# The Influence of Age and Gender on the Esthetic Preference for the Shape of Maxillary Anterior Teeth

HANIF ULLAH<sup>1</sup>, FARHAN RAEES<sup>2</sup>, MARYAM DIL<sup>3</sup>, ROZEENA FAROOQ<sup>4</sup>, HANZALA WAQAR<sup>5</sup>, MUHAMMAD HASEEBULLAH KHAN<sup>6</sup> <sup>1</sup>Senior Registrar, Sardar Begum Dental College, Gandhara University, Peshawar

<sup>2</sup>Senior Lecturer, Bacha khan college of Dentistry Mardan

<sup>3,6</sup>Demonstrators, <sup>5</sup>Lecturer, Khyber Medical University-Institute of Dental Sciences Kohat

<sup>4</sup>Dental Surgeon, RHC Shinkiari, Health Department KPK

Correspondence to Dr. Hanifullah, E-mail: hanfiwzr325@gmail.com, Cell: 0333-7072401,

# ABSTRACT

**Background:** An esthetic smile comes from various smile elements and requires knowing the complexities that control the equilibrium between teeth and soft tissues. In all dentistry areas, especially in prosthodontics and restorative dentistry, restoring a natural dental appearance has gained a lot of importance. This study's results will lead us to the popular esthetic choices for forming anterior maxillary teeth among Khyber Pakhtunkhwa patients

Aim: To determine the esthetic preference for the shape of maxillary anterior teeth.

Study design: Descriptive cross-sectional study.

Place and duration of study: Department of Prosthodontics, Sardar Begum Dental College & Hospital, Peshawar from 17<sup>th</sup> July 2021 to 17<sup>th</sup> January 2022.

**Methodology:** After taking the study's approval from the hospital ethical review committee board, 196 patients reporting to the Prosthodontics Department who fulfilled the inclusion criteria were invited to participate in the study. Patients were shown photograph displaying only maxillary teeth having three primary forms of five distinct incisor varieties, i.e., square (S), oval (O), triangular (T), and the two different maxillary teeth form: tapered-ovoid (TO) and square-tapering (ST).

**Results:** The frequency of esthetic preference, 55(28.1%) patients had square incisor 'S', 23(11.7%) patients had ovoid incisors 'O', 44(22.4%) had triangular incisors 'T', 34(17.3%) patients had square tapered 'ST' while 40(20.4%) patients had tapered ovoid 'TO' esthetic preference.

**Practical Implication:** Dentists preferred square-round incisors. In the study, there are some lay people does not discriminate between incisors shape for women. Dentists preferred square-round incisors. In the study, there are some lay people does not discriminate between incisors shape for women.

**Conclusion:** Female patients of younger age group were affected by their esthetic perception of the shapes of the maxillary anterior teeth as compared to the male patients of the same group and most of the patients had square incisor 'S' as their choice of esthetic preference.

Key words: Esthetic smile, Esthetic preference, Maxillary anterior teeth

# INTRODUCTION

An esthetic smile comes from various smile elements and requires knowing the complexities that control the equilibrium between teeth and soft tissues.<sup>1</sup> In all dentistry areas, especially in prosthodontics and restorative dentistry, restoring a natural dental appearance has gained a lot of importance. Therefore, dental practitioners should always be prepared to meet the architectural specifications and rising expectations of their patients.<sup>2</sup> In human livelihoods, esthetics are important. Facial appearance has a significant impact on personal beauty and personality as it affects wellbeing and reverberates in social, intuitive, and professional relationships.3 Patients in almost every procedure demand Functions, utility and esthetics. Restoring/maintaining position is considered essential in any restorative dentistry treatment, but any treatment's esthetic aspects should never forget the esthetic part.<sup>4</sup> Many factors influence an attractive smile as tooth color, position, shape, arrangement, and the teeth orientation, especially of the anterior maxillary teeth. The upper anterior teeth form based on three shapes: square, ovoid, and wedge-shaped. This specific arrangement of teeth enabled individuality and variety. The formation and the size of the tooth are genetically pre-determined during the process of embryogenesis.<sup>5</sup> The concept of beauty is actually in the subject's eye. The patients' background and social atmosphere determine their choice for smile esthetics rather than dentists or orthodontists' views<sup>6</sup>.

