

Review Article

The Relationship between Selfies and Orthodontics - A Narrative Review

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Abstract

The impact of selfies on adolescents serves a great deal in affecting their self esteem and quality of life. Selfies allow the individual to closely scrutinize and criticize themselves everyday by dint of their imperfections. The need for orthodontic treatment may arise from this scrutiny which is aided by comments and remarks by peers or on social networking websites.

Key words- Selfie, self esteem, adolescents, social media, phone cameras, malocclusion, orthodontic treatment.

Introduction

The Oxford dictionary defines selfie as "a photograph taken by someone, usually using a smartphone or webcam, and posted on a social media site." Clicking and posting selfies is ubiquitous in everyday life. With the advent of smartphones and various social platforms, this has become commonplace. The way we connect and collaborate in the workplace and civil society may change. Whether the effects of increased media use are beneficial to individuals or society is debatable. It transcends boundaries of time, space and social context, enabling unprecedented communication, social and societal development.

Studies and Reviews

Selfies, a mental disorder, have been confirmed by the American Psychiatric Association (APA) in 2014, as they are often used to fill gaps in intimacy and create a sense of self-esteem. Selfies can create privacy risks, cause addiction, damage relationships, and place too much emphasis on physical appearance. In 2015, 127 people died and many were injured while trying to click selfies, with 76 being Indians.

Self-esteem plays a significant role in a patient's decision to seek orthodontic treatment, even in cases of clear medical necessity. The motivation to improve aesthetics is clearly psychosocial, and the motivation to improve aesthetics is clearly of a psychosocial origin. Dental malocclusion or malaligned teeth affect a person's self-esteem and has social and psychological consequences. Studies show that adolescents with low self-esteem

Dr. M. Ravi Teja. (2024). The Relationship between Selfies and Orthodontics - A Narrative Review. *MAR Dental* Sciences and Oral Rehabilitation (2024) 5:5 are more likely to develop depression and other mental health problems. People with crooked teeth often become embarrassed about their smile in social situations, leading to psycho-social dysfunction and social isolation.

The number of patients seeking orthodontic treatment has risen substantially in recent years, possibly due to an increase in the prevalence of malocclusion or an increase in felt need or self awareness. Previous studies have observed that orthodontic treatments have increased due to the frequency in the incidence and prevalence of malocclusions, which in turn may influence the self-esteem of the patient. The preventive outlook of modern dentistry, increased access to information, technological advances of orthodontics, and psychosocial variations justify the increase in demand for orthodontic treatment in adults.

In modern days, there has been a significant decrease in perception of body image leading to increased sociocultural pressure and body dissatisfaction, and a decrease in self-esteem and quality of life. Refinement of oral health and psychosocial well-being are recognized benefits of orthodontic treatment, and patients' expectations from orthodontics include improved aesthetics, self-image, and social functioning. Research shows that individuals who are satisfied with their physical appearance are seen to be more outgoing and successful in establishing social contact.

Orthodontic treatments for aesthetic reasons occupy a great place in current dentistry, where adolescents and adults wish to have a smile aesthetically accepted by them or their social circle. Children with visible malocclusion were likely to be socially and psychologically disadvantaged. Evidence supporting the assumption that orthodontic treatment leads to higher self-esteem or lack of treatment can lead to low self-esteem in adulthood appears coherent.

For many years, parents of early adolescent children would bring them to an orthodontist when they realized their child's teeth were crooked or the face looked different than that of other kids. However, early adolescents seeking orthodontic treatment were often pushed by negative remarks from peers or other social groups regarding their dentition or facial profile, which could further lead to inferiority complex, low self-esteem, and psychosocial issues.

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The past decade has seen significant development in the form of smartphones with built-in high resolution cameras, contributing to self-assessment and self-observation, leading many people towards corrective cosmetic enhancement of their face and teeth.

Smartphones have revolutionized the way people take photographs, allowing them to capture the imperfections in their facial and dental profiles. This has led to a greater awareness of imperfections and potential for orthodontic treatment. However, people with crooked teeth often avoid posting selfies on social media or with a closed mouth to avoid social backlash, resulting in a manifestation of social sensitivity. Social sensitivity is the personal ability to perceive, understand, and respect the feelings and viewpoints of others. It is defined as an individual's heightened concern for other people's judgments and reactions to themselves. Studies have shown that high social sensitivity leads to a sensitive response to social signals such as eye gaze, vocal tone, and body language. In social media, posts and comments have been seen to heighten social sensitivity, as studies have shown that people with crooked teeth may avoid posting selfies or post with a closed mouth to avoid social backlash.

Statistics

In a survey done by Statista Research Department in the year 2019, over 93 million selfies were posted on a daily basis.³ We can only imagine how much this number would have risen in the past 2 years. According to a research published by Statista Research Department in the year 2021, 82% of U.S. adults ages between 18-34 years had posted selfies on social media at somepoint in their life. As of 2021, Facebook is the largest social media platform globally with 2.85 billion monthly active users worldwide. The country with the most Facebook users is India with over 340 million active users, followed by the US (200 million), Indonesia (140 million), Brazil (130 million), and Mexico (98 million).⁴

Conclusion

In the virtual reality world, selfies are increasingly being used as a self-assessment tool and influencing psychosocial behavior. However, further research is needed to determine if this is due to low self-esteem or psychosocial behavior. Additionally, it is crucial to validate whether selfies are becoming a tool for teens to promote orthodontic treatment.

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Reference

1. Shin Y, Kim M, Im C, Chong SC. Selfie and self: The effect of selfies on self-esteem and social sensitivity. Personality and Individual Differences. 2017 Jun 1;111:139-45.

2. Wang R, Yang F, Haigh MM. Let me take a selfie: Exploring the psychological effects of posting and viewing selfies and groupies on social media. Telematics and Informatics. 2017 Jul 1;34(4):274-83.

3. https://www.statista.com/statistics/730315/instagram-stories-dau/ Accessed on- 23-12-2021

4.https://www.statista.com/statistics/268136/top-15-countries-based-on-number-of-facebook-users/ Accessed on- 01-12-2021

5.https://adobochronicles.com/2014/03/31/american-psychiatric-association-makes-it-official-selfie-amental-disorder/ Accessed on- 27-12-2021

6. Khalid N, Ahmed B, Gameraddin M, Yousef M. International Journal of Science and Research (IJSR) ISSN (Online): 2319-7064 Index Copernicus Value (2013): 6.14| Impact Factor (2015): 6.391 Volume 5 Issue 4, April 2016 www. ijsr. net Licensed Under Creative Commons Attribution CC BY.

7. https://www.washingtonpost.com/news/worldviews/wp/2016/11/16/more-people-died-taking-selfies-inindia-than-anywhere-in-world-study-says-way-more/ Accessed on- 22-11-2021

8. Kragt L, Wolvius EB, Jaddoe VW, Tiemeier H, Ongkosuwito EM. Influence of self-esteem on perceived orthodontic treatment need and oral health-related quality of life in children: the Generation R Study. European journal of orthodontics. 2018 May 25;40(3):254-61.

9. de Oliveira WA. Quality of life, facial appearance and self-esteem in patients with orthodontic treatment. Revista Mexicana de Ortodoncia. 2017 Aug 21;5(3):138-9.

10. Gazit-Rappaport T, Haisraeli-Shalish M, Gazit E. Psychosocial reward of orthodontic treatment in adult patients. The European Journal of Orthodontics. 2010 Aug 1;32(4):441-6.

11. Montiel-Company JM, Bellot-Arcís C, Almerich-Silla JM. Validation of the psychosocial impact of dental aesthetics questionnaire (Pidaq) in Spanish adolescents. Medicina oral, patologia oral y cirugia bucal. 2013 Jan;18(1):e168.

12. Dimberg L, Arnrup K, Bondemark L. The impact of malocclusion on the quality of life among children and adolescents: a systematic review of quantitative studies. European journal of orthodontics. 2015 Jun 1;37(3):238-47.

13. Rosenberg M. Rosenberg self-esteem scale (RSE). Acceptance and commitment therapy. Measures package. 1965;61(52):18.

14. Klages U, Claus N, Wehrbein H, Zentner A. Development of a questionnaire for assessment of the

Dr. M. Ravi Teja. (2024). The Relationship between Selfies and Orthodontics - A Narrative Review. MAR Dental Sciences and Oral Rehabilitation (2024) 5:5

psychosocial impact of dental aesthetics in young adults. The European Journal of Orthodontics. 2006 Apr 1;28(2):103-11.

15. Turpin DL. Orthodontic treatment and self-esteem. American Journal of Orthodontics and Dentofacial Orthopedics. 2007 May 1;131(5):571-2

16. Shaw WC, Richmond S, Kenealy PM, Kingdon A, Worthington H. A 20-year cohort study of health gain from orthodontic treatment: psychological outcome. American Journal of Orthodontics and Dentofacial Orthopedics. 2007 Aug 1;132(2):146-57.

17. Neeley II WW, Gonzales DA. Obesity in adolescence: implications in orthodontic treatment. American Journal of Orthodontics and Dentofacial Orthopedics. 2007 May 1;131(5):581-8.

18. de Couto Nascimento 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. The Angle Orthodontist. 2016 Sep;86(5):839-45.

19. https://www.statista.com/statistics/263437/global-smartphone-sales-to-end-users-since-2007/ Accessed on- 23-12-2021

20. Meier EP, Gray J. Facebook photo activity associated with body image disturbance in adolescent girls. Cyberpsychology, Behavior, and Social Networking. 2014 Apr 1;17(4):199-206.

21. Bennett M E, Michaels C, Very, D, O'Brien K, Weyant R J, Vig K W L 1995Psychometric considerations in the assessment of orthodontic treatment expectations. In: Trotman C A, McNamara Jr J A (eds.) Orthodontic treatment: outcome and effectiveness. Monograph No. 30, Craniofacial Growth Series, Center for Human Growth and Development, University of Michigan, Ann Arbor, pp. 345–357

22. Pietilä T, Pietilä I 1996 Dental appearance and orthodontic services assessed by 15–16-year-old adolescents in Eastern Finland. Community Dental Health13: 139–144

23. Cash T F, Fleming E C 2002 Body image issues and social relations. In: Cash T F (ed.) Body image: a handbook of theory, research, and clinical practice. Guilford, New York, pp. 277–286

24. O'Brien K, Kay L, Fox D, Mandall N 1998 Assessing oral health outcomes for orthodontics – measuring health status and quality of life. Community Dental Health15: 22–36

25. Giddon D B 1995Orthodontic applications of psychological and perceptual studies of facial esthetics. Seminars in Orthodontics1: 82–93

26. Shin Y, Kim M, Im C, Chong SC. Selfie and self: The effect of selfies on self-esteem and social sensitivity. Personality and Individual Differences. 2017 Jun 1;111:139-45.

Dr. M. Ravi Teja. (2024). The Relationship between Selfies and Orthodontics - A Narrative Review. MAR Dental Sciences and Oral Rehabilitation (2024) 5:5

27. Barry CT, McDougall KH, Anderson AC, Perkins MD, Lee-Rowland LM, Bender I, Charles NE. 'Check Your Selfie before You Wreck Your Selfie': Personality ratings of Instagram users as a function of self-image posts. Journal of Research in Personality. 2019 Oct 1;82:103843.

28. Kenealy PM, Kingdon A, Richmond S, Shaw WC. The Cardiff dental study: a 20-year critical evaluation of the psychological health gain from orthodontic treatment. British journal of health psychology. 2007 Feb;12(1):17-49.

