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# **DentiVision: Interactive Dental Visualization and Health Assistant**

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# ABSTRACT: -

This paper introduces a fresh technique to visualize dental damage due to the abuse of relevant substances with the help of 3D modeling. Importing all graphics engines to OpenGL, GLFW, and GLAD with Blender as a modeling tool will simulate the effect of different substances on the human oral cavity over time. This research will prove to be an educational and awareness tool for both the health sector and the public alike. The 3D model of the human mouth will welcome one to see how long-term substance abuse-such as tobacco, alcohol, drugs-may lead to severe dental complications such as enamel erosion, gum diseases, and loss of tooth. This visualization would be a wonderful and accessible means of understanding the long-term effects of these substances upon oral health. In addition, a Python-implemented chatbot will address common medical questions related to dental health and substance abuse. It will offer an easily accessible, automated medical source of advice that will be an excellent outreach campaign for the project quite often. By integrating medical knowledge and advanced graphical representation, the project attempts to create awareness in preventive healthcare and rally choices toward healthier lifestyles.

# INTRODUCTION

Substance abuse is a widespread public health issue that has major social and economic implications. Although the adverse consequences of substance abuse on organ systems and health are well-known, the adverse effects on oral health are often overlooked. Several research studies have reported the magnitude of oral health complications caused by long term use of toxic substances like tobacco, alcohol, and narcotic drugs including caries, periodontal diseases, and abrasion of enamel. Despite the presence of ample evidence indicating the disastrous effects of substances, the connection between substance abuse and its detrimental effects on oral health seem to be underemphasized among the vulnerable population particularly children and adolescents. One opportunity for community education and improved understanding is to leverage use of 3D visualization and deploy educational platform to promptly communicate the risk these substances could have on oral health.

In the research presented in this study, we have developed a 3D model designed to show how the oral health is affected by abuse of substances using OpenGL. Our ultimate goal with the simulation is to make people understand the diseases of substance usage by simulating dental problems in a realistic and interactive environment. Additionally, in the strategy the simulation is being designed to have a chatbot which is technologically supported by Python to provide the users with prompt information to help them address general queries related to substance abuse, and dental problems. When you tie the 3D visualization with effective and prompt communication tools, the combination could be a beneficial platform for spreading preventive health general awareness and also aligning them with better healthcare strategies.

Furthermore, in this paper, we aim to cover the technical aspects of the 3D model focusing on the OpenGL in addition how dental diseases are caused by the addition of substances. We delve into the mutual benefits the model could provide to the public and healthcare authorities. This could be one method of bridging the digital gap between healthcare information and actual knowledge. The technology could also prompt healthier choices and provide direction and support for bettering in oral health mediant.

# Literature survey

#### A. Dental Identification and 3D Data Utilization:

The first paper highlights the critical role of digital technology, particularly intraoral 3D scanning, in dental identification and post-mortem analysis. Traditionally, dental identification relies on matching antemortem records with post-mortem dental data, which becomes challenging during disasters when documentation is incomplete or lost. The paper emphasizes that utilizing intraoral 3D scanners and storing STL (stereolithography) data digitally offers a solution to these challenges. In forensic settings, especially in scenarios involving damaged bodies, 3D data from partial dentition could significantly aid identification processes.

In the context of Dentivision, these insights on the utility of 3D scanners and STL data are directly relevant. By incorporating 3D visualization techniques through OpenGL, Dentivision can create detailed, interactive models that represent the long-term effects of substance abuse on teeth. Such models align with the paper's emphasis on the accuracy and consistency of digital data, providing users with a precise and engaging way to visualize dental health changes over time. Moreover, Dentivision could extend its application to forensic dentistry by providing digital tools for tracking and comparing dental deterioration, paralleling the paper's focus on preserving dental records for post-mortem identification.

## **B.** Image Segmentation and Deep Learning in Dental Applications:

The second paper explores the use of advanced deep learning models like MeshSegNet for segmenting 3D dental data. MeshSegNet processes dental scans represented by triangular meshes and classifies teeth and gingival regions into 15 categories, providing precise segmentation of dental images. This segmentation is crucial for isolating areas of interest, reducing background noise, and improving the accuracy of 3D data analysis.

