Dental Anxiety among the Students of Public Sector Medical Universities of Karachi

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Abstract
This study intended to gauge the ranks of dental anxiety among medical, dental and pharmacy students at Dow University of Health Sciences (DUHS) and Jinnah Sindh Medical University (JSMU) and to discover the bases of dental fear among them. This cross sectional descriptive analytical study was carried out among 400 medical, dental and pharmacy students of DUHS and JSMU among which 314 were returned. The questions engendered from standardized questionnaire of DAS (Dental Anxiety Scale). Questions from DAS and DFS along with statistics about age, sex, course of study, year of university admission and history of dental clinic Among the three different faculties MDAS of students of Dental Colleges were lower than the, medical colleges and pharmacy college student. Dental students have ominously lower ranks of dental anxiety than medical and pharmacy students. Females presented advanced ranks than male. Deficiency of dental tutoring may perhaps result in elevated level of dental anxiety amongst non-dental university students.

Keywords: Dental; Anxiety; Fear; Pakistan; Medical; Universities

Introduction
Fear of dental practice is one of the universal disturbing problem both for dentist and public [1]. It is a multisystem reaction to a perceived threat or danger. It reflects biochemical modifications in the body and patient’s personal history, memory and social status [2,3]. It refers to patients’ specific response towards dental situation accompanying strain [4]. Utmost individuals can live with consuming specific anxiety about going to the dental professional. Aimed at individuals with dental fear; however, the thought of a visit to a dental professional is petrifying. They might be so terrified, in actual fact, that they’ll do just around whatsoever to elude a visit to a dental professional [5].

Anxiety has been testified as one of the most rudimentary explanations for evasion and negligence of regular dental care [6]. Dental anxiety might also affect patient dentist affiliation and obscure proper diagnosis of the actual dental problem. Dental anxiety is a preventive obstacle for many patients who need to visit a dental clinic. Anxious patients were deliberated among the most stressful circumstances a dentist might face [7-9]. Oral diseases are principal public health apprehensions and their perserveness could be heightened by dental anxiety [10].

The eluding activities as well as the anxiety prior to dental management obligate an adverse influence on dental management and dental well being and can cause in recommendations to hospital sedation components for tedious dental treatment [11].

Dental anxiety might also affect patient, dentist affiliation and obscure proper diagnosis of the actual dental problem. Several studies reported significantly higher levels of dental anxiety among females; however, the clinical significance of this gender difference has been questioned. Dentists have propensity to rank problematic, disobliging and nervous patients as one of significant main sources of stress [2].

Nearly 40% of dentists invent general; psychological problems are the main purpose for dental anxiety [12]. Some researchers suggested that dental students have lower levels of dental anxiety in comparison with students in other majors which might be due to lack of adequate dental health education that results in a high level of dental anxiety among non-dental university students [13].

There is a strong confirmation in the relevant prose that the usage of the Corah Dental Anxiety Scale verified to be viable, valid and dependable test in the measurement of dental anxiety [13-16]. The dental literature lacks sufficient information about correlation between students ‘gender, different fields of study’ and the levels of dental anxiety. No previous studies concerning this topic are contemporary among Pakistani Medical University students; this incited the conduction of this study.

This study intended to gauge the ranks of dental anxiety among medical, dental and pharmacy students at Dow University of health sciences comprising of colleges names as Dr. Ishrat ul Ebad Khan Institute Of Oral Health Sciences, Dow International Dental College, Dow Dental College, Dow College of Pharmacy, Dow International Medical College and Dow Medical College and Jinnah Sindh Medical University.

Materials and Methods
Out of all students studying from first year to final year 400 students were arbitrarily selected. All students were well-versed about the nature of the study.

We gave a brief review of the study before beginning of the lecture and distributed questionnaires among students. 400 Questionnaires were distributed among students of Dow University of Health Sciences out of which 314 were returned.

The first part of the questionnaires comprises of questions regarding gender, studying institute, age group, studying year and questions concerning former exposure to lectures about oral health and treatment and about the nature of the last visit to the dentist were encompassed.

The questionnaire was generated by using questions from Corah’s Dental anxiety scale (DAS). Dental anxiety scale (DAS) consists of four questions with five choices, measured in score of 1 to 5, the variety of answers were relaxed, uneasy, tense, anxious, so anxious that I get physically ill. It includes the followings [17].

The DAS includes four questions which were:

- If you had to go to your dentist for treatment tomorrow, how would you feel?
Results

Out of 400 distributed questionnaires the number of completely filled returned forms were 345. Thirty one questionnaires were filled properly and were rejected. So the total number of questionnaires accepted for the study was 314 and the response rate found to be 78.5 percent.

Among 314 participants 109 were males which comprises of 34.7% of the total and 205 or 65.3% were females (Table 1).

Mean DAS score was found to be 8.62 (SD 3.29580). Mean DAS score among the males were 7.55 (SD 3.11) and among females it was calculated 9.18 (SD 3.25). Which shows that anxiety level was found to be higher in Females?

*Significance Using ANOVA test (p ≤ 0.05)

Since the data was collected from different institutes of two public sector medical universities, Majority of the participants were from Dow International Dental College which was 89 (28.3%). Jinnah Sindh Medical College 75 (23.4%), Dr Ishrat ul Ibad Khan Institute of Oral and Health 58 (18.5%), Dow college of Pharmacy 36 (11.5%), Dow Medical college 30 (9.6%), Dow Dental college 18 (5.7%) and Dow international medical college 8 (2.5%). (Chart 1 and table 2).

<table>
<thead>
<tr>
<th>Institute</th>
<th>Percent</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>DIKIOHS</td>
<td>58</td>
<td>18.5</td>
</tr>
<tr>
<td>DIDC</td>
<td>89</td>
<td>28.3</td>
</tr>
<tr>
<td>DDC</td>
<td>18</td>
<td>5.7</td>
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<tr>
<td>DCOP</td>
<td>36</td>
<td>11.5</td>
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<tr>
<td>DIMC</td>
<td>8</td>
<td>2.5</td>
</tr>
<tr>
<td>JSMU</td>
<td>75</td>
<td>23.9</td>
</tr>
<tr>
<td>DMC</td>
<td>30</td>
<td>9.6</td>
</tr>
<tr>
<td>Total</td>
<td>314</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Table 2: Institute wise distribution.

<table>
<thead>
<tr>
<th>Sex</th>
<th>N</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>109</td>
<td>34.7</td>
</tr>
<tr>
<td>Female</td>
<td>205</td>
<td>65.3</td>
</tr>
<tr>
<td>Total</td>
<td>314</td>
<td>100.0</td>
</tr>
</tbody>
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Table 1: Gender Wise Distribution.

Discussion

The escape from the dental and oral health is due to anxiety and fear is a very big problem and it results in transforming a small problem in to larger one. Lop-sided dental turnout may play a chief role in cumulating the stages of dental anxiety. If this is auxiliary to
the deficiency of dental health instruction, the high stages of dental anxiety possibly will be enlightened and undoubtedly established amongst the non-dental scholars [18]. This study was conducted to find out the level of dental anxiety among the students of public sector medical universities of Karachi Pakistan.

The mean DAS among the students found to be 8.62. This is almost equal to the previous study done in Pakistan. Our score is little bit less as this research is specifically involving the students of medical and dental colleges. Which had higher number of female [19].

In our study the dental anxiety levels found to be higher in females which is in agreement with the study done by Horst [20]. Level of DAS in females in our study was found to be 9.18 (SD 3.25), and in males it was 7.55 (SD 3.11). Study done by Peretz et al., shows almost the same results [21].

A previous research done in Pakistan also proves the result of our study that level of dental anxiety is higher in females [22].

Studies done in Indonesia and Argentina showed that the level of dental anxiety is higher in males and they are in contrast to our study. Many researches have shown that females are more regular visitors or dental clinics and are more conscious about their oral and dental health [23-25].

We have noticed a higher anxiety scale among the students of pharmacy which may be due to their low exposure to clinical sides.

In a study it is observed that males try to hide the fear may be because of the conventional gender role, so this may be the fact of low anxiety scale [26]. Factors like anger, jealousy, anxious are higher in females which results in higher anxiety scale. Psychopathological studies have revealed that females are over-represented regarding anxiety, worry and fear; a phenomenon regardless of its basis, appears to be highly generalized and widely found in various cultures and populations [27,28].

The level of anxiety is less among the students of a dental college and it is because the dental students are more often exposed to the dental procedure like anesthesia, extractions, filling etc. This result is also in the agreement of the previous study that show that dental students are less anxious [29].

In opinion of the present obtainable data, it seems that additional dental health knowledge dealings are essential to be functional among the Public sector non-dental university individuals of Karachi and the inhabitants in universal in directive to switch the stages of dental anxiety and advances patient dental assertiveness and amenability. Appropriate principles of dental health education can astound the undesirable possessions of character and lessen dental anxiety. Dental health care professionals must obtain teaching in the managing dental anxiety. Interference of dental health care professionals with in the dental setup.

Conclusion

It is concluded that the DAS in females is higher in two public sector Medical Universities of Karachi, Student of dentistry show low level of anxiety. Pharmacy student are more anxious than medical and dental students. Even though the contemporary study conducted in our government setup consumed the modified anxiety scale and scrutinized the stages of dental anxiety amid university pupils of public sector from diverse grounds of study and the sample size was illustrative and huge, additional researches are still compulsory to scrutinize the result of numerous associates on dental anxiety. Moreover, the statistical implication ought to not be at all times anecdotal as clinically.

References


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