





## Experiences of community outreach through social dentistry in Concepción- Paraguay

Experiencias de vinculación con la comunidad a través de la odontología social, en Concepción - Paraguay

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### ABSTRACT

Social dentistry encompasses social, economic and cultural factors involved in the oral health of individuals and communities, in order to establish the best joint strategies and find efficient and effective solutions to health problems, in this case oral health problems. Paraguay is a country with a fragmented health system, with scarce sanitary capacity, essentially those related to social health, where the oral health situation is not alien to this problem. It is important to consider that dental health includes the ability to bite, chew, smile, speak, communicate and transmit emotions through facial expressions that strengthen self-esteem; however, these abilities are a problem that mainly affects the rural population of the country. Objective: To present the experiences of linkage with the community through social dentistry - Department of Concepción.

A descriptive, secondary source, quantitative study, based on the report on the care provided to a population focused on 450 people who attended voluntarily, called through social networks, belonging to early and secondary education institutions, community centers, geriatric homes and other social actors in rural communities in the Department of Concepción, It was proposed to apply one dental treatment per person (child or adult), and to install educational technologies that make it possible to intervene assertively through lectures and interactive demonstrations on the challenges underlying oral health problems in the social and economic context of the community through the exchange between Spanish and Paraguayan professionals.

The project generated a positive impact on the academic population and on patients, since on the one hand the

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### Conflict of interest:

The authors declare no conflict of interest.

### Ethical Considerations

We declare that in the implementation of this project all ethical principles were applied based on the Belmont report.

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objectives of carrying out educational campaigns in schools, community centers, geriatric homes and rural communities of the Department of Concepción de Paraguay were met, with educational actions on oral health, talks on oral hygiene, proper nutrition for dental health, dental care habits, etc., as well as dental care for the restoration of important dental pieces, as well as dental care for the restoration of important dental pieces, but also technological transfers were developed in relation to the social dentistry strategies promoted through this project that linked the Universities of Seville - Luis Séiquer Social Dentistry Foundation - Spain, with the National University of Asunción and the National University of Concepción in the Department of Concepción, Paraguay. It can be affirmed that the social dentistry proposal developed in the community was an opportunity for access to highly complex dental services, as well as for the approach focused on the prevention and treatment of dental diseases in the context of the needs and realities of vulnerable groups.

**Keywords:** social participation, community participation, community-institution relations.

## RESUMEN

La odontología social abarca factores sociales, económicos y culturales que intervienen en la salud bucodental de las personas y comunidades, a fin de establecer las mejores estrategias conjuntas, encontrar soluciones eficientes y efectivas a los problemas sanitarios, en este caso bucodentales. Paraguay es un país con un sistema de salud fragmentado, con escasa capacidad sanitaria, esencialmente las que están relacionadas con la salud social, donde la situación de la salud bucodental no se encuentra ajena a esta problemática. Es importante considerar que la salud dental comprende la capacidad de morder, masticar, sonreír, hablar, comunicar y transmitir emociones, a través de las expresiones faciales que fortalecen la autoestima; sin embargo, estas capacidades se constituyen en un problema que afecta principalmente a la población rural del país. Objetivo presentar las experiencias de vinculación con la comunidad a través de la odontología social - Departamento de Concepción. Estudio descriptivo, de fuente secundaria, cuantitativo, a partir del informe de atención a una población enfocada en 450 personas que asistieron voluntariamente, convocados a través de redes sociales, pertenecientes a instituciones de educación inicial y media, centros comunitarios, hogares geriátricos y otros actores sociales de comunidades rurales del Departamento de Concepción, a quienes se propuso aplicar un tratamiento dental por persona (niño o adulto), e instalar tecnologías educativas que posibiliten intervenir asertivamente por medio de charlas y demostraciones interactivas los desafíos subyacentes con los problemas de salud bucal en el contexto social y económico de la comunidad a través del intercambio entre los profesionales españoles y paraguayos. El proyecto generó impacto positivo en la población académica y en los pacientes, ya que por un lado se cumplieron los objetivos de realizar campañas educativas en escuelas, centros comunitarios, hogares geriátricos y comunidades rurales del Departamento de Concepción de Paraguay, con acciones educativas de salud bucal, charlas de higiene bucal, nutrición adecuada para la salud dental, hábitos del cuidado dental, como así también atención odontológica de restauración de piezas dentales importantes, pero además se desarrollaron transferencias tecnológicas referentes a las estrategias de odontología social propiciada a través de este proyecto que vinculó a las Universidades de Sevilla - Fundación Odontología Social Luis Séiquer - España, con la Nacional de Asunción y Nacional de Concepción en el Departamento de Concepción de Paraguay. Se puede afirmar que la propuesta de odontología social desarrollada en la comunidad fue una oportunidad de acceso a los servicios dentales de alta complejidad, así como por el enfoque centrado en la prevención y tratamiento de las enfermedades dentales en el contexto de las necesidades y realidades de las agrupaciones vulnerables.

**Palabras clave:** participación social, participación de la comunidad, relaciones comunidad-institución.

## INTRODUCTION

Social dentistry is an academic activity carried out in communities, where students are participants in the process of awareness and social projection. The Specialized Dental Assisting Technician Program guarantees the professional training of auxiliary support personnel in dentistry (Castaño Seiquer & Ribas, 2012). The strategies applied include, promotion of healthy oral hygiene habits, nutrition and diet education, early detection and treatment of dental diseases, oral rehabilitation and prevention of chronic diseases related to oral health, such as diabetes and cardiovascular disease (Morchon, 2024)

Social and community dentistry covers aspects such as the social, economic and cultural factors involved in the oral health of individuals and communities, in order to establish the best joint strategies and find efficient and effective solutions to the oral problems encountered (Doldan & Castano Seiquer, 2006).

Paraguay is a country with a fragmented health system, mainly due to the scarce capacity to attend the entire population; essentially those who fall ill due to unhealthy lifestyles (Ministry of Public Health and Social Welfare, 2015), being relevant to highlight that the situation of oral health is not alien to this problem.

It is important to consider that dental health includes the ability to bite, chew, smile, speak, communicate and transmit emotions through facial expressions that strengthen self-esteem (Fleites Did et al., 2022); however, these abilities are a problem that mainly affects the rural population of the country.

A secondary source study from Paraguay, analyzed 411 dental clinical histories of patients from urban areas attended in the years 2014 and 2017 in the dental career in Itapúa, among its most important results it mentions that the prevalence of caries is 94.6%, the Index of decayed, missing and filled teeth on average is 13.2 (SD± 6.9), decayed teeth (7.0±4.5) and missing teeth (4.4±5.7); (64%) of the serious consultations were for decayed, missing and filled teeth; concluding that access to dental services

and restorative treatments is limited (Caballero-García, et al., 2017)

Another study entitled Growth, poverty and social protection in Paraguay, points out that both poverty and extreme poverty are higher in the countryside: on average poverty in rural areas represents 51.04% compared to 31.40% of total urban poverty in the country, in the period 1997/8 - 2017 (Rojas Viñales, 2018), being the department of Concepción considered one of the most historically disinherited.

Although in the public universities of Paraguay the study programs educate by applying competencies related to social dentistry, comprehensive and close to the community, focused on health (Universidad Nacional de Concepción, 2019), the opportunities and resources are reduced according to the geographical location of the population that is the object of health care, an aspect that was considered when choosing the rural population of the department of Concepción for the development of this project.

The project linked the Universities of Seville - Spain through the Luis Séiquer Social Dentistry Foundation, with the National University of Asunción and the National University of Concepción with the aim of carrying out educational campaigns in schools, community centers, geriatric homes and rural communities of the Department of Concepción of Paraguay, which included oral health educational actions, such as talks on oral hygiene, proper nutrition for dental health, dental care habits, as well as dental care for the restoration of important dental pieces.

## METHODOLOGY

Descriptive study, primary source, quantitative, focused population was randomly selected according to criteria, made up of 450 people who attended voluntarily, convened through social networks, belonging to early and secondary education institutions, community centers, nursing homes and other social actors of communities, home for the elderly - Monsignor Sosa Gaona, Virgen del Rosario School, Huguá Ñandu - Arroyito, Núcleo 3 - Arroyito, Paso Barreto,

Redención, Isla Bonita, of the Department of Concepción, Paraguay, Paso Barreto, Redención, Isla Bonita, of the Department of Concepción, Paraguay, to whom it was proposed to apply one dental treatment per person (child or adult), and to install educational technologies that make it possible to intervene assertively by means of talks and interactive demonstrations on the challenges underlying oral health problems in the social and economic context of the community through the exchange between Spanish and Paraguayan professionals.

## RESULTS AND DISCUSSION

**Table 1.** Dental treatments provided within the framework of the Social Dentistry project in Paraguay, 2024

Treatments	N	%
Exodontics of permanent teeth	250	56
Exodontics of temporary teeth	75	16
Restorative traumatic treatments (ART)	21	5
Extractions	0	0
I.V. obturation in permanent teeth	60	13
Detartraje	9	10
<b>Total</b>	<b>450</b>	<b>100%</b>

It is important to consider that a healthy and attractive smile can increase confidence and improve self-esteem, and that, on the contrary, dental problems such as caries, gum disease or tooth loss can generate embarrassment and social anxiety, which negatively affects them (Castell-Florit Serrate, 2021).

Oral health is absolutely relevant for the growth and vital development of people, this is associated with nutrition and permanent hygiene, where aesthetics is associated with self-esteem, therefore, these developed treatments have enabled not only the improvement of the attractiveness of people but also has indirectly affected mental health (World Health Organization, 2019).

The dental treatments applied were exodontia of permanent teeth to 250 and exodontia of temporary teeth to 75 people, restorative treatments to traumatic (ART) to 21 people, obturation with I. V in permanent teeth 60 people, detartration to 9 people, which made it possible for dental professionals of the Foundation and

public management universities in the country to cooperate assertively to increase the welfare of 450 people belonging to the vulnerable population of the northern department, considering that in the same access to these primary care services are focused only in the departmental capital (Caballero-Garcia, et al., 2017)

It should be noted that the activity of exodontia of permanent teeth was the most frequent, as an oral surgical procedure, its objective is to remove the dental pieces that are affected by serious pathologies that compromise the health of the individual (Poblete, et al., 2020), being the third molars the most frequent (Rodrigues et al., 2015), although the extraction may be an apparently simple procedure, other factors may affect its removal of the pieces.

To avoid any risk, the professionals considered the strict sterilization of all surgical instruments used, complying with the regulations of the Ministry of Health, in addition, before, during and after each procedure, surgical hand washing was performed for 4 minutes with 2% chlorhexidine gluconate soap gel and the use of sterile gloves. All this with the purpose of preventing the most frequent complications in these post-extraction procedures such as alveolitis (0 to 35%) (Nusair & Younis, 2017). Other most commonly reported complications are bleeding, mandibular nerve paresthesia, pain and infections (Pitekova et al., 2019).

All tooth extraction interventions were performed under loco-regional anesthesia, it is important to consider that these can generate complications. However they are of low frequency, since the concentrations of the anesthetic solutions and the volumes used are small (García-Peñín et al., 2018); however, all care has been applied mainly considering the risks that the use of anesthetics in people represents, since it is not risk-free and it is mandatory that the professional is trained to prevent them and proceed as appropriate, that despite the great safety offered by these drugs, they can present adverse reactions ranging from 2.5 to 11%, which occur immediately upon injection or within the first two hours after it (Kaufman et al., 2000).

Morbimortality with local anesthesia is very low; although this is true, there are some reported cases in which death occurred due to local anesthetic reasons. The most common complication was syncope, which occurred in one out of 142 patients who received local anesthesia (Replogle et al., 2019).

Before each procedure, the professionals in a personalized way delivered in writing the postoperative indications and explained the care to be followed after each procedure, one of the recommendations to the operators was the use of analgesic, recommending paracetamol every eight hours for three days in simple procedures and consulting in case of persistent pain or bleeding. According to the scientific literature the incidence of bleeding cases is usually low, one study observed postoperative bleeding with an incidence of 0.6% (Bui et al., 2018), in another study refers that 0.3% (Bachmann, Cáceres, Muñoz, & Uribe, 2014) and of frequencies even lower than 0.1% of occurrence of these events another research (Chuang et al., 2017).

The link between professionals of the Luis Séiquer Social Dentistry Foundation and the National University of Asunción and the National University of Concepción, allowed the development of cooperative interventions in assertive education for the maintenance of oral health.

**Table 2.** Communities of application of the Social Dentistry project in Paraguay. 2024.

Communities involved	Talks	Interactive demos
Nursing Home- Monseñor Sosa Gaona	1	1
Virgen del Rosario School	1	1
Community Huguá Nandu	1	1
Community Arroyito	1	1
Community Núcleo 3 - Arroyito	1	1
Community Paso Barreto	1	1
Community Redención	1	1
Community Isla Bonita	1	1
<b>Total</b>	<b>8</b>	<b>8</b>

The Foundation's dentists have played an essential role in the design of the educational strategies

to be developed, focusing their interventions - lectures and interactive demonstrations - on the challenges faced by the villagers to solve their oral health problems with the technologies available locally and within their reach, generating a positive impact on patients when the educational actions are developed by their local peers as volunteers/participants, trained during the months of the project's operational duration.

Although in Paraguay, 98% of the population suffers from oral diseases, the empowerment of local leaders as an educational intervention strategy for the reduction of these rates, in the medium and long term will transform this unfavorable situation, especially in rural areas where they consider that losing a tooth due to pregnancy is abnormal (Caballero-García, et al., 2017) into opportunities to improve oral health.

According to current contexts, health promotion is of great importance in integral development (biopsychosocial), based on intersectoriality (Díaz Reissner, Casas García, & Roldán Merino, 2021). Therefore, health promotion is the indicated strategy to improve oral health from early ages with the linkage of the community, academia and professionals, supporting in an articulated way assertive experiences to health care management.

Although oral health problems are the result of interactions of several predisposing and/or risk factors, these are aggravated without proper care throughout the life cycle, so the main efforts should be aimed at reducing them by increasing health promotion (HP) actions at an early age.

Social and community dentistry is important mainly because it seeks to reduce inequality gaps through education and promote dental health, early detection of dental health problems and knowing how to treat them in time through appropriate treatments, where it is essential to have a dental team with these strategies to intervene in areas where government sectors do not normally reach, either because of geographical, cultural or economic difficulties, among the most limiting ones (Morchon, 2024).

For the application of social and community



dentistry, the collaboration of community stakeholders is important for the design and implementation of dental care programs to be accessible and culturally appropriate, since the responsibility for bridging the oral health gap is transferred to the population, as professionals engaged in social and community dentistry establish an ethical commitment to meet the needs of patients, who at the same time must adhere to their treatment with great responsibility. (World Health Organization, 2019) It entails the full involvement of community organizations and local leaders in order to detect and follow up on the solution of oral health problems and needs of the population.

In short, social and community dentistry is not only to contribute to community welfare, but it is also an effective academic strategy, by generating this competence in their students to develop this approach and apply it either in the dental clinic, to achieve new patients and especially to increase the confidence and loyalty of existing ones (Castaño Seiquer & Ribas, 2012), which impacts positively on the oral health of people and the construction of a healthy community (Castell-Florit Serrate, 2021).

It is important to highlight that among the beneficiaries a school premises was included, considering that infants are a population in which interventions can be carried out, due to the fact that in this phase the foundations for the acquisition of healthy social skills and establishing assertive affective relationships with parents and teachers are achieved (Isaza Valencia, 2018), myths and beliefs about oral health appear as a prevailing barrier that affects the entire population and even health professionals (Castaño Seiquer & Ribas, 2012).

The WHO on oral health has mentioned that oral health has long been neglected as part of global health, but many oral diseases can be prevented and treated with low-cost and highly effective educational measures (World Health Organization, 2019), to improve the oral health status it is essential to work on health promotion, seek more innovative methods, make use of creativity and proper two-way communication between participants (Castell-Florit Serrate, 2021).

## CONCLUSIONS

We can conclude that the project that linked the Universities of Seville - Spain through the Luis Séiquer Social Dentistry Foundation with the National University of Asunción and the National University of Concepción generated a positive impact on the academic population and on the patients, since on the one hand the objectives of carrying out educational campaigns in schools, community centers, geriatric homes and rural communities of the Department of Concepción, Paraguay, were achieved, with educational actions in oral health, talks on oral hygiene, proper nutrition for dental health, dental care habits, as well as dental care habits, on the one hand, educational campaigns were carried out in schools, community centers, nursing homes and rural communities in the Department of Concepción, Paraguay, with educational actions on oral health, talks on oral hygiene, proper nutrition for dental health, dental care habits, as well as dental care for the restoration of important dental pieces, but also technological transfers were developed in relation to the strategies of social dentistry promoted by the Luis Séiquer Foundation.

Considering the link between the Universities of Seville - Spain through the Luis Séiquer Social Dentistry Foundation and Paraguay, through the National University of Asunción and the National University of Concepción, it can be affirmed that the proposal of social and community dentistry has been fulfilled due to the opportunity of access to the dental services generated, as well as the approach focused on the prevention and treatment of dental diseases in the context of the needs and realities of the communities applied through this academic linkage, applying a broader vision that goes beyond the traditional dental office, with a commitment to people from vulnerable and unprotected communities, who were included in this process, who were allowed access without any inconvenience to oral and dental health services.

We declare that in the implementation of this project all ethical principles were applied based on the Belmont report and that there is no conflict of interest.

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## **Tembiasa jekupyty avano'õgua täipohãno moirũkatu rupive, Concepción Táva- Paraguay-pe**

### **MOMBYKY**

Pe täipohãno avano'õgua ojapyhy heta mba'e hyepýpe, moirũkatu, viruporukuaa ha arandupy rehegua oikéva yvypóra ha avano'õnguéra jururesãime, ikatuhañuáicha omba'apoporãve oñondive, ojejuhúvo ñemyatyrõ iporãvéva umi apañuái oĩva tesãirã ryepýpe, ko mba'ekuápe jurupyguáva. Paraguayaniko ha'e peteĩ tetã tesãirã oñemboja'opáva, sa'i ojeguerekóva tesãirã iporãveháicha, péva apytépe oĩvehína umi tesãirã avano'õguáva, pe tesãirã jurupyguáva ndopytái okápe ko apañuáigui. Iporãniko jahechakuaa jurupyresãime ojapyhyha pe katupyryrã oguerekóva: ojeisu'u, ojepuka, oñeñe'ẽ, oñemomandu ha oñeñanduka hañgua tekovy'a, umi ayvureko tova rupiguápe ha omombaretéva jehayhu añete; ágakatu ko'ã pu'aka ha'ehína peteĩ apañuái ojapyhýva táva okarayguápe ñane retãme. Pe jehupytyvoirãniko ha'e ojehechakáva umi tembiasa jekupyty avano'õ ha täipohãnokuaaty heseguáva - Concepción Tetãvorépe. Ñehesa'yjijo oha'ãngahaíva, mombe'upýva, ipapapýva, mandu ojejesareko rupi peteĩ tavaygua ryepypegua ha'éva 450 yvypóra oikéva ijehegui oñehenóiva redes sociales rupive oĩva tekombo'e remimoĩmby pypgua ha mbytegua, avano'õ atýpe, óga oĩhápe tuja ha ñuái guai guai ha ambue tenda Concepción Tavavorépe, chupekuéra oñeikuave'ẽkuri ko ñepohãno ijurupy rehegua peteĩteĩ (mitã téra kakuaa), ha oñemohendávo tembiporupyahu ñehekombo'e rehegua ombohasy'ýva iñeñuahẽ chupekuéra ñomongeta ha jehechauka rupive mba'épa ogueru jurupy resãĩ jurupyguáva avano'õ ha viruporukuaa upe tendápe ojapo rupi ko ñembokatupyry Paraguay ha Españolkuéra. Ko apopyrã omoheñóikuri peteĩ mba'e iporãvéva pe mbo'ehaovusúpe ha upéicha avei umi hasývape, peteĩ henda guivo ohupyty hikuái pe ñemyasãĩ tekombo'e rehegua mbo'ehaópe, atyha rupi, tuja ha ñuái guai rógape ha táva okaháre Concepción Táva Paraguay retãme, ñehekombo'e rupive tesãĩ jurupyguáre, mba'éichapa oñemopotíva'erã juru, mba'éichapa ojekaruva'erã, tesãĩ jurupyguápe ñuarã mba'éichapa oñeñangarekova'erã táire, ha upéicha avei täiñepohãno ha umi täi oñemomba'eguasuvéva ñembohekoporãjey, upéicha avei ojeguerojerákuri tembiporupyahu mba'éichapa pe tapereko ojeiporúta täipohãnokuaaty avano'õguára reheve omoñepyrúva pe apopyrã ombojokupytykuri Universidad de Sevilla – Fundación Odondología Social Luis Séquier – España, con la Nacional de Asunción y Nacional de Concepción Tetãvorépe Paraguay retãme. Ikatúniko oñemoneĩ pe täiñepohãno ñekuave'ẽ ojeguerojeráva atýpe ome'ẽhague juruja ikatuhañuáicha ojehepyty täiñepohãno iporãveháicha, upéicha avei pe jesareko ojeguerekóva oñemboyke ha oñepohãno hañgua umi mba'asy oĩva jurupýpe, ha'égui pe añetegua oñeikotevëvéva ohasáva ko'ã hekokangyvéva.

**Ñe'ẽtete:** avano'õ jeroike, tavavore'i jeike, tavavore'i, temimoĩmby jokupyty.