

# Introduction to Oral Anatomy I

Dr Aseel Sharaireh

DDS, MFDS-Ire, PhD

Assistant Professor in Stem Cell Biology

# Intended learning Outcomes

- Understand the structure and function of the oral cavity and its various components in mastication, speech, and digestion
- Recognize key anatomical features
- Explore the development of dentition
- Identify clinical relevance in dental practice
- Describe the development process of primary and permanent dentition

# Overview of the Oral Cavity

Definition: is the “getaway” of the digestive and respiratory systems and plays an essential role in processes such as ingestion, and breathing.

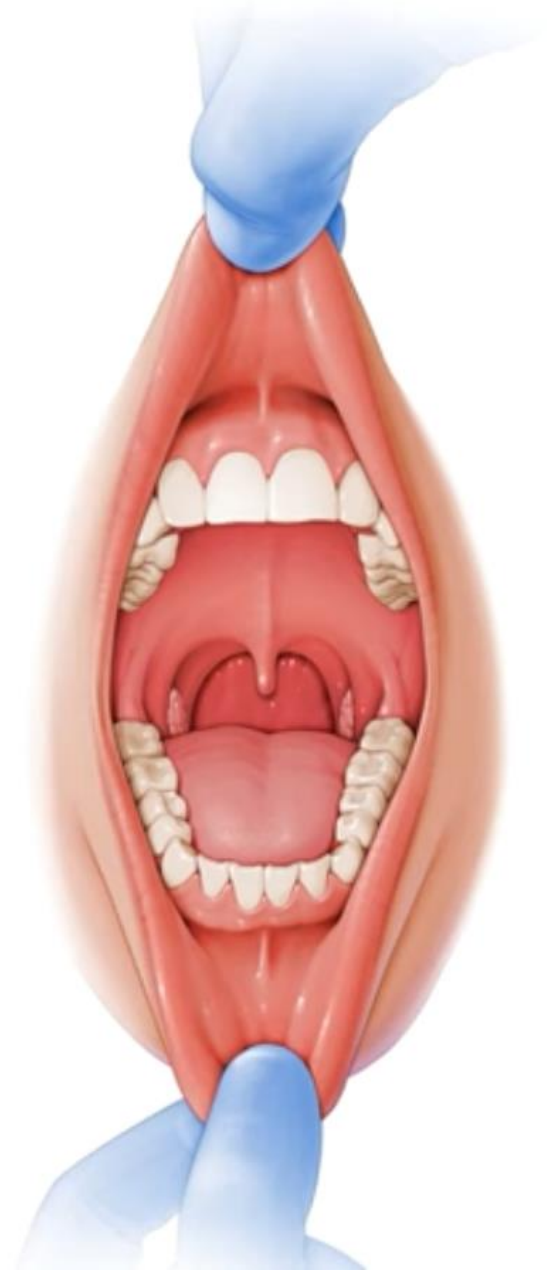
Functions: Comminution of food, digestion, speech, respiration, and sensory perception and a lot more to come!

Key landmarks: Lips, cheeks, palate, tongue, and floor of the mouth

## The Oral Cavity:

1- Oral Vestibule

2- Oral Cavity Proper



# Oral Vestibule

The vestibule is the space between the lips and cheeks externally and the teeth and gums internally.

