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DENTAL PATIENTS WITH PSYCHOLOGICAL PROBLEMS

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ABSTRACT

The study was aimed to assess the role of dental surgeons in identifying dental patients with psychological problems.

A cross-sectional study was conducted and a convenience sampling technique was used. The study was conducted from August 2018 to February 2019 and was approved by the ethical review board, (Ethical Approval no. BDC/ERB/2018/001). A pre-structured validated questionnaire was used for the survey. Two hundred seventy two registered GDPs and Postgraduates from different teaching hospitals present on the day of data collection were included in the study. These questionnaires were then distributed by the researchers to the dental surgeons of each designated hospital and filled up questionnaires were collected on the same day.

The participants included were 208 GDPs and 64 postgraduates. The present study reported that 179(74.9%) GDP and 60(25.1%) PG encountered dental patients with psychological problems. One hundred thirty (74.3%) GDPs and 45(25.7%) PGs provided simple treatment and manage the psychological illness.

Based on these findings of the study, it is concluded that dental surgeons do come across problems in identifying their dental patients with psychological problems.

Keywords: Anxiety, Awareness, Communication, Dental Practice, Management, Psychiatric.

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INTRODUCTION

In this modern era, there has been a paradigm shift in the role of dental surgeons in their clinical practices.¹ A dental surgeon is now no longer considered to be an individual working but rather as a health care professional working with a team of specialists from different fields of medicine.¹ With the advancement of Knowledge and latest equipment, modern dentistry

now involves dental surgeons in the fields of medical sciences as well.²

The most common psychiatric disorders that dental specialists are likely to encounter in their everyday practice are neurotic disorders, i.e. depressive disorders, anxiety disorders, adjustment disorders and somatoform disorders and, more rarely, psychotic disorders, drug and alcohol abuse, and eating disorders.³ These illnesses are now termed as psychological disorders which are still considered a stigma in society.⁴ The prevalence of psychological disorders amongst patients seeking dental treatment has been increasing.⁵ Approximately 17.6%⁶ and according to some predictions they will be the second cause of illness in 2020.⁷ Among the general population, one in four people will suffer an episode of mental disorder during their lifetime.^{8,9} Studies have shown that symptoms of anxiety and depression are common in the community.¹⁰ In a study of 10,000 adults in the UK, Meltzer et al¹¹ found a 16% point prevalence of psychiatric morbidity, of which mixed anxiety and depressive disorders at 8% were the most common. In primary medical care settings, the prevalence of total psychiatric morbidity is substantially higher¹², in the

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order of 23-25%. Friedlander et al¹³ stated that dentists should be concerned with the identification of patients with depression due to its extensive association with dental disease.

Dental surgeons often experience difficulties when trying to give a convincing explanation about the patient's symptoms and they can face challenges in diagnosis and management.¹⁴ Generally dental surgeons felt that they are ill-prepared and inadequately trained to manage psychological ill patients and therefore refer those patients to their general medical practitioner or referred patients to dental specialists while others tried to help patients by using physical treatments for psychological illnesses.¹

In developing countries, mental illnesses are considered as social stigma and therefore patients may fear disclosing a psychotic illness with a dental surgeon.¹⁰ At this point the dentist should educate patients about the role of psychological factors in oral disease and convince them to seek the opinion of the psychiatrist.²

Little is known about the role of general dental surgeons in identifying psychological problems. There is a need to assess the role of dental surgeons in identifying psychotic patients and their management.¹⁰

The present study was aimed to assess the role of dental surgeons in identifying patients with psychological problems.

MATERIALS AND METHODS

A cross-sectional study was conducted and Registered GDPs and postgraduates from different teaching hospitals were included in the study. The study was conducted from August 2018- February 2019 and was approved by the ethical review board, (Ethical Approval no. BDC/ERB/2018/001). A convenience sampling method was used and participants present on the day of data collection were included in the study. The sample size was computed by taking the 22% prevalence rate and using open EPI version 3.03a at 95% confidence interval when a=5% and was calculated 272.¹⁵ A pre-structured validated questionnaire developed by Gupta was used for the survey.² Questionnaire was divided into three sections. The first section included questions of demographic data. The second section included questions asked about the assessment of dental surgeons in identifying psychotic patients. The third section included questions regarding measures taken for management, communication gaps between dental and medical practitioners. These questionnaires were then distributed by the researchers to the participants from each hospital. All of them were informed about the questionnaires and confidentiality and that 15 minutes' time was allotted to fill the questionnaire. Completely filled questionnaires were collected on the same day.

The data was entered and analyzed by using SPSS (IBM SPSS Statistics for Windows, version 22 released 2010, IBM Corp, CA, USA).¹⁶ Frequencies and percentages were calculated. Cross tabulations were done to assess the association of GDPs and postgraduates with the variables. A p-value of less than 0.05 was considered significant.

