rates among children vary significantly due to a complex interplay of factors [21].

One of the foremost factors influencing sealant utilization is the socioeconomic status (SES) of families. Research consistently shows that children from lower-income families are less likely to receive sealants compared to those from higher-income brackets. Families with limited financial resources may prioritize other basic needs over dental care, leading to a lack of regular dental visits essential for sealant application. Furthermore, children who are uninsured or underinsured often face barriers to accessing dental care, thus impacting their likelihood of receiving preventive treatments like sealants. Economic disparities extend beyond direct costs, as families with lower SES may also experience logistical challenges in accessing dental care, such as transportation issues or inability to take time off work to attend appointments [22].

Access to dental care is another crucial determinant of sealant utilization. Geographic disparities in healthcare resources can significantly affect whether children receive preventive care. Rural areas, in particular, may have fewer dental practitioners, resulting in longer wait times and limited options for families seeking dental services. Moreover, even in urban areas, there may be significant differences in access based on the availability of dental clinics that provide sealants and the acceptance of Medicaid and other insurance plans. Children whose families have better access to dental care typically exhibit higher rates of sealant application, contributing to a lower incidence of cavities [22].

Parental awareness and education play a pivotal role in determining whether children receive sealants. Parents who understand the importance of preventive dental care, including the benefits of sealants, are more likely to seek these services for their children. Educational interventions that improve parental knowledge about dental health can prove effective in increasing sealant utilization. For instance, outreach programs that target parents in schools or community settings can raise awareness about the role of sealants in preventing cavities. Conversely, misinformation or a lack of understanding about dental treatments may lead to complacency or fear, reducing the likelihood that

parents will take their children for sealant applications [23].

Cultural attitudes and beliefs surrounding dental care also significantly influence sealant utilization. In some cultures, there may be a greater emphasis on treatment rather than prevention, leading to a disadvantage in recognizing the benefits of sealants. Additionally, beliefs about oral hygiene practices and the importance of dental check-ups can vary widely among different communities. For example, communities with traditional views on health may resist modern dental treatments, perceiving them as unnecessary or potentially harmful. These cultural perceptions require sensitive approaches in dental outreach efforts to build trust and incorporate community values into educational initiatives [23].

Insurance coverage is a critical factor in the access and utilization of dental sealants among children. The extent to which dental sealants are covered under private insurance, Medicaid, or other public health programs can sway parents' decisions on pursuing such preventive measures. States that prioritize preventive dental services in their Medicaid programs often report higher utilization rates of sealants among eligible children. Legislative measures aimed at expanding access to dental care, providing funding for preventive services, and increasing community dental health programs can significantly enhance sealant use. Policymaking plays a vital role in promoting equitable access to dental care resources [24].

School-based dental programs can also be effective in promoting sealant utilization among children. Many schools implement preventive dental services, including sealant programs, particularly in areas where children have limited access to regular dental care. These programs often provide free services, making dental care more accessible for low-income families. Schools serve as an ideal setting for delivering oral health education and preventive treatments because they can reach a large segment of the child population and integrate dental care into children's routine. When parents are informed about school-based dental services, and as long as consent is provided, children stand a higher chance of receiving protective sealants [24].

The role of dental professionals in advocating for sealant application among children cannot be understated. Pediatric dentists and general dentists provide crucial guidance on preventive treatments, helping parents understand the necessity and timing of sealant placement. Professional

recommendations are particularly influential when delivered in a collaborative manner that addresses parental concerns and promotes dialogue about children's oral health needs. Trust between parents and dental providers can lead to increased acceptance of preventive measures, including dental sealants, ultimately contributing to improved oral health outcomes [25].

# **Long-Term Dental Health Outcomes of Sealant Application:**

Dental sealants are a preventive treatment that involves applying a thin plastic coating to the chewing surfaces of molars and premolars, which are the teeth most susceptible to cavities. While the primary goal of sealants is to prevent dental caries, ongoing discussions continue regarding their longterm effectiveness and the broader implications for overall dental health. Dental sealants are designed to act as a barrier against food particles and bacteria. The process begins with a thorough cleaning of the tooth surface, after which the sealant material is applied to the pits and fissures of the tooth. Once the sealant is cured, usually with a special light, it hardens and forms a protective layer. This barrier effectively covers microscopic grooves where plague and food debris can accumulate, thereby reducing the risk of decay [25].

