

ORIGINAL ARTICLE

Tooth loss: Are the patients prepared?

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Abstract

Background and Aim: Tooth loss is associated with esthetic, functional, psychological, and social impacts on the life of individuals. This study was designed to find out how Nigerians feel about losing their teeth and what effects, if any, this has on their lives. Most of the problems presented to the dentist as difficult denture tolerance could be as a result of the emotional effects of tooth loss rather than problems from the denture itself.

Materials and Methods: The study was carried using a self-administered questionnaire to consenting adult patients undergoing tooth extraction at the Oral and Maxillofacial Clinic, University College Hospital, Ibadan, Nigeria. The data collected were analyzed using SPSS, version 15.5.

Results: A total of 90 respondents completed the questionnaires; 35 (27.6%) were males while 55 (43.3%) were females. The respondents were aged 0–70 years. Immediate acceptance of tooth loss was noted in 88 (69.3%) cases, but 6 (47%) accepted the loss only after 1 year, while 8 (6.3%) of the cases found it difficult to accept losing their teeth and incidentally, all of them were 30 years and above. Only 52 (40.9%) of the patients were prepared for the emotional effect of losing their teeth. A feeling of relief immediately following tooth extraction was expressed by 75 (43.9%) cases and of these 32 (47.8%) were females. The emotional effects following teeth loss were sadness 22 (12.9%) cases, depression in 11 (6.4%), feeling of losing body part in 24 (14%), feeling of aging in 4 (2.3%), while 13 (7.6%) respondents felt unconcerned.

Conclusion: We observed that emotional effects of tooth loss are also experienced among our patients with a range of emotions quite similar to those observed by previous authors from the developed world. The significant number of patients that failed to come to terms with their tooth loss indicates that the effect of tooth loss on self-esteem and self-image is not short lived as it has been assumed.

Key words: Emotional effects and denture rehabilitation, tooth loss

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Introduction

Tooth loss is commonly associated with esthetic, functional, psychological, and social impacts on the lives of individuals. Visible and invisible disfigurements are recognized as having profound effect on these individuals.^[1]

Previous studies show that many patients felt unprepared for the consequences of losing their tooth. The unexpected depth of feeling existing among those who lost their tooth, particularly in those who are apparently coping well with denture use, was a surprise to previous observer.^[2] A wide

range of reactions to tooth loss which include feeling of bereavement, loss of self-confidence, concerns about appearance, and self-image, keeping tooth loss a secret, seeing it as a taboo subject that could not be discussed with people. All these emphasize the need for prosthodontic privacy and a need to prepare patients for the emotional effect following tooth loss. This is surprising, especially in the case of partial tooth loss, which also resulted in a feeling of having lost a part of oneself.^[3-5]

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While psychological reactions to various forms of losses of bodily organs following surgical operations such as hysterectomy and mastectomy were documented in various parts of literature, attention is being drawn to the possible emotional effect of tooth loss.^[6]

Some authors opined that some of the problems presented to the dentist as resulting in difficult denture tolerance could be as a result of the emotional effect of tooth loss rather than problems from the denture itself.

It is suggested that information should be provided prior to tooth extraction. This could be carried out by the use of verbal communication information leaflets, video informatics, and communicating with someone who had had a similar experience. The approach adopted should vary depending on each patient's temperament, since some patients may need a longer explanation to appreciate the facts while others may need little or no explanation at all.^[5]

Aim

This study was embarked upon to find out how Nigerians feel about losing their teeth and what effects, if any, tooth loss has on their lives. Previous studies in the western (Caucasian population) world show a wide range of emotional effects following tooth extraction. We set out to find out the existence of if any and also how widespread is the emotional effect of tooth loss in our environment.

Materials and Methods

An open-ended questionnaire-based study utilizing questions from a previous qualitative study^[2] was administered to consenting adult patients undergoing tooth extraction at the Oral and Maxillofacial Clinic of the University College Hospital, Ibadan, Nigeria. This questionnaire was based on an open discussion among a small group of individual who had lost all or a few of their teeth. The participants had the chance to express their views and to make added comments.

The data from this descriptive study were analyzed using SPSS version 15.5.