The aesthetic assessment is also considerably impacted by education, social status, and cultural differences.<sup>1</sup>Another similar study where tooth form compared to an artistic smile, orthodontists favored round and square-round incisors in women, whereas general dentists favored square- round incisors. Lay people did not

Received on 12-01-2023 Accepted on 27-05-2023 differentiate between incisor forms for women, but in comparison to the orthodontists, they recommended square-round and square-square incisor patterns.<sup>3</sup> In another evaluation of dental appearance between dentists, technicians, and patients showed that triangular tooth shape for both gender was the least preferred although the ovoid tooth form for female patients and the rectangular tooth form for the male patients were preferred amongst all the three groups.<sup>7</sup>

The purpose of the study was to determine the esthetic preference for the shape of maxillary anterior teeth among patients reporting to the Prosthodontics Department at Sardar Begum Dental College and Hospital, Peshawar.

## MATERIALS AND METHODS

It was a descriptive cross sectional carried out at the department of Prosthodontics, Sardar Begum Dental College and Hospital, Peshawar from 17<sup>th</sup> July 2021 to 17<sup>th</sup> January 2022 after approval by the IRB of the institution. The sample size was 196, keeping 50%" true population having shape preference of taper ovoid (TO) with 7% margin of error at 95% of confidence level. The relatively higher margin of error is using because of feasibility concerns. The adult male and female patients in the age range of 20-50 years, patients having no history of any visual impairment and patients who were willing and ready to give consent were included in the study while those patients having any mental disability that affects decision making were excluded.

After taking the study's approval from the hospital ethical review committee Board, patients reporting to the Prosthodontics department who fulfilled the inclusion criteria were invited to participate in the study. After explaining the purpose, procedures, risks, and benefits of the study to participants, written informed consent taken in the study. We assured them of maintaining the confidentiality of the data collected. We showed a photograph displaying only maxillary teeth having three primary forms of five distinct incisor varieties, i.e., square (S), oval (O), triangular (T), and the two different maxillary teeth form: tapered-ovoid (TO) and square- tapering (ST). Using the upper anterior teeth, we reduce the number of ambiguous parameters in the pictures and exclude other facial features, lip, tongue, or mandibular teeth. Participants chose the images (1 for the most appealing and 5 for the least appealing) by looking at them from a conversational distance of 3 feet, utilizing natural daylight in the ward. To determine consistency, the participants repeated the study after 60 minutes as a washout period to preclude recalled effects altering the findings.

The data was entered and analyzed through SPSS-24. Effect modifiers such age, gender, education and socioeconomic status was controlled through stratification. Post stratification Chi-square test was performed keeping p value  $\leq 0.05$  as significant.

#### RESULTS

There were 127(64.8%) patients were between 20-35 years while 69(35.2%) patients between 36-50 years with mean age was  $32.55\pm7.42$  years. Eighty (44.9%) were males and 108(55.1%) were female patients. Eighty nine (45.4%) patients had poor; 84(42.9%) patients had middle while 23 (11.7%) patients had high socioeconomic status (Table 1). As per esthetic preference, 55 (28.1%) patients had square incisor 'S', 23(11.7%) patients had ovoid incisors 'O', 44 (22.4%) had triangular incisors 'T', 34(17.3%) patients had square tapered 'ST' while 40(20.4%) patients had tapered ovoid 'TO' esthetic preference (Table 2). Eighteen (9.2%) patients were middle, 34(17.3%) patients were secondary, 32(16.3%) patients were matric, 34(17.3%) patients were

Table 4: Stratification of esthetic preference with age

bachelors while 35 (17.9%) patients were having master's qualification (Table 3). Esthetic preference was stratified with age, gender and educational in Tables 4-6.