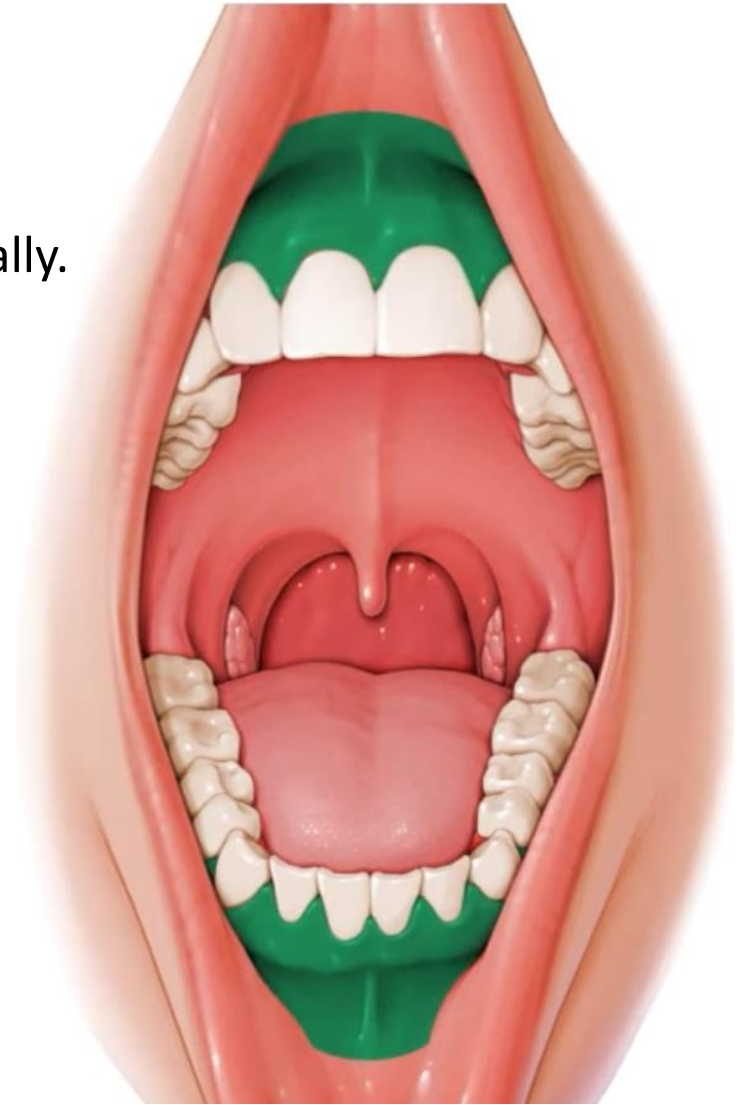
## Borders

Anteriorly and laterally:

**Lips and cheeks**

Posteriorly and medially:

**Teeth and Gums**



## Oral Cavity Proper

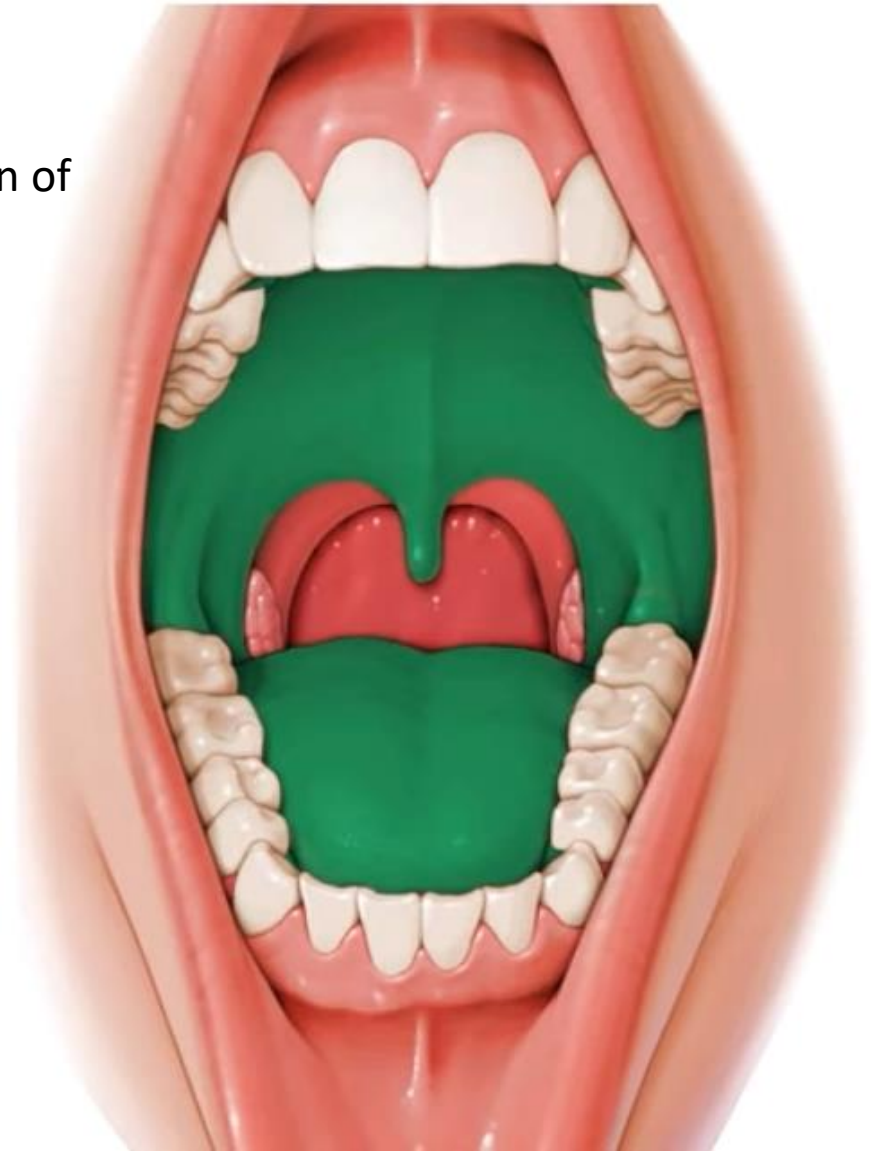
The oral cavity proper is the larger central portion of the mouth that lies within the dental arches.