Results

Ninety respondents completed the questionnaires, while 37 left some questions unanswered. There were multiple responses to some of the questions. The age distribution shows that 55 (43.3%) respondents were aged 0--30 years, 40 (31.5%) were aged between 30 and 50 years and 21 (16.5) were aged between 50 and 70 years [Figure 1]. Of the 90 respondents, 35 (27.6%) were males while 55

(43.3%) were females with a male:female ratio of 1.16 [Figure 2].

More females than males lost their teeth in all age groups, though the value almost tallied in the 50--70 age group (52.9% and 47.1% respectively). Immediate acceptance of tooth loss was noted in 88 (69.3%) cases, but 6 (47%) accepted the loss only after 1 year. Eight (6.3%) of the cases found it difficult to accept losing their teeth and incidentally all of them were 30 years and above [Table 1].

Decreased self-confidence was noted in 25 (19.7%) cases, while a decrease in confidence associated with eating in

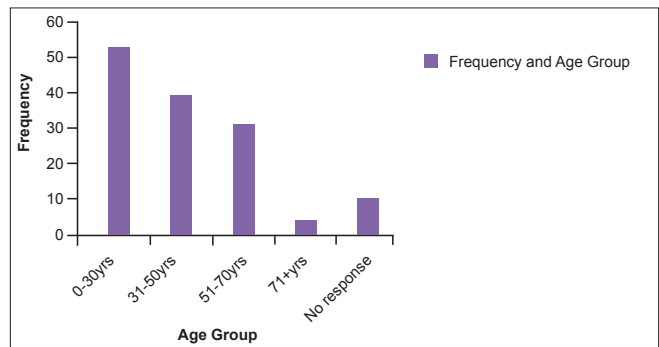


Figure 1: Age distribution

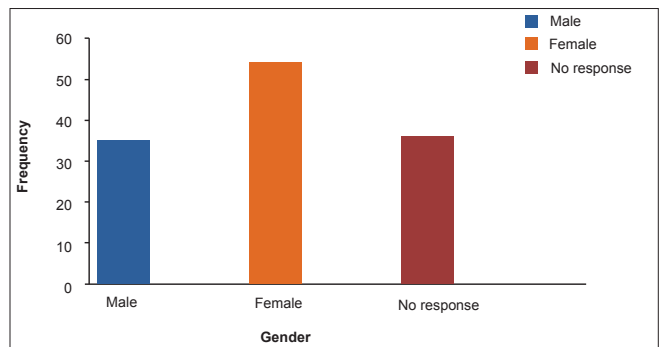


Figure 2: Gender distribution

Table 1: Acceptance of tooth loss

	Frequency	Percentage
Do you find it difficult to accept losing your teeth?		
Yes	21	16.5
No	98	77.2
No response	8	6.3
How long was it before you accepted losing your teeth?		
I still haven't accepted it	8	6.3
Immediately	88	69.3
Within 6 months	6	4.7
Within a year	2	1.6
It took over a year	6	4.7
No response	17	13.4
Total	127	100.0

public, as well as meeting people in public, was noted in 17 (13.4%) and 28 (22.0%) cases respectively. Less confidence with laughing in public was noted in 12 (9.4%) of cases [Table 2].

Only 52 (40.9%) of the patients were prepared for the emotional effect of losing their teeth, while 33 (15.9%) of the cases were undecided about their preparedness. Of the 42 (33.11%) patients that felt unprepared for their teeth loss, 21 (40.4%) were females [Table 3].

A feeling of relief immediately following tooth extraction was expressed by 75 (43.9%) cases and of these 32 (47.8%) were females.

The emotional effects following tooth loss were sadness in 22 (12.9%), depression in 11 (6.4%), felling of losing body part in 24 (14%), feeling of aging in 4 (2.3%), while 13 (7.6%) respondents felt unconcerned [Figure 3].

Discussion

In this study, 42 (33.1 %) patients felt they were unprepared for tooth loss [Table 3]. This is less than the result from the study by Davies D. M. *et al.* in the UK, in which 45% of the participants felt unprepared for their tooth loss. In their study over three quarters of these cases felt that better preparedness by the dentist would have helped.