|--|

Variable	No.	%				
Gender						
Male	88	44.9				
Female	108	51.1				
Age (years)						
20-35	127	64.8				
36-50	69	35.2				
Socioeconomic status						
Poor	89	45.4				
Middle	84	42.9				
High	23	11.7				

Table 2: Frequency for esthetic preference (n=196)

Esthetic Preference	No.	%
Square Incisors 'S'	55	28.1
Ovoid Incisors 'O'	23	11.7
Triangular Incisors 'T'	44	22.4
Square Tapered 'ST'	34	17.3
Tapered Ovoid 'TO'	40	20.4

Table 3: Frequency of educational status (n=196)

Education status	No.	%
Illiterate	18	9.2
Primary	16	8.2
Middle	27	13.8
Secondary	34	17.3
Matric	32	16.3
Bachelors	34	17.3
Masters	35	17.9

Esthetic preference	Age	(years)	Total	P value	
	20-35	36-50	Total		
Square Incisors 'S'	34 (26.8%)	21 (30.4%)	55 (28.1%	0.585	
Ovoid Incisors 'O'	15 (11.8%)	8 (11.6%)	23 (11.7%)	0.010	
Triangular Incisors 'T'	30 (23.6%)	14 (20.3%)	44 (22.4%)	0.593	
Square Tapered 'ST'	22 (17.3%)	12 (17.4%)	34 (17.3%)	0.990	
Tapered Ovoid 'TO'	26 (20.5%)	14 (20.3%)	40 (20.4%)	0.975	

Table 5: Stratification of esthetic preference with gender

Esthetic preference	Ge	ender	Tatal	P value	
	Male	Female	Total		
Square Incisors 'S'	29 (33%)	26 (24.1%)	55 (28.1%)	0.168	
Ovoid Incisors 'O'	9 (10.2%)	14 (13%)	23 (11.7%)	0.553	
Triangular Incisors 'T'	20 (22.7%)	24 (22.2%)	44 (22.4%)	0.932	
Square Tapered 'ST'	17 (19.3%)	17 (15.7%)	34 (17.3%)	0.510	
Tapered Ovoid 'TO'	13 (14.8%)	27 (25%)	40 (20.4%)	0.077.	

Table 6: Stratification of esthetic preference with educational status

Esthatic proforance	Educational status					Total	<b>B</b> value		
Estiletic preference	Illiterate	Primary	Middle	Secondary	Matric	Bachelors	Masters	TOLAI	r value
Square Incisors 'S'	4 (22.2%)	5 (31.3%)	7 (25.9%)	9 (26.5%)	7 (21.9%)	9 (26.5%)	14 (40%)	55 (28.1%)	0.231
Ovoid Incisors 'O'	3 (16.7%)	2 (12.5%)	5 (18.5%)	-	4 (12.5%)	4 (11.8%)	5 (14.3%)	23 (11.7%)	0.532
Triangular Incisors 'T'	4 (22.2%)	3 (18.8%)	7 (25.9%)	7 (20.6%)	8 (25%)	8 (23.5%)	7 (20%)	44 (22.4%)	0.421
Square Tapered 'ST'	4 (22.2%)	3 (18.8%)	3 (11.1%)	7 (20.6%)	7 (21.9%)	6 (17.6%)	4 (11.4%)	34 (17.3%)	0.245
Tapered Ovoid 'TO'	3 (16.7%)	3 (18.8%)	5 (18.5%)	11(32.4%)	6 (18.8%)	7 (20.6%)	5 (14.3%)	40 (20.4%)	0.782

## DISCUSSION

An esthetic smile comes from various smile elements and requires knowing the complexities that control the equilibrium between teeth and soft tissues.<sup>1</sup>in all dentistry areas, especially in prosthodontics and restorative dentistry, restoring a natural dental appearance has gained a lot of importance. Therefore, dental practitioners should always be prepared to meet the architectural specifications and rising expectations of their patients<sup>2</sup>. In human livelihoods, esthetics are important. Facial appearance has a significant impact on personal beauty and personality as it affects wellbeing and reverberates in social, intuitive, and professional relationships<sup>3</sup>.