The application of sealants is particularly beneficial for children and adolescents, as they are in a developmental stage where they are often less diligent about oral hygiene. Children are also more susceptible to cavities in these fissures due to the structural characteristics of their newly erupted molars. Sealants can provide a critical line of defense during this vulnerable period.

A plethora of scientific studies has demonstrated the long-term effectiveness of dental sealants in reducing the incidence of cavities. According to the Centers for Disease Control and Prevention (CDC), dental sealants can reduce the risk of decay in molars by up to 80% in the first two years after application, and they continue to provide protection for several years thereafter. Longitudinal studies have shown that sealants can last anywhere from five to ten years, depending on factors such as eating habits, oral hygiene practices, and dental care [26].

Research published in journals such as the "Journal of Dental Research" illustrates that children who receive sealants are less likely to experience cavities in their permanent teeth compared to those who do not receive this preventive treatment. The protective

effect can be especially pronounced in low-income children, who may lack access to regular dental care and suffer from a higher prevalence of dental caries [26].

One of the less-discussed yet significant long-term outcomes of sealant application is its effect on overall oral hygiene habits. When children and their families are educated about the benefits of sealants, there is often increased awareness of dental health in general. This knowledge can translate to improved daily oral hygiene practices, such as regular brushing with fluoride toothpaste and flossing between teeth [26].

Furthermore, families might be more inclined to schedule regular dental check-ups after sealants are applied, as the protective nature of sealants gives parents a sense of security regarding their child's dental health. Consequently, children may learn the value of preventive care, fostering lifelong oral health behaviors [26].

From a public health standpoint, the cost-effectiveness of dental sealants is compelling. The initial cost of sealant application may be perceived as a financial burden, particularly for families without comprehensive dental insurance. However, when considering the long-term savings associated with preventing cavities—and the subsequent need for more invasive and expensive dental treatments—sealants present a rational choice [27].

According to a study by the American Dental Association, every dollar spent on sealants can save about \$11 in future dental treatment costs. By preventing cavities, sealants can reduce the need for fillings, crowns, and more serious procedures like root canals and extractions, which can be both financially and emotionally burdensome for families [27].

While the benefits of dental sealants are substantial, there are limitations and considerations that must be addressed. One of the primary concerns is the longevity of sealants. Though they are effective initially, some sealants may wear down over time, necessitating reapplication. Regular dental checkups are essential for assessing the integrity of sealants and ensuring they are intact [27].

Another consideration is the composition of some sealant materials, which can contain bisphenol A (BPA). Although studies suggest that the exposure to BPA from dental sealants is minimal and not considered harmful, it has raised concerns among

some parents and health advocates. Researchers are working to find alternative materials that are both effective and free from harmful substances [28].

Finally, sealants are not a substitute for regular oral hygiene practices. Children with sealants still require consistent brushing, flossing, and dental visits. Education on comprehensive oral health practices remains paramount in minimizing the long-term risk of cavities [28].

# Public Health Implications and Recommendations:

Public health is an interdisciplinary field entrusted with the protection and improvement of the health of populations. It encompasses a wide array of factors that influence health outcomes, including socio-economic conditions, environmental factors, lifestyle behaviors, and healthcare access. The implications of public health are profound, influencing the well-being of entire communities, nations, and global populations [29].

### **Understanding Public Health Implications**

The implications of public health can be observed through various lenses: epidemiological trends, health disparities, economic costs, and policy responses. The primary goal of public health initiatives is to prevent disease, prolong life, and promote health through organized efforts. The effectiveness of public health strategies can be seen in the decline of communicable diseases due to vaccination programs, education on healthy lifestyles, and improved sanitation [30].