Although 33 (15.9%) of the respondents expressed indifference to their edentulous state,

However, there was substantial effect on the well-being and the quality of life of the individuals following tooth loss. These include disabilities such as impairment of speech, limitation of social interaction in some cases due to the embarrassment associated with wearing denture. This is reflected in the various ranges of emotional effects of tooth loss on the participants. In this study, 24 (14.0%) respondents felt as though they lost a part of themselves following tooth loss [Figure 3]. Qualitative and quantitative studies on the emotional effects of tooth loss have shown that many people find it difficult to come to term with tooth loss and often feel less confident, restrict their social activities and avoid forming close personal relationships.

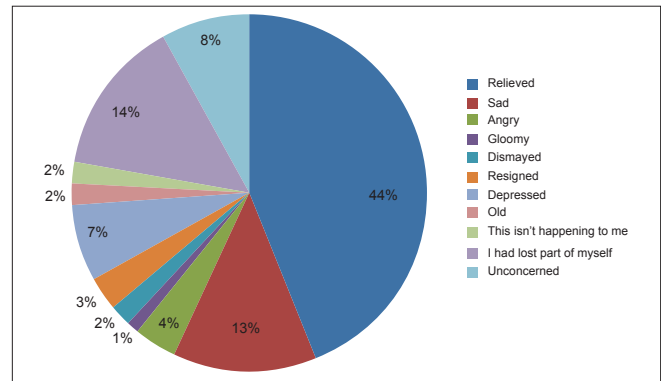


Figure 3: General emotional effect of tooth loss

	More Confident	Did not affect my confidence	Less confident	Don't know
Did losing your teeth affect your self confidence	7 (5.5)	83 (65.4)	25 (19.7)	12 (9.4)
How confident do you feel doing the following activities	9 (7.1)	86 (67.7)	21 (16.5)	11 (8.7)
Eating in public	10 (7.9)	86 (67.7)	17 (13.4)	14 (11.0)
Meeting people in public	9 (7.1)	77 (60.6)	28 (22.0)	13 (10.2)
Laughing in public	6 (4.7)	72 (56.7)	12 (9.4)	37 (29.1)
Forming close relationship	7 (5.5)	68 (53.5)	11 (8.7)	41 (32.3)

	Frequency	Percentage
Do you feel prepared for the effect that the loss of your teeth had on you?		
Yes	52	40.9
No	42	33.1
Don't know	33	15.9
Total	127	100.0
If No, which of the following would have		
A video about the effects of tooth loss	3	8.1
Talking to someone who had already experienced tooth loss	10	27.0
A leaflet about tooth loss	4	10.8
An explanation from the dentist	20	54.1
Total	37	100.0

Self-perceived prosthodontic needs are said to be determined by functional, esthetic, psychological, and social impacts due to tooth loss.^[5,6] These impacts have detrimental effects on oral health related quality of life evaluation.

Financial constraints is the most commonly reported reason for not seeking treatment after tooth extraction (88.8%), others include lack of time (9.0%), feeling it is not necessary (7.6%), and poor motivation (5.2%). Poor motivation in seeking prosthodontic management may be attributed to the inability to overcome the emotional effect of losing their tooth.

Bergendal *et al* (1989) acknowledged that total loss of teeth is a serious life event.^[5] The impact of dental ill health on daily living is well recognized^[2,3,7,8] though it is only recently that attention is being paid to the emotional effect of tooth loss.

Of the respondents who felt unprepared for tooth loss, 20 (54.1%) felt that an explanation by the dentist would have made them better prepared, while 10 (27.0%) suggested that talking with someone with a previous experience of tooth loss would have been of significant help in preparing them for the emotional effect of the tooth loss.

It is well established that people with dental facial abnormalities experience social consequences including degrees of social avoidance and being perceived as possessing negative personality characteristics. Minor abnormalities of the facial region can result in a social stigma and people with facial disfigurement are among those covered by the 1995 Disability Discrimination Act.^[9]

Conclusion

The indications for tooth extraction leading to tooth loss are dental caries, road traffic accidents, and falls in children and adults. However, in the elderly, periodontal diseases are the most common causes.

The number of patients that failed to come to terms with their tooth loss indicates that the effect of tooth loss on self-esteem and self-image is not as short lived as has been assumed; therefore preparing patients for tooth loss is of great necessity to the dentist.

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