Patients in almost every procedure demand functions, utility and esthetics. Restoring/maintaining position is considered essential in any restorative dentistry treatment, but any treatment's esthetic aspects should never forget the esthetic part<sup>4</sup>. In the current study, mean age was 32.55±7.42 years. Eighty eight (44.9%) were male patients and 108(55.1%) female patients. 127(64.8%) patients between 20-35 years while 69(35.2%) patients between 36-50 years, most of the peoples belonging to lower class 89(45.4%), middle class 84(42.9%) and high 23(11.7%). The results were consistent with Zoric<sup>2</sup> and Alvarez-Alvarez<sup>4</sup>. The frequency of Square Incisors 'S' were 55(28.1%), while the Ovoid Incisors 'O' were the least preferred one 23 (11.7%) while this was opposite to

a study conducted in Brazil where the most pleasing shape was ovoid<sup>8</sup>. This study showed that Illiterate were 18(9.2%), Bachelors 34(17.3%), and those having Masters degree were 35(17.9%) in a similar an orthodontist, general dentist and lay people took part in study<sup>9</sup>.

In the current study, participant who mostly preferred square incisors 'S' 34(26.8%) while ovoid incisors 'O' the least preferred with frequency of 15(11.8%) were in the age group of 20-35 years. While individuals whose age were in between 36-50 years preferred square incisor 'S' 21(30.4%), a similar study conducted by someone where the younger patients had a preference for white teeth over older patients<sup>10</sup> while in a study where the mean age were 16 years and 6 months ovoid (47.06\%), square (31.37\%) and triangular (21.57\%)<sup>7</sup>.

This study also showed that gender preferences assessed 33% people preferred square incisors 'S' where as overall 108 people say there is no gender preferences found. Our study in accordance with another study where it showed that gender had an impact on the assessment of maxillary teeth and restorations, women were less satisfied with it than men<sup>11</sup>. Many other studies showed the same results<sup>12</sup> some of them showed that women were reported to be more sensitive to the appearance of the teeth than men, and the importance of teeth decreased with ageing.<sup>13</sup> The esthetic preferences of illiterate and educated people were assessed where the majority people preferred square incisors 'S' (28.1%) followed by triangular incisors (22.4%) while ovoid incisors O' were least preferred (11.7%). Most of the participants were holding bachelor and master degree, while in a study where patients with a low level of education favoured white teeth more than patients with a high level of education<sup>14</sup>. In a previous similar studies<sup>11,15</sup>, orthodontists preferred round and square-round incisors in women, while general dentists preferred square-round incisors. Medical resources, diagnosis and treatment must improve in developing countries. There are limited resources: access to medical and health resources; knowledge about disease; awareness, trainings, and awareness about health. The heath literacy is mandatory for any disease and facilitates the patients with resources, databases, and trainings about disease<sup>15-22</sup>

Dentists preferred square-round incisors. In the study, there are some lay people does not discriminate between incisors shape for women. For men, unlike orthodontists they preferred squareround and square incisor shapes.

# CONCLUSION

Female patients of younger age group were affected by the esthetic perception of shapes of the maxillary anterior teeth as compared to the male patients of the same group and most of the patients had square incisor 'S' as their choice of esthetic preference.

## Conflict of interest: Nil

### REFERENCES

- McLeod C, Fields H, Hechter F, Wiltshire W, RodyJr W, Christensen J. Esthetics and smile characteristics evaluated by laypersons: a comparison of Canadian and US data. Angle Orthod 2011;81:198-205.
- Zoric EK, Zagar M, Zlataric DK. Influence of gender on the patient's assessment of restorations on the upper anterior teeth. Actastomatological Croatica 2014;48:33-41.

