7. EXPECTED OUTCOMES:

1. The level of psychological adjustment in relation to facial appearance in patients with craniofacial anomalies.

2. The level of the psychological impact of dental esthetics on patients with craniofacial anomalies.

3. The level of expectations from orthodontic treatment in patients with craniofacial anomalies reporting for orthodontic treatment.

8. SCOPE OF THE STUDY:

This study has important clinical and academic implications because the psychological evaluation in patients with craniofacial anomalies seeking treatment has received little research attention. Despite this, psychological factors important because they represent a broader prospective and hidden factors that may be a psychological disorder which itself needs treatment and it is very necessary to assess these factors otherwise any treatment will be failure. The important long-term outcome in the treatment of children with craniofacial anomalies is a functionally habilitated young adult with acceptable speech, appearance, mastication, and educational attainment, who is psychologically well adjusted.

9. UTILITY OF THE STUDY:

Since only a few of treatment teams worldwide performs psychological assessment for patients, it is likely that the prevalence of psychological problems is higher than the literature suggests. To maximize the chances of a positive outcome in the care of individuals with craniofacial
anomalies, patients who are concerned about appearance or who have experienced psychosocial problems must be identified by the treatment team. Interventions such as counseling or social interaction skills training should be offered so that the patient’s self-esteem and social self-confidence can be improved. In addition to the influence of family dynamics, educational, and vocational factors on the social development and rehabilitation of patients with congenital and craniofacial defects, psychological problems are also experienced by these individuals. Correcting the physical deformities with a multispecialty treatment is critical. However, psychological evaluation and treatment is an integral part of the overall rehabilitation as well.

10. LIMITATIONS:

There are a few limitations because of the rarity of such conditions, the sample size for each condition individually will be very small and some conditions are very rare, so if sufficient numbers are not found in any particular group, all these conditions will be combined under one heading so as to increase the significance level, although craniofacial anomalies may have quite variable effects as other functional variables may come into picture which may affect the psychological adjustments of the patients.