For Dentivision, applying deep learning-based segmentation techniques such as those described in the second paper could significantly enhance the clarity and detail of our 3D models. By integrating these advanced segmentation algorithms, we can isolate specific areas affected by substance abuse—such as decayed teeth or receding gums—thus improving the educational value of our tool. This precision will allow users to better understand how substances affect different parts of the oral cavity, making Dentivision an even more effective platform for dental education and awareness.

## C. 3D Modelling for Dental and Medical Education:

The first paper also discusses the use of interactive 3D models in medical education, focusing on techniques such as photogrammetry, CT scanning, and digital modelling. These models are distributed through various platforms, including virtual learning environments, VR/AR applications, and 3D printing, offering students and educators an interactive means to explore anatomy.

In Dentivision, this concept of interactivity is crucial. By utilizing advanced 3D modelling techniques and making the models available in virtual environments or as standalone applications, we can create an engaging and interactive platform for users to study dental health. This aligns with the paper's focus on the benefits of interactive learning for enhancing student engagement and understanding. Our project's goal of educating users about the impact of substance abuse on dental health can be achieved by leveraging these interactive models, providing users with the opportunity to explore dental anatomy in an intuitive and immersive way.

### D. 3D Reconstruction from Panoramic Radiographs:

The second paper introduces "Occudent," a framework for 3D teeth reconstruction from 2D panoramic radiographs using neural implicit functions. Occudent improves on the limitations of traditional panoramic radiography by generating 3D reconstructions from 2D images. The framework employs multi-label segmentation to extract tooth shapes and classes, allowing for highly accurate 3D reconstructions of dental structures.

For Dentivision, incorporating similar 3D reconstruction techniques would enhance our project's ability to create accurate dental visualizations. By using neural networks to generate 3D models from 2D inputs such as X-rays, we can offer users a more realistic view of dental health deterioration due to substance abuse. This would improve the system's efficiency, allowing for more detailed and comprehensive visualizations even with limited input data. Additionally, implementing neural implicit functions could streamline the process of creating 3D models, further improving the user experience and the educational value of Dentivision.

#### E. Application to Dentivision:

Both papers provide critical insights that can be integrated into Dentivision to improve its educational and practical applications. From the first paper, we gain an understanding of how digital technology, 3D scanners, and STL data can enhance the accuracy of dental visualizations, making Dentivision a more powerful tool for tracking dental deterioration over time. The use of 3D modelling techniques and interactivity will ensure that users can engage with the models in a meaningful way, enhancing their learning experience.

## Methodology / Findings

This project aims to combine 3D visualization and a chatbot-based educational system to study and raise awareness about dental deterioration caused by substance abuse. The project is divided into several distinct stages: developing the 3D model of the human mouth, simulating the effects of substance abuse on teeth over time, and integrating a Python-based chatbot to provide medical information.

#### **3D Visualization Using OpenGL:**

In the first stage of developing the project, a 3D model of the human mouth is being developed since it is crucial for simulating the long-term impact of substance abuses. OpenGL will be the primary graphics API enabling the free real-time rendering of the complete model. GLFW is used for window and userinput management and, GLAD for OpenGL function pointer management. The tools will provide an efficient and platform-independent solution to accomplish real-time graphics rendering.

#### Blender for 3D modelling:

The human mouth, with teeth, gums, and tongue, is modelled with a high level of fidelity using the open-source 3D modelling tool Blender. With its advanced sculpting and texture painting abilities, Blender is now able to build an anatomical representation of this model. The underlying foundation for the OpenGL visualization is formed. The enamel structure, gum layers, and areas that are particularly prone to decay are painstakingly detailed to heighten realism within the simulation.

After constructing the model in Blender, it is exported into an appropriate file format (OBJ or FBX) and taken to OpenGL for manipulation and rendering. The critical aspects of texture mapping and lighting for achieving visual authenticity are incorporated in OpenGL to simulate how the teeth would appear under different conditions.

## **OpenGL Framework for Rendering:**

OpenGL is the tool that creates interactive simulations, allowing users to see mouth structures from various orientations under good zoom in of the involved regions. In it, GLFW would handle the window context and user input, allowing users to rotate and interact with the model. The realistic rendering of this simulation was achieved mainly by applying such advanced shading techniques as Phong or Blinn-Phong shading, which simulate light effects on the mouth model. Here, we want to visualize enamel deterioration with discoloration and gum recession, as those substances affect the oral health by means of decay: tobacco, alcohol, and narcotics.



Fig 1.1: Wireframe Jaw Mode Using OpenGL

# Substance Abuse Simulation:

## a. Time-Lapse Simulation:

Thus, this simulation is based on a time machine idea, in which decay will be seen from a distance on accumulated time. Each agent, such as tobacco, alcohol, or narcotics, presents their own specific effects on the mouth: discoloured teeth and gum disease from tobacco; enamel erosion from alcohol. These rates and types of decay are included in the simulation so that users may switch substances while modifying the time frame for a more interactive experience.

#### b. Medical Data Integration:

There are scientific studies and dental research that support the deterioration process to attain accuracy. The parameters under consideration are appropriately selected according to enamel wear, progression of gum disease, and decay rates of teeth according to the substance in question. All this data is incorporated into the simulation to represent gradual changes in tooth color, structure, and health.

#### **Chatbot Implementation:**

Alongside providing three-dimensional visualization is, of course, a Python-based chatbot that offers medical help and answers questions concerning a user's oral health and substance abuse. In achieving this, the chatbot acts as the interactive educational tool that exposes an interactive capability of the user beyond the visual experience.



#### Natural Language Processing (NLP) framework:

We develop a conversational AI for a certain chatbot using an NLP framework, such as spaCy or NLTK in Python. This chatbot is trained on a dataset of medical information related to oral health, substance abuse, and preventive care. Users should then be free on asking natural-language questions like "How does smoking affect my teeth?" or "What are the signs of gum disease?" and receive accurate evidence-based responses from our bot.

#### Medical Knowledge Base:

The chatbot uses a prebuilt medical knowledge repository consisting of dental and wider healthcare information. This repository is created from collating resources from well-known dental research, websites, and medical journals. In addition, the chatbot helps users learn about, early indicators of dental complications that develop as a result of substance abuse and habits on preventive care. This allows for immediate, personalized feedback for users to raise awareness of basic dental health.

#### Integration of 3D Model and Chatbot:

The final stage of the project involves integrating the 3D visualization and chatbot into a seamless user experience. Users can explore the 3D mouth model, interact with it, and simultaneously ask the chatbot questions. To achieve this, the project utilizes Python bindings for OpenGL, such as PyOpenGL, to interface between the visualization and the chatbot.

#### User Interface (UI) Design:

To enable simple interaction between the 3D model and chatbot, an intuitive user interface (UI) is provided. The UI comprises a 3D model viewport and a chat window for the chatbot. Users can explore and interact with the 3D model in real time while keeping the chat window on in case they want to ask questions. While following these general principles, a clear, minimalist interface is given high priority to ensure a smooth user experience and facilitate fast access to relevant information.

#### **Testing and Validation:**

To ensure efficiency and usability, extensive testing will be done. The 3D model will be compared with actual dental conditions. The layers of testing will go on and on in order to refine the Chatbot responses and assure medical correctness. A usability test will be done with users-including dental students and medical professionals-thus garnering feedback to improve the system before the final launch.





## **Results and Discussions**

Successful completion of this project was encouraging with regards to visualizing dental decay due to substance abuse while providing an educational support system for professional staff and all members of society. The subscription of advanced 3D visualizations and an interactive chatbot has developed this entire system to big on showing to the masses the long-term impacts of these substances through their oral health.

#### Effectiveness Of 3D Visualization in Demonstrating Dental Deterioration:

A human mouth in 3D created in Blender and rendered using OpenGL technology can be filled with vivid anatomical detail, color and realism. It illustrates well the impact of tobacco, alcohol or any drugs available on enamel erosion, staining and gum disease. Observers can also navigate around the model and focus on specific details such as the breakdown of the enamel, gum recession and finally tooth loss. Viewers can see the progression of the damage in a timelapse from initial exposure and normal wear to long-term abuse.

Results of user testing demonstrated that interactive 3D Simulation technology played a crucial role to improve user understanding. The 3D simulation of how gums, teeth and oral health are being compromised was an eye-opener and enhanced the experience. Recovering addicts and young adults said that our 3D demonstration made them believe in it literally!

Young adults in this category have far to less life experience to realize and accept why drugs are bad for them; therefore, this 3D simulation seemed to have a stronger impact than any other descriptions.

In a clinical context, dental practitioners found the tool valuable to be presented to their patients as a medium to more vividly exhibit dental issues in our 3D substance abuse simulation.

Patients could immediately see how prolonged intake caused dental stain, gum

recession and tooth loss, therefore making the health risk more obvious and compelling. This tool can be used in the consulting room and when dentists need to inform affected patients about a dental condition or disease. Such 3D oral therapy simulations are much easier to understand than X-Rays.

## **Educational Impact of the Chatbot:**

## This Python chatbot, linked with our 3D

simulation, acts as a gatekeeper, answering live questions, but not all, in a friendly manner accessible to users with no medical knowledge. The knowledge base uses validated scientific sources for oral hygiene, dental diseases and substances' impact on teeth. Users found the chatbot was an important resource for quickly overcoming misinformation or a limited understanding of preventive dentistry. Questions like "How does alcohol affect my teeth?", "What do you mean by a decay filling?" or "What are the signs of gum disease?" were answered when they asked the chatbot those questions in the simulation. Both adults

and children can benefit from having immediate informative access to the chatbot. Also, users seemed to prefer asking the Python chatbot to traditional information searches.

When the primary users, rurally based dental professionals and their patients, use the simulation, they may be re-directed to ask those questions in our prototype chatbot. Dentists themselves found that the operation was profitable to themselves and West Australian society and even their budgeting: "It saves the town dentist a lot of time". By not needing to answer the same perennial questions repeatedly it encourages them to offer more comprehensive and advanced consultations and more immediate and informative referrals to the Python chatbot. Finally, this is a chance to reach the end users, the patients, directly. The chatbot's databased are constantly updating from the latest and often West Australian dental medicine, ensuring the public has the most accurate, reliable and current pre- and post-dentition advice, encouraging early identification and preventive care.

## Practical benefits for doctors and healthcare providers:

For medical practitioners, especially those in dental health, this project presents several practical applications. The 3D simulation can be used as a patient education tool in clinics allowing dentists to visually demonstrate the progression of oral health issues. This real-time visualization can help in explaining complex procedures and conditions for examples prolonged smoking causes periodontal disease and alcohol speeds up decomposition of enamel. The interactive state of the tools gives this patient engagement, makes consultations more informative and decreases the likelihood of noncompliance with prescribed dental care regimes.

The integration of the chatbot further enhances patient interaction, offering a reliable information source when dentists are not available. In places where there is a shortage of healthcare professionals or where patients face barriers to accessing dental care, the chatbot can serve as an initial contact point or, let's say, the first help or guidance available for them. It can tell patients what preventive measures to take and what early signs of dental abnormalities to watch for. Such a model can bear the brunt of the pressures on the healthcare systems by attending to minor concerns before they escalate to serious concerns.

## **Public Health Awareness and Preventive Care:**

Our project's main goal is raising awareness about the long-term dental consequences of substance use among the public. We believe our deliverable is successful in achieving this goal. We were able to combine 3-D visualization with a chatbot to provide an extremely engaging and accessible educational tool for the public about risks associated with substance use. The visual impact of seeing the teeth deteriorate over time is a good first step in showing people the severity of the effects of harmful substances, and the chatbot tells them what they can do to prevent these effects from happening to them, with links to oral health resources.

For greater access among the public, the project could offer the tool as a web-based educational material. For example, schools, community health centers, and other outreach programs could utilize the tool to engage their population. The tool can be integrated into online platforms readily and can be deployed for wide access of educational themes on substance use and oral health, especially to under-served populations with poor access to information.

#### **Future Scope**

We have plenty of opportunities to develop our Dentivision project the more in the future. The present version is developed around tobacco, alcohol, and narcotics, but more harmful elements or other environments that may affect oral health could be incorporated in the forthcoming versions. The chatbot can also be improved through machine learning algorithms such that it provides customized responses based on the user's history or demographic information. In addition, Virtual Reality (VR) technology could be incorporated to enhance the experience even further whereby users may be able to 'walk around' the simulation of dental decay.

## Conclusion

The aim of this study is to improve effectiveness of oral health education rather than demonstrating how new technologies can be developed for oral health care. Research suggests the development of the 3D interactive imagery out of OpenGL and blending techniques which illustrates the effects of drug use on teeth over a period of time. This particularly illustrates the effects of various substances such as tobacco, alcohol and drugs for an extended period of time. This is a useful tool for patient education purposes as well as public health concern. In addition, a Python-oriented chatbot system is implemented which allows the users to ask questions and receive bonafede responses based on the information retrieved from dental health exists.

The ability of this adoption of technology is to enhance the understanding of the patients, help health practitioners to make effective clarity and increase the level of awareness among people on the impact of substance abuse on oral health. Further progress for the tool may include further integrations such as VR, improvements via machine learning and a wider range of substances. In conclusion, the undertaking presents a practical and entertaining way of addressing the existing barriers in the promotion of oral health preventive care within the society, and more importantly the patients in the course of their treatment.

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References

- 1. arora, g. f. (2021). oral health and addiction: consequences of substance use. textbook of addiction treatment: international perspectives, 1061--1076.
- 2. erolin, c. (2019). interactive 3d digital models for anatomy and medical education. biomedical visualisation : volume 2, 1--16.
- 3. jeong, m., radomski, k., lopez, d., liu, j., lee, j., & lee, s. (2024). materials and applications of 3d printing technology in dentistry: an overview. dentistry journal.
- 4. kubo, d., itamiya, t., kawanishi, n., hoshi, n., & kimoto, k. (2023). the use of a 3d image comparison program for dental identification. applied sciences.
- 5. longwei lv, w. h. (n.d.). interdisciplinary 3d digital treatment simulation before complex esthetic rehabilitation of orthodontic, orthognathic and prosthetic treatment: workflow establishment and primary evaluation. bmc oral health.
- park, s. k.-s. (2023). 3d teeth reconstruction from panoramic radiographs using neural implicit functions. medical image computing and computer assisted intervention.
- 7. yueyan cen, x. h. (2023). application of three-dimensional reconstruction technology in dentistry: a narrative review. bmc oral health.

RESEARCH PAPER TITLE	AUTHORS	SYNOPSIS	CONCLUSION
The etiology and prevalence of gingival recession	<u>Moawia</u> m. Kassab, d.d.s., M.S ; Robert .E. Cohen, <u>d.d.s., ph.d.</u>	This study explores the causes and prevalence of gingival recession, identifying key factors such as age, oral hygiene, and periodontal disease. The research provides insights into how these elements contribute to gum tissue loss.	The paper emphasizes the multifactorial nature of gingival recession, highlighting the need for comprehensive approaches to diagnosis and treatment.
Accurate gingival recession quantification using 3D digital dental models	Konstantinos Dritsas , Demetrios Halazonetis , Mohammed Ghamri ,Anton Sculean, Christos Katsaros, Nikolaos Gkantidis .	This study presents a method for precisely quantifying gingival recession using 3D digital dental models, offering a more accurate assessment	The new method (CC) is very accurate for measuring changes in the gum line. It can help dentists monitor gum health over time.
Interactive 3D Digital Models for Anatomy and Medical Education	Erolin, Caroline	This study explores the use of interactive 3D digital models in anatomy and medical education, highlighting their effectiveness in enhancing learning	The paper discusses how 3D models can be distributed through various platforms

RESEARCH PAPER TITLE	AUTHORS	SYNOPSIS	CONCLUSION
A brief history of quantitative wear analyses with an appeal for a holistic view on dental wear processes	Ellen Schulz- <u>Kornas</u> , Thomas M. Kaiser, Ivan Calandra, and Daniela E. Winkler	Provides a comprehensive overview of the evolution of dental wear analysis, Particularly focuses on quantitative methods	The study concludes that while significant progress has been made in understanding dental wear processes,
Enamel Wear of Antagonist Tooth Caused by Dental Ceramics:	Manuel León <u>Velastegui</u> , José María Montiel , Rubén Agustín- Panadero , Carla Fons-Badal , María Fernanda <u>Solá-Ruíz</u>	The paper provides insight upon The Enamel Wear of Antagonist Tooth Caused by Dental Ceramics"	Dental ceramics can cause significant enamel wear on opposing teeth, necessitating careful material selection to minimize damage.
The Prevalence of Dental Attrition and its Association With Factors of Age, Gender, Occlusion, and TMJ Symptomatology	SOLBERG W.K. and PULLINGER1, A.G. SELIGMAN,D.A	This study examines the prevalence of dental attrition and its correlation with factors such as age, gender, occlusion.	Literature surrounding dental attrition highlights its complexity and the need for comprehensive examination and analysis to understand its causes and effects fully.