- deCoutoNascimento V, de Castro Ferreira Conti AC, de Almeida Cardoso M, Valarelli DP, de Almeida-Pedrin RR. Impact of orthodontic treatment on self-esteem and quality of life of adult patients requiring oral rehabilitation. Angle Orthod 2016;86:839-45.
- Alvarez-Alvarez L, Orozco-Varo A, Arroyo-Cruz G, Jimenez-Castellanos E. Width/length ratio in anterior maxillary teeth: comparative study of esthetic preferences among professionals and laypersons. J Prosthodont 2019;28:416-20.
- Botross BM, Elmahallawi OSE-d, Ezz El-Arab AM. Efficacy of gender on the width-length ratio of anterior maxillary teeth in an Egyptian population and establishing a guideline for an esthetical accepted rate of teeth dimensions to gingival display. J Adv Dent Res 2019;1:1-10.
- Smid J, Rowland J, Young W, Coschigano K, Kopchick J, Waters M. Mouse molar dentin size/shape is dependent on growth hormone status. J dent Res 2007;86:463-8.
- Frush, JP, Fisher RD. Introduction to dentogenic restorations. J Prosthet Dent 1955;5:586-90.
- Paranhos LR, Jóias RP, Velasco LG, Bérzin F, Júnior ED. Prevalence of the different maxillary central incisor shapes in individuals with natural normal occlusion. Brazilian J Oral Sci 2010; 9(2): 104-7.
- Sriphadungporn C, Chamnannidiadha N. Perception of smile esthetics by laypeople of different ages. Prog Orthod 2017;18:1-8.
- Anderson KM, Behrents RG, McKinney T, Buschang PH. Tooth shape preferences in an esthetic smile. Am J Orthod Dentofacial Orthop 2005;128:458-65.
- Carlsson GE, Wagner I-V, Ödman P, Ekstrand K, MacEntee M, Marinello C, et al. An international comparative multicenter study of assessment of dental appearance using computer-aided image manipulation. Int J Prosthodont 1998;11.
- 12. Brisman AS. Esthetics: a comparison of dentists' and patients' concepts. J Am Dent Assoc 1980; 100:345-52.
- Hussain A, Louca C, Leung A, Sharma P. The influence of varying maxillary incisor shape on perceived smile aesthetics. J Dent 2016;50:12-20.
- Ghani F, Chughtai MA, Shah SA. Biochemically assessed oral Candida in denture and non-denture wearers' pathological activity. J Postgrad Med Inst 2011;13:25-3.
- 15. Wright JT. Normal formation and development defects of the human dentition. Pediatr Clin North Am 2000; 47(5):975-1000.
- Jabeen M, Shahjahan M, Farid G. Information Dissemination during COVID-19 Pandemic among Postgraduate Allied Health Sciences Students in Pakistan. Pakistan Journal of Medical & Health Sciences. 2022;16(11):366-.
- Shahjahan M, Jabeen M, Farid G. Information Providing in COVID-19 by Health Professionals in Pakistan. Pakistan Journal of Medical & Health Sciences. 2022 Dec 12;16(10):641-.
- Farid G, Zaheer S, Khalid A, Arshad A, Kamran M. Evaluating Medical College Lib Guides: A Usability Case Study. Pakistan Journal of Medical & Health Sciences. 2022 Aug 26;16(07):461-
- Farid G, Niazi Ak, Muneeb M, Iftikhar S. Attitude towards Utilization of e-Resources of Medical Images among Health Care Professionals. Pakistan Journal of Medical and Health Science. 2021 Sep 15 (9);261-263
- Farid G, Iqbal S, Iftikhar S. Accessibility, Usage, and Behavioral Intention of Print Books and eBooks by Medical Students. Library Philosophy and Practice. 2021:1-25.
- Farid G, Abiodullah M, Ramzan M. A comparative study of information seeking behaviors of medical faculty working in government and private run medical colleges. International Journal of Information Management Science. 2013;2(1):17-24.
- Shahbaz T, Farid G, Asghar RS, Rashid A. Hepatitis B and C: knowledge, attitude and behavior of health care workers at rlmc and affiliated hospitals (AMTH & HLH). The Professional Medical Journal. 2015 Nov 10;22(11):1383-9.