### **Borders:**

Superiorly: **Hard and Soft Palates.**

Inferiorly: **Floor Of The Mouth and Tongue.**

Posteriorly: opens into the **Oropharynx.**



# Components of the Oral Cavity

Lips, Cheeks, Hard Palate And Soft Palate (Roof Of The Mouth), Tongue, Floor Of The Mouth

Teeth, Gums, Oral Mucosa (Mucus Membranes),  
Salivary Glands, Taste Buds

Posterior wall of Oropharynx, Uvula, Palato-pharyngeal Arch and Palatine Tonsils

<https://sketchfab.com/3d-models/oral-cavity-64d4e31440ba48ee9e1ecccf6fe0ac17>

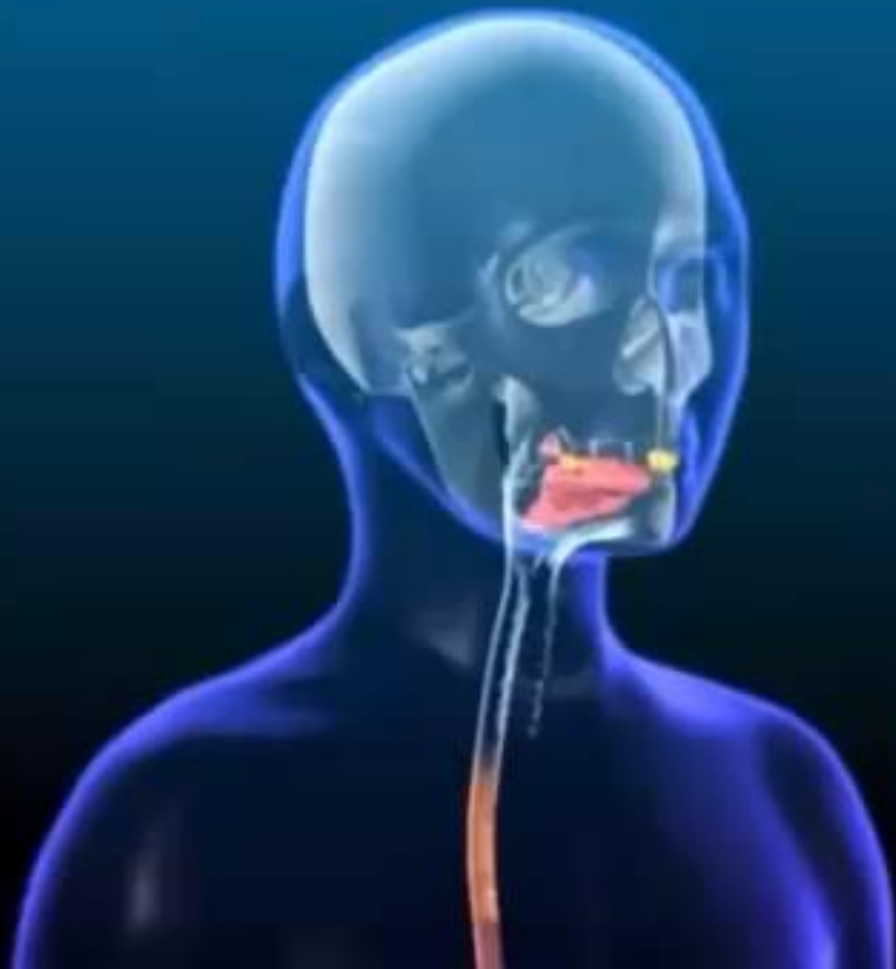
# Structure of the Oral Cavity

- Lips: Protective barrier and aids in speech
- Cheeks: Form the lateral walls of the oral cavity
- Palate: Hard and soft palate; separates oral and nasal cavities
- Tongue: Muscle involved in taste, mastication, and speech
- Salivary glands: Parotid, submandibular, sublingual

## Functions of the Oral Cavity

### Ingestion and Mastication

- **Ingestion** – Food is introduced into the mouth, initiating the digestive process.
- **Mastication (Chewing)** – Teeth, along with the tongue and jaw muscles, work together to break food into smaller pieces. This mechanical digestion increases the surface area of food, aiding in enzymatic breakdown.
- **Formation of Bolus** – The tongue and saliva mix the chewed food into a soft bolus, preparing it for swallowing.



## Functions of the Oral Cavity

### Saliva Production and Lubrication

Salivary glands within the oral cavity secrete saliva, which plays multiple roles:

- **Lubrication** – Moistens food, making it easier to chew and swallow.
- **Enzymatic Digestion** – Contains enzymes like amylase, which begins the breakdown of carbohydrates into sugars.<sup>[6]</sup>
- **Antimicrobial Action** – Contains lysozymes and immunoglobulins that help fight bacteria and protect against infections.
- **Taste Enhancement** – Dissolves food particles, allowing taste receptors to detect flavors.

# Functions of the Oral Cavity

## Speech and Articulation

The oral cavity is essential for speech production and articulation.

- The tongue, lips, and soft palate work together to modify airflow, producing distinct sounds and words.
- Teeth and the hard palate provide surfaces for sound modulation and articulation of consonants.
- The oral cavity acts as a resonating chamber, amplifying sounds produced by the vocal cords.

SPEECH GRAPHICS

The logo for "Speech Graphics" features the words "SPEECH" and "GRAPHICS" in a white, bold, sans-serif font. A thin, light green wavy line, resembling a sine wave or a stylized speech sound, is positioned between the two words, starting above the 'E' in "SPEECH" and ending below the 'S' in "GRAPHICS".

Facial  
 Expression  
 and  
 Communication

• Voluntary Biting  
 • Reflexive Swallowing  
 • Pharyngeal Phase  
 • Esophageal Phase  
 • Lingual Lipase  
 • Membrane Receptors  
 • Respiration and Air Passage  
 • Mechanoreceptors  
 • Nociceptors

Storage and  
 Transport of  
 Food

• The tongue pushes the bolus to the back of the mouth.  
 • The soft palate elevates to block the nasal cavity.  
 • Receptors that detect temperature, texture, and pain.  
 • Salivary glands secrete amylase and dextrin.  
 • Fat is directed into the esophagus for further digestion, acids and glycerol.

Moistening  
 and  
 Cleaning

• The tongue pushes the bolus to the back of the mouth.  
 • The soft palate elevates to block the nasal cavity.  
 • Receptors that detect temperature, texture, and pain.  
 • Salivary glands secrete amylase and dextrin.  
 • Fat is directed into the esophagus for further digestion, acids and glycerol.

Regulation  
 of pH

• The tongue pushes the bolus to the back of the mouth.  
 • The soft palate elevates to block the nasal cavity.  
 • Receptors that detect temperature, texture, and pain.  
 • Salivary glands secrete amylase and dextrin.  
 • Fat is directed into the esophagus for further digestion, acids and glycerol.

Digestion  
 Initiation

• The tongue pushes the bolus to the back of the mouth.  
 • The soft palate elevates to block the nasal cavity.  
 • Receptors that detect temperature, texture, and pain.  
 • Salivary glands secrete amylase and dextrin.  
 • Fat is directed into the esophagus for further digestion, acids and glycerol.

# Functions of the Oral Cavity

Taste Perception

Swallowing (Deglutition)

Sensory Reception

Immune Defense

Digestion Initiation

Regulation of pH

Moistening and Cleaning

Storage and Transport of Food

# Human teeth



# Human dentition is diphyodont

## 2 sets of dentitions

- i. **Primary/deciduous**
  - 20 teeth in total
  - Incisors/canines/molars
  - Smaller size
  
- ii. **Secondary/permanent**
  - 32 teeth in total
  - Incisors/canines/premolars/molars
  - Bigger size



# Dental tissues

- A. Enamel. The protective outer surface of the anatomic crown. It is 96% mineral and is the hardest tissue in the body.
- B. Dentin. Located in both the crown and root, it makes up the bulk of the tooth beneath the enamel and cementum. It lines the pulp cavity.
- C. Cementum. This substance covers the surface of the anatomic root.
- D. Pulp. The central, innermost portion of the tooth. It has formative, sensory, nutritive, and functions during the life of the tooth.

# Tooth Types

**Incisor teeth (central and lateral)  
have incisal edges.**

**8 in both primary and permanent**



# Tooth Types

## Canines

have single cusps.

4 in both primary and permanent



# Tooth Types

## Premolars

have two to three cusps  
8 only in permanent



# Tooth Types

## Molars

have three to five cusps  
12 in permanent 8 in primary



# Crown and Root Development

Dental development can be considered to have two components:

- the formation of crowns and roots and
- the eruption of the teeth.



After the **crown** of the tooth is formed, development of the **root portion** begins.

# Development of the Dentition

- Primary dentition (20 teeth) erupts from 6 months to 2.5 years

- Permanent dentition (32 teeth) erupts from 6 years to 18 years

- Stages of development: initiation, bud, cap, bell

Tooth development for all teeth starts in utero!

**TABLE 2-1 Chronology of Primary Teeth\***

TOOTH		FIRST EVIDENCE OF CALCIFICATION (WEEKS IN UTERO)	CROWN COMPLETED (MONTHS)	ERUPTION (MEAN AGE) (MONTHS)	ROOT COMPLETED (YEARS)
<b>Upper</b>					
i1	E, F	14	1½	10	1½
i2	D, G	16	2½	11	2
c	C, H	17	9	19	3¼
m1	B, I	15	6	16	2½
m2	A, J	19	11	29	3
Maxillary Teeth Right A B C D E   F G H I J Left T S R Q P   O N M L K Mandibular Teeth					
<b>Lower</b>					
i1	P, O	14	2½	8	1½
i2	Q, N	16	3	13	1½
c	R, M	17	9	20	3¼
m1	S, L	15½	5½	16	2¼
m2	T, K	18	10	27	3

*i1*, Central incisor; *i2*, lateral incisor; *c*, canine; *m1*, first molar; *m2*, second molar.

\*Universal numbering system for primary/deciduous dentition; see Chapter 1. See Tables 2-3 and 2-4 for detailed presentation of the data.

# Chronology of Permanent Teeth

TOOTH		FIRST EVIDENCE OF CALCIFICATION	CROWN COMPLETED (YEARS)	EMERGENCE (ERUPTION) (YEARS)	ROOT COMPLETED (YEARS)
I1	8, 9	3-4 mo	4-5	7-8	10
I2	7, 10	10-12 mo	4-5	8-9	11
C	6, 11	4-5 mo	6-7	11-12	13-15
P1	5, 12	1½-2¼ yr	5-6	10-11	12-13
P2	4, 13	2-2¼ yr	6-7	10-12	12-14
M1	3, 14	At birth	2½-3	6-7	9-10
M2	2, 15	2½-3 yr	7-8	12-13	14-16
M3	1, 16	7-9 yr	12-16	17-21	18-25

Maxillary Teeth																	
Right	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Left
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
Mandibular Teeth																	

I1	24, 25	3-4 mo	4-5	6-7	9
I2	23, 26	3-4 mo	4-5	7-8	10
C	22, 27	4-5 mo	6-7	9-10	12-14
P1	21, 28	1½-2 yr	5-6	10-12	12-13
P2	20, 29	2½-2¾ yr	6-7	11-12	13-14
M1	19, 30	At birth	2½-3	6-7	9-10
M2	18, 31	2½-3 yr	7-8	11-13	14-15
M3	17, 32	8-10 yr	12-16	17-21	18-25

I1, Central incisor; I2, lateral incisor; C, canine; P1, first premolar; P2, second premolar; M1, first molar; M2, second molar; M3, third molar.

\*See Tables 2-3 and 2-4 in Tooth Formation Standards for detailed presentation of the data.



Lower first permanent molar 6-7 years



The first permanent molars are first to emerge

أول الشجرة بذرة

أشد الفاقة عدم العقل

Thank you!