RESULTS

Out of 272 dental surgeons, there were 130(47.8%) males and 142(52.2%) females working in Dental teaching hospitals of Karachi. The participants included 208 GDPs and 64 postgraduates; (Table 1)

The present study reported that 179(74.9%) GDP and 60(25.1%) PG encountered dental patients with psychological problems. (Table 2)

130(74.3%) GDPs and 45(25.7%) PGs provided the basic treatment along with the psychological illness. (Table 3)

171(76%) GDPs and 54(24%) PGs agreed that dental practitioner's skills should be improved to manage psychiatric patients. (Table 4)

DISCUSSION

Dental practice is now becoming more complex and challenging.¹² The prevalence of psychiatric disorders has been increasing in patients presenting to dental practices.¹⁰ The present study was conducted to assess the role of dental surgeons in identifying patients with psychotic problems.

Dental surgeons should be able to identify psychotic patients in their dental practice as highlighted because they often encounter such problems.² The present study reported that 194(75.2%) of GDP and 64(24.8%) of PG reported concern when identifying dental patients with psychological problems. (p= 0.03) Abdurrahman¹⁴ in a study reported that all dental practitioners reported concern when identifying patients with psychological disorders. Gupta et al² in a study reported that 109 (93.9%) of GDPs and 68(94.4%) of PG reported concern when identifying dental patients with psychological disorders.

Psychiatric disorders are now common in patients

TABLE 1: DEMOGRAPHIC PROFILE

| Gender | no | % |
|--------------|-----|-------|
| Males | 130 | 47.8% |
| Females | 142 | 52.2% |
| Participants | | |
| GDPs | 208 | 76.5% |
| PG | 64 | 23.5% |

TABLE 2: AWARENESS REGARDING THE ROLE OF DENTAL SURGEONS IN MANAGING PSYCHOTIC PATIENTS

| Questions | Yes n (%) | | No n (%) | p-value |
|--|------------|-----------|-----------|---------|
| | GDPs (%) | PG (%) | | |
| Encountered dental patients with psychological problems. | 179(74.9%) | 60(25.1%) | 33(12.1%) | 0.09 |
| Concern of dental surgeons in identification of dental patients with psychological problems. | 194(75.2%) | 64(24.8%) | 14(5.1%) | 0.03 |
| Dental diseases might be associated with or caused by psychological problems. | 163(75.1%) | 54(24.9%) | 55(20.2%) | 0.29 |

TABLE 3: ASSESSMENT OF MANAGEMENT OF PSYCHOLOGICAL PROBLEMS

| Questions | Yes n(%) | | No n(%) | p-value |
|---|------------|-----------|------------|---------|
| | GDPs (%) | PG (%) | | |
| Providing basic treatment along with the psychological aspect of disease. | 130(74.3%) | 45(25.7%) | 97(35.7%) | 0.25 |
| Extra time allocated to listen and then refer the patients to a specialist. | 159(75%) | 53(25%) | 60(22.1%) | 0.28 |
| Refer the patients to medical doctor. | 162(76.4%) | 50(23.6%) | 60(22.1%) | 0.96 |
| Refer the patient to a psychiatrist | 150(74.6%) | 51(25.4%) | 71(26.1%) | 0.22 |
| Refer the patient to psychiatrist is considered a societal stigma for the patients. | 150(76.9%) | 45(23.1%) | 77(28.3%) | 0.78 |
| Prefer prescribing medications to psychological patients. | 106(77.4%) | 31(22.6%) | 135(49.6%) | 0.72 |
| Prefer short appointment to psychological patients. | 165(75.7%) | 53(24.3%) | 54(19.9%) | 0.54 |
| Prefer morning appointment to psychological patients. | 148(78.7%) | 40(21.3%) | 83(30.6%) | 0.17 |

TABLE 4: ROLE OF DENTAL SURGEONS IN MANAGEMENT OF PATIENTS WITH PSYCHOLOGICAL PROBLEMS

| Questions | Yes n(%) | | No n(%) | p-value |
|--|------------|-----------|------------|---------|
| | GDPs (%) | PG (%) | | |
| Satisfying patient's unusual requests by administering unnecessary dental treatment | 120(79.5%) | 31(20.7%) | 121(44.6%) | 0.19 |
| Skills of the dental practitioners should be improved to handle such patients | 171(76%) | 54(24%) | 46(17%) | 0.74 |
| Medical practitioners are considered better trained to evaluate mental health of the patient | 149(76.4%) | 46(23.6%) | 77(28.3%) | 0.97 |
| Communication gaps between Dental surgeons and medical specialists | 157(78.5%) | 43(21.5%) | 72(26.5%) | 0.18 |

visiting dental surgeons but consultation of psychiatric patients in dental practice is still in its early stage.¹⁷ Recognizable psychological disorder is seen in up to 30% of patients attending dental clinics with complaints of pain and distress^{18,19} but if the disease is hidden hence remained untreated.²⁰ Gupta et al² in a study reported

that 99(85.3%) of GDP and 67(93.5%) of PG were aware that dental diseases are related to psychological disorders. Abdurrahