



<b>Title</b>	<b>Attitude of Hong Kong private dentists towards treating preschool children</b>
<b>Author(s)</b>	<b>Lo, ECM; Loo, EKY</b>
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**VP-71 Oral hygiene practice in aging group at Thammasat Chalermprakiat hospital.** P. KITATHORN, R. SEESADD and Y.SONGPAISAN\*, (Thammasat University, Patumthani, Thailand)

Oral hygiene practice, namely tooth brushing is essential habit to maintain good oral health status in all age groups. The objective of this study is to describe the oral hygiene practice especially tooth brushing habit among aging population. One hundred subjects both males and females aged 55-65 year olds at Thammasat Chalermprakiat General Hospital in Patumthani, Thailand was interviewed about their tooth brushing behavior, type of toothbrush selection, method of tooth brushing, length of brushing time, frequency of tooth brushing, frequency of tooth brushing replacement. The results showed that all of them practice tooth brushing as their oral hygiene practice. 77% of them claimed that they brushed their teeth twice a day. 38% of them brushed their teeth for 1-2 minutes. 69% of them use Modified Bass technique for their brushing method. 64% of them indicated that they brushed with light stroke. 67% of them claimed their toothbrushes size were proper to their mouth. 66% of them used soft nylon tuft toothbrushes. 41% of them replaced their toothbrush every four months. 98% of them agreed that regular tooth brushing with appropriate method will prevent their oral diseases. 85% of them agreed that regular visit to dentist is important. Only 37% of them agreed that they should visit dentist once a year. 80% of them agreed that they should self assess their oral hygiene and status. 63% of them believed that a good oral health is considered by free of caries and tooth mobility. 77% of them agreed that having a good oral health is as important as having a good health. 86% of them would seek advice from dentist when they have oral health problem. In conclusion, the findings suggest that only one third of the study subjects have the knowledge of tooth brushing method, most of them did not brush their long enough in spite of having belief that a good oral hygiene practice will prevent their oral diseases. These findings are necessary baseline data for oral health promotion program in aging population.

**VP-72 Attitude of Hong Kong private dentists towards treating preschool children.** E.C.M. LO\*, E.K.Y. LOO (Faculty of Dentistry, University of Hong Kong, Hong Kong SAR, China)

Dental service for preschool children in Hong Kong is mainly provided by private general practitioners. The aim of this study is to describe the attitudes of the private dentists towards treating preschool children. A questionnaire set up by a team of experts for an international collaborative study was sent to 195 randomly selected private dentists in Hong Kong. The dentists were asked to complete the questionnaire and return it in a stamped addressed envelope provided. A reminder letter was sent two weeks later. The response rate was 55% and 107 completed questionnaires were collected. It was found that the respondents perceived many barriers for treating preschool children in the patient barriers domain. For example, over 70% of the dentists felt that children could not cope well with dental treatment procedures. In the dentist-barriers-domain, 75% of the dentist found it stressful to fill children's teeth though they acknowledged the need to do so. In the family-barriers-domain, over 60% of the dentists thought that parents were not helpful in encouraging children to have dental treatment. No major problems were found in the health service-barriers-domain. Results of this survey showed that most Hong Kong dentists' attitude towards treating preschool children was quite negative. There was a need for more continuing education for Hong Kong private dentists so as to change their negative attitudes. An alternative system for providing dental care to the preschool children deserved careful consideration.

**VP-73 Enamel Fluorosis and Dental Caries Status among 12 Year-Old Children in Ninh Thuan province.** TRAN D. THANH\*, NGUYEN T.T. HA, DAO T.H. QUAN (Faculty of Odonto-Stomatology, University of Medicine and Pharmacy at HCMcity, Vietnam).

The purpose of this study was to report enamel fluorosis and dental caries status of school children aged 12 residing in Ninh Thuan province, where in some areas a high content of fluoride was found in well water. A cross-sectional survey was conducted on a random sample of 491 children aged 12, attending schools in different districts of the province. Dental caries status was assessed following the guidelines of the WHO: "Oral Health Surveys - Basic Methods, 1997". Enamel fluorosis was scored according to Dean Index. All the data were recorded by 4 calibrated examiners ( $\kappa=0.7$ ). Drinking water samples were collected at various sites in the province and measured for fluoride concentration using the Standard Orion Fluoride electrode.

Dean Index	n	% of Dental caries	DMFT $\pm$ SD	Mean of Fluoride* concentration
0	232	26.7	1.35 $\pm$ 1.82	0.42 0.55
1-2	170	18.7	1.21 $\pm$ 1.89	1.06 0.61
3	89	9.6	1.42 $\pm$ 1.75	1.54 0.57

One way ANOVA,  $p=0.0000$ .  
The oral health survey in Ninh Thuan province showed low caries experience and moderate enamel fluorosis, which were strongly related to fluoride concentration in water.

**VP-74 Dental Fluorosis in 12 Year-Old Children in A Junior High School of HCM City.** NGUYEN T.T. HA\*, HUYNH THAO, DAO T.H. QUAN (Faculty of Odonto-Stomatology, University of Medicine and Pharmacy at HCMcity, Vietnam)

The aim of this study was to evaluate the prevalence and severity of dental fluorosis among 12 year-old schoolchildren (grade 6). Hong Bang junior high school was selected due to its attendance by children living in different areas of HCMcity. A total of 309 children, living in 3 different regions of drinking water (stable fluoride concentration - SF, instable fluoride concentration - ISF, non fluoride - NF) were examined for dental fluorosis by 4 calibrated examiners using the Dean index, and Thylstrup-Fejerskov index (TF). The results showed that fluorosis community indices were slight in SF and ISF, borderline in NF. The differences were statistically significant. (ANOVA,  $p<0.05$ ).

	Dean 0	Dean 1	Dean 2	Dean 3	Dean 4	Dean 5	$\Sigma$	FCISD					
	n	n	n	n	n	n							
SF	81	57	7	4.9	25	17.6	23	16.2	6	4.2	0	142	0.65 $\pm$ 0.89
ISF	67	49.3	16	11.8	22	16.2	22	16.2	9	6.6	0	136	0.74 $\pm$ 0.94
NF	23	74.2	4	12.9	2	6.5	2	6.5	0	0	0	31	0.26 $\pm$ 0.55
$\Sigma$	171	55.34	27	8.74	49	15.86	47	15.21	15	4.85	0	309	0.65 $\pm$ 0.90

The distribution of TF scores assessing each tooth individually showed a relative autonomy in the response to the variations in fluoride content in water. Out of the 309 schoolchildren examined for dental fluorosis, 18% had all teeth with TF 1 or higher; less than 2% with TF 2 or higher; less than 1% with TF 3, 4 or higher. In conclusion, dental fluorosis in 12 year-old schoolchildren was slight, with statistically significant difference between those living in fluoridated and non fluoridated areas.

**VP-75 The Uptake of Fluoride Released from Shellac Varnish into Enamel: An In Situ Study.** TRAN T. NGA\*, PHAN A. HUNG, HOANG T. HUNG (Faculty of Odonto-Stomatology, University of Medicine and Pharmacy at HCM City, Vietnam).

A previous in-vitro study showed that F release pattern of a Vietnamese shellac based varnish enriched with 5% NaF (Shellac F) was comparable to that of Duraphor\* and Fluor Protector\* (Phan A.Hung *et al.*, 1999). The objective of the present *in situ* study was to assess the uptake of fluoride released from Shellac F into tooth enamel. Thirty sterilized enamel slabs, prepared from freshly extracted bovine incisors, were fixed with orthodontic appliances to the posterior teeth of fifteen volunteers. Two weeks after the slabs were placed *in situ*, the subjects were divided into 3 groups. In Group 1, Shellac F varnish (1ml) was painted on all tooth surfaces, avoiding the slabs; in Group 2, Duraphat\* (Colgate-Palmolive) was used in the same manner. Group 3 received a similar treatment with fluoride-free shellac varnish. All the subjects were submitted to caries challenge with a 5% glucose solution, twice a day, for four weeks. The slabs were then removed and fluoride uptake was measured using etching technique (Hallsworth *et al.*, 1976).

Enamel depth	Fluoride content in enamel slabs (mean and standard deviation)		
	Shellac F (ppm)	Duraphat (ppm)	Non F shellac varnish (ppm)
1 $\mu$ m	1820(920)A*	2286(1124)A*	312(278)B*
5 $\mu$ m	815(648)A*	1284(939)A*	183(160)B*
10 $\mu$ m	608(575)B*	1042(867)A*	149(140)B*

(\* ) Means followed by different letters are statistically different (Tukey,  $p<0.05$ )  
It is concluded that fluoride uptake into enamel up to a depth of 5  $\mu$ m was comparable when using Shellac F and Duraphat\*. Therefore, it is stipulated that Shellac F could have a potential to inhibit caries development.

**VP-76 THE EFFECT OF SERE DAPUR (CYMBOPOGON CITRATUS) OIL ON THE INFLAMMATION OF ORAL MUCOUS MEMBRANE.** Widurini DS\*, Sarwono. AT, Juniastuti M, Auerkari EI, Sari DK, Fadluna T, Nurani SA PD. (Department of Oral Biology—Faculty of Dentistry University of Indonesia)

The recent economic crisis has increased the needs for indigenous solutions to relieve the inflammation problems in the oral mucous membrane. One solution could be sought from Sere oil, which contains *Myrcene* as a potentially effective ingredient. To study the potential of Sere oil, Sere Dapur (*Cymbopogon citratus*) oil and aquadest were applied into the inflammation of oral mucous membrane of thirty Wistar rats for 3 days. The rats were divided into two groups as experimental and control groups. Microscopic examination of the groups showed a significant reduction of the inflammation score in comparison with the control group. This suggests that Sere Dapur (*Cymbopogon citratus*) oil could be used to reduce the inflammation symptoms of the oral mucous membrane.

**VP-77 Patient satisfaction level at an academic dental care unit.** SARASATI (Dental Hospital, Trisakti University, Jakarta, INDONESIA)

The application of effective patient satisfaction strategies within clinical marketing will create sustained competitive advantage, such as performance and profit acquisition. This study measured the patient satisfaction level at an academic dental care unit by means of a questionnaire. A customized questionnaire was developed to evaluate four attribute variables—belief components, evaluation, normative belief, and motivation. 200 new and old patients of Trisakti Dental Hospital were selected using Purposive Random Sampling. The Fishbein Attribute Multimodel (Fishbein Attitude and Fishbein Behavior Purpose Model) was used to analyse the decision in relation to patient satisfaction to treatment outcomes and facilities; with a 7-point Likert scale (-3= Very Unsatisfied; 0=Neutral; +3= Very Satisfied). Mean scores for questionnaire items were - treatment belief variables (1.11), evaluations (1.36); normative beliefs (0.70), and motivation (1.15). The Fishbein Attribute Multimodel Satisfaction Index scores for patient attitude were 20.8448 (Satisfied) and for behaviour values were 17.0703 (Satisfied); (Maximum score is +36 (Most Satisfied) with 0=Neutral). Conclusion: Most patients were satisfied with the treatment outcome and facilities at the academic dental care unit.