- Health Disparities: One of the most significant public health implications is the pervasive issue of health disparities that across different populations. exist Disparities are often rooted in socioeconomic, racial, and geographic factors that determine an individual's access to care and health resources. Low-income communities frequently face higher rates of chronic diseases such as diabetes, hypertension, and obesity. For instance, an individual's zip code can significantly impact their life expectancy, showcasing how systemic inequalities can lead to lifelong disadvantages in health [31].
- Economic Impact: Public health has substantial economic implications. Poor health can diminish workforce productivity, inflate healthcare costs, and

strain public resources. The economic burden of preventable diseases is staggering. The Centers for Disease Control and Prevention (CDC) estimates that chronic diseases account for about 75% of total healthcare spending in the United States. Furthermore, addressing preventive measures can lead to substantial cost savings for health systems and taxpayers [32].

3. Policy Responses: Public health policies play a critical role in shaping health outcomes. Initiatives like smoking cessation programs, vaccination mandates, initiatives to prevent communicable diseases highlight the importance of government action in promoting population health. However, the effectiveness of these policies is often moderated by political, social, and economic factors that influence their implementation and acceptance within communities [33].

## **Current Challenges in Public Health**

Despite the advancements made in public health, significant challenges persist:

- 1. Global Pandemics: The COVID-19 pandemic has underscored vulnerabilities within public health systems worldwide. It highlighted the necessity for robust surveillance systems, rapid response strategies, and equitable healthcare access. Variants of the virus have also pointed to the need for ongoing epidemiological research and vaccine distribution efforts [34].
- 2. Mental Health: The recognition of mental health as an essential component of public health is rising, yet considerable stigma and a lack of resources remain challenges. Mental health disorders are prevalent, affecting approximately one in four people globally. Public health strategies must prioritize mental health education and accessible services to mitigate the burden on individuals and communities.
- 3. **Climate Change**: The ramifications of climate change are increasingly recognized as significant public health threats. From heat-related illnesses to vector-borne

diseases influenced by changing climate patterns, environmental factors play an undeniable role in health. It is vital to integrate climate considerations into public health planning and interventions.

4. **Health Misinformation**: The rise of digital platforms has led to an explosion of health misinformation, complicating public health messaging and efforts. During the pandemic, misinformation about vaccines and treatments spread rapidly, undermining efforts to control the virus's spread. Public health entities face the challenge of creating clear, accurate communications that counter these misconceptions [34].

### **Recommendations for Improving Public Health**

To address the aforementioned challenges and enhance public health outcomes, a multi-pronged approach is necessary. Here are key recommendations:

- 1. Strengthening Health Equity Initiatives: Public health systems must prioritize the identification and elimination of health disparities. This can be accomplished through community-based participatory research, where local voices shape health interventions. Expanding access to healthcare services in underserved areas, implementing outreach programs, and ensuring cultural competence among healthcare providers are crucial steps toward equity [35].
- 2. Investing in Preventive Care: Public health campaigns should emphasize prevention over treatment. Increased funding and support for preventive strategies—such as screenings, immunizations, and health education—can lead to significant long-term health improvements. Worksite wellness programs and educational initiatives in schools can promote healthy behaviors early on [36].
- 3. Enhancing Mental Health Services:
  Recognizing mental health as an integral part of overall health requires the development of comprehensive mental health programs. Integrating mental health services into primary care settings can improve accessibility. Public awareness

- campaigns can help to reduce stigma and promote understanding of mental health conditions [37].
- 4. Adopting a One Health Approach: The interconnectedness of human, animal, and environmental health necessitates a holistic approach to public health. A One Health framework involves collaboration across multiple sectors to address health threats that arise from ecological changes, zoonotic diseases, and environmental degradation [38].
- 5. Developing Robust Communication Strategies: Public health authorities must proactively combat misinformation. This involves creating clear, transparent communication strategies that establish trust with communities. Social media platforms can be leveraged to disseminate accurate information effectively, while partnerships with influencers and trusted community figures can enhance credibility [39].
- 6. Incorporating Technology: Embracing technology in public health can lead to innovative solutions. Digital health applications, telehealth services, and data analytics can facilitate real-time health monitoring and improved service delivery. Public health officials can harness technology to track disease outbreaks and evaluate the effectiveness of interventions more efficiently [40].

# Conclusion and Future Directions in Sealant Research:

The importance of sealants in a variety of industries, including construction, automotive, and aerospace, cannot be overstated. Their primary function is to create a barrier against moisture, air, and contaminants, which is vital for the integrity, performance, and longevity of materials and structures. As the need for sustainable solutions and high-performance materials continues to grow, sealant research has evolved significantly, blending advanced materials science with innovative technologies [41].

### **Current State of Sealant Research**

Sealants, which can be made from various materials such as silicone, polyurethanes, polysulfides, and more, have undergone extensive research to improve

their properties, application methods, and environmental impact. Researchers have focused on several key areas:

- 1. Material Innovation: Recent advancements have included the development of bio-based and environmentally sustainable sealants. Traditional sealants are often derived from petroleum-based resources, contributing to environmental degradation. Researchers have been exploring renewable resources, such as bio-based polymers and natural rubber, to create sealants that perform effectively while reducing the ecological footprint [42].
- **Enhancement:** The Performance performance characteristics of sealants such as adhesion, elasticity, durability, and resistance to varying environmental conditions-remain a critical focus in sealant research. The use of nanoparticles to enhance mechanical properties and resistance to UV light and temperature variations has shown promising results. Additionally, formulations that enable better cohesion and adhesion to a wide range of substrates are being studied to expand the usability of sealants across different materials [43].
- 3. Application Technologies: application techniques, such as 3D printing and advanced dispensing systems, have transformed the sealant application process. These innovations not only improve the precision and efficiency of application but also contribute to the reduction of waste and material use. Moreover, research into mechanisms—such as light, heat, and moisture activation—has opened up new avenues for on-site application and performance enhancement [44].
- 4. Regulatory Compliance and Safety: With increasing environmental regulations and consumer demands for safe products, research has shifted towards evaluating the toxicological profiles of sealant components. Many manufacturers are now committed to producing low-VOC (volatile organic compounds) sealants that are safer for consumers and the environment. Research in this area is likely to yield formulations that maintain performance

while adhering to strict safety and regulatory standards [45].

### **Future Directions in Sealant Research**

As we look ahead, several promising directions for sealant research can be anticipated, which hold the potential to revolutionize the industry [46].

- 1. Smart Sealants: The integration of smart materials into sealant formulations could lead to the development of "smart sealants" can respond dynamically environmental stimuli. For instance, the creation of sealants that can change their properties in response to temperature, humidity, or mechanical stress would enhance their utility in diverse applications. These smart materials could help in self-healing properties, where the sealant can repair itself after cracking or damage, thereby extending its lifecycle and efficacy [47].
- 2. Nanotechnology and Advanced Materials: Future research is likely to see an increased incorporation of nanomaterials, such as carbon nanotubes and graphene, which have extraordinary mechanical, electrical, and thermal properties. The modulation of sealant properties at the nanoscale can offer novel solutions to current challenges and improve performance metrics significantly [47].
- 3. Interdisciplinary Approaches: The future of sealant research will likely benefit from interdisciplinary collaboration, merging insights from material science, chemistry, environmental science, and engineering. Such collaborative research initiatives can foster innovations that address not only the performance and applicability of sealants but also consider their life cycle, recyclability, and overall environmental impact [48].
- 4. **Sustainability**: As global sustainability goals become more prominent, research will increasingly focus on lifecycle assessments of sealants to evaluate their environmental impact from production to disposal. This could lead to innovations in biodegradable and recyclable sealants, reducing waste and the carbon footprint associated with sealants [49].

- 5. Market Demand and Application Expansion: The growing demand for sealants in sectors such as renewable energy, particularly in solar and wind technologies, presents an opportunity for tailored research. Sealants that can withstand extreme conditions while maintaining performance will be crucial for the longevity and reliability of these technologies [50].
- Global Collaboration Standardization: As markets become more globalized, there is a critical need for standardization in sealants, particularly in performance metrics. testing methodologies, environmental and compliance. Collaborative efforts across nations and industries can help establish uniform standards, ensuring that sealants meet global safety and performance criteria [51].

#### **Conclusion:**

In conclusion, the study underscores the significant role dental sealants play in the prevention of caries in children. Sealants offer an effective and efficient means of protecting vulnerable teeth from decay, particularly in the high-risk grooves and fissures of molars. The evidence presented highlights that children with sealants experience a substantially lower incidence of dental caries compared to those without, demonstrating the need for early intervention and preventive care in pediatric dentistry.

Furthermore, the findings point to the broader public health implications, suggesting that increased access to sealant programs can reduce the overall prevalence of dental disease, lower treatment costs, and improve the quality of life for children. To maximize the benefits of sealants, it is essential to focus on education and awareness initiatives that encourage their use among parents, caregivers, and healthcare providers. Continued research will be vital to explore optimal application techniques, long-term outcomes, and the integration of sealants into comprehensive oral health strategies, ensuring that all children have the opportunity for a decay-free future.

### **References:**

 Kaur P, Singh S, Mathur A, Makkar DK, Aggarwal VP, Batra M, et al. Impact of dental disorders and its influence on self-

- esteem levels among adolescents. J Clin Diagn Res. (2017) 11:ZC05–8.
- 2. Bukhari OM. Dental caries experience and oral health related quality of life in working adults. Saudi Dent J. (2020) 32:382–9.
- 3. Cueto EI. Adhesive sealing of pits and fissures for caries prevention, Dentistry and Dental Research, University of Rochester (1965).
- 4. Gizani S. Pit and fissure sealants. In: Bekes K, editors. Pit and fissure sealants. Cham: Springer International Publishing; (2018). p. 23–34.
- 5. Hyatt TP. Prophylactic odontotomy: the cutting into the tooth for the prevention of disease. Dent Regist. (1923) 77:196–228.
- Sanders BJ. Pit-and-Fissure sealants and preventive resin restorations. McDonald and Avery's dentistry for the child and adolescent: Tenth edition. St. Louis, MI: Elsevier; (2016). p. 177–84.
- 7. Worzakowska M. UV polymerization of methacrylates—preparation and properties of novel copolymers. Polymers (Basel). (2021) 13:1659.
- 8. McLean J, Wilson A. Fissure sealing and filling with an adhesive glass-ionomer cement. Br Dent J. (1974) 136:269–76.
- Yijie L, Ying W, Xiaonan W, Meng W, Xiulari Z, Wensheng R. Fissure morphology and caries prevalence in the first permanent molars of children in the Dalian development area. West China J Stomatol. (2013) 31:578–82.
- 10. Pitts NB, Zero DT, Marsh PD, Ekstrand K, Weintraub JA, Ramos-Gomez F, et al. Dental caries. (2017) 3(1):17030.
- 11. Passarelli PC, Pagnoni S, Piccirillo GB, Desantis V, Benegiamo M, Liguori A, et al. Reasons for tooth extractions and related risk factors in adult patients: a cohort study. Int J Environ Res Public Health. (2020) 17:2575.
- 12. Buonocore MG. A simple method of increasing the adhesion of acrylic filling materials to enamel surfaces. J Dent Res. (1955) 34:849–53.
- Kastenbom L, Falsen A, Larsson P, Sunnegardh-Gronberg K, Davidson T. Costs and health-related quality of life in relation to caries. BMC Oral Health. (2019) 19:187
- 14. Pratap B, Gupta RK, Bhardwaj B, Nag M. Resin based restorative dental materials:

- characteristics and future perspectives. Jpn Dent Sci Rev. (2019) 55:126–38.
- 15. Sánchez-Pérez L, Irigoyen-Camacho ME, Molina-Frechero N, Zepeda-Zepeda M. Fissure depth and caries incidence in first permanent molars: a five-year follow-up study in schoolchildren. Int J Environ Res Public Health. (2019) 16:3550.
- Yu OY, Lam WY, Wong AW, Duangthip D, Chu CH. Nonrestorative management of dental caries. Dent J (Basel). (2021) 9:121.
- 17. Basha S, Swamy HS. Dental caries experience, tooth surface distribution and associated factors in 6-and 13-year-old school children from Davangere, India. J Clin Exp Dent. (2012) 4:e210.
- 18. Council on dental materials devices, and council on dental therapeutics, pit and fissure sealants. The J Am Dent Assoc. (1971) 82:1101–3.
- 19. Buonocore M. Adhesive sealing of pits and fissures for caries prevention, with use of ultraviolet light. J Am Dent Assoc. (1970) 80:324–8.
- Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2019 (GBD 2019) Results, Institute for Health Metrics and Evaluation (IHME), Seattle, United States (2019).
- 21. Cogo E, Calura G. Clinical evaluation of two materials used as pit and fissure sealants: 2-year follow-up. International Journal of Clinical Dentistry 2009;2(4):241-7.
- 22. Siripokkapat K, Nakornchai S, Vichayanrat T. Comparison of giomer and fluoride releasing resin sealants in caries prevention among primary molars. South East Asian Journal of Tropical Medicine and Public Health 2018;49(3):527-36.
- 23. Hesse D, Bonifacio CC, Mendes FM, Braga MM, Imparato JC, Raggio DP. Sealing versus partial caries removal in primary molars: a randomized clinical trial. BMC Oral Health 2014;14:58.
- 24. Hotuman E, Rolling I, Poulsen S. Fissure sealants in a group of 3-4-year-old children. Internal Journal of Paediatric Dentistry 1998;8:159-60.
- 25. Maher MM, Elkshlan HI, El-Housseiny AA. Effectiveness of a self-etching adhesive on sealant retention in primary teeth. Pediatric Dentistry 2013;35:351-4.
- 26. Baca P, Bravo M, Baca AP, Jimenez A, Gonzalez-Rodriguez MP. Retention of three fissure sealants and a dentin bonding

- system used as fissure sealant in caries prevention: 12-month follow-up results. Medicina Oral Pathologia Oral Y Cirugia Bucal 2007;12:E459-63.
- 27. Unal M, Oznurhan F, Kapdan A, Durer A. A comparative clinical study of three fissure sealants on primary teeth: 24-month results. Journal of Clinical Pediatric Dentistry 2015;39:113-9.
- 28. Richardson BA, Smith DC, Hargreaves JA. Study of a fissure sealant in mentally retarded Canadian children. Community Dentistry and Oral Epidemiology 1977;5:220-6.
- 29. Chadwick BL, Treasure ET, Playle RA. A randomised controlled trial to determine the effectiveness of glass ionomer sealants in pre-school children. Caries Research 2005;39(1):34-40.
- 30. Joshi S, Sandhu M, Sogi S, Garg S, Dhindsa A. Split-mouth randomised clinical trial on the efficacy of GIC sealants on occlusal surfaces of primary second molar. Oral Health and Preventive Dentistry 2019;17:17-24.
- 31. Buonocore M. Adhesive sealing of pits and fissures for caries prevention with use of ultraviolet light. Journal of American Dental Association 1970;80:324.
- 32. Bakhshandeh A, Ekstrand K. Infiltration and sealing versus fluoride treatment of occlusal caries lesions in primary molar teeth. 2-3 years results. International Journal of Paediatric Dentistry 2015;25(1):43-50.
- 33. Chabadel C, Veronneau J, Montal S, Tramini P, Moulis E. Effectiveness of pit and fissure sealants on primary molars: a 2-yr split-mouth randomized clinical trial. European Journal of Oral Sciences 2021;129(1):e12758.
- 34. Dias KR, Andrade CB, Wait TT, Chamon R, Ammari MM, Soviero VM, et al. Efficacy of sealing occlusal caries with a flowable composite in primary molars: a 2-year randomized controlled clinical trial. Journal of Dentistry 2018;74:49-55.
- 35. Duggal MS, Tahnassebi JF, Toumba KJ, Mavromati C. The effect of different etching times on the retention of fissure sealants in second primary and first permanent molars. International Journal of Pediatric Dentistry 1997;7:81-6.
- 36. Regina P. Additional information required for Cochrane Review. Email to: P Ramamurthy 10 November 2019.
- 37. Luoma H, Meurman J, Helminen S, Heikkila H. Retention of fissure sealant with caries reduction in Finnish children

- after six months. Scandinavian Journal of Dental Research 1973;81:510-2.
- 38. Going RE, Conti AJ, Haugh LD, Grainger DA. Two-year clinical evaluation of a pit and fissure sealant. Part-II: caries initiation and progression. Journal of American Dental Association 1976;92:578-85.
- 39. Reddy VR, Chowdhary N, Mukunda KS, Kiran NK, Kavyarani BS, Pradeep MC. Retention of resin-based filled and unfilled pit and fissure sealants: a comparative clinical study. Contemp Clin Dent. (2015) 6:S18–23.
- 40. Kaga M, Kakuda S, Ida Y, Toshima H, Hashimoto M, Endo K, et al. Inhibition of enamel demineralization by buffering effect of S-PRG filler-containing dental sealant. Eur J Oral Sci. (2014) 122:78–83.
- 41. Bhat PK, Konde S, Raj SN, Kumar NC. Moisture-tolerant resin-based sealant: a boon. Contemp Clin Dent. (2013) 4:343–8.
- 42. Alharthy H, Elkhodary H, Nahdreen A, Al Tuwirqi A, Baghlaf K. Comparative evaluation of retention and cariostatic effect of hydrophilic and hydrophobic resin-based sealants: a systematic review and meta-analysis. Niger J Clin Pract. (2022) 25:861–84.
- 43. Faria M, Guedes A, Rompante P, Carvalho O, Silva F, Henriques B, et al. Wear pathways of tooth occlusal fissure sealants: an integrative review. Biotribology. (2021) 27:100190.
- 44. Ogawa Y, Sayed M, Hiraishi N, Al-Haj Husain N, Tagami J, Özcan M, et al. Effect of surface pre-reacted glass ionomer containing dental sealant on the inhibition

- of enamel demineralization. J Funct Biomater. (2022) 13:189.
- 45. Fontana M, Platt JA, Eckert GJ, González-Cabezas C, Yoder K, Zero DT, et al. Monitoring of sound and carious surfaces under sealants over 44 months. J Dent Res. (2014) 93:1070–5.
- 46. Ramamurthy P, Rath A, Sidhu P, Fernandes B, Nettem S, Fee PA, et al. Sealants for preventing dental caries in primary teeth. Cochrane Database Syst Rev. (2022) 2022(2):CD012981.
- Shahid S, Duminis T. 8—glass-ionomer Cement: chemistry and its applications in dentistry. In: Khurshid Z, Najeeb S, Zafar MS, Sefat F, editors. Advanced dental biomaterials. Woodhead Publishing; (2019). p. 175–95.
- 48. Kaga M, Kakuda S, Ida Y, Toshima H, Hashimoto M, Endo K, et al. Inhibition of enamel demineralization by buffering effect of S-PRG filler-containing dental sealant. Eur J Oral Sci. (2014) 122:78–83.
- 49. Bhatia MR, Patel AR, Shirol DD. Evaluation of two resin based fissure sealants: a comparative clinical study. J Indian Soc Pedodontics Prev Dent. (2012) 30:227–30.
- 50. Cagetti MG, Carta G, Cocco F, Sale S, Congiu G, Mura A, et al. Effect of fluoridated sealants on adjacent tooth surfaces: a 30-mo randomized clinical trial. J Dent Res. (2014) 93:59s–65s.
- 51. Ana ID, Anggraeni R. Development of bioactive resin modified glass ionomer cement for dental biomedical applications. Heliyon. (2021) 7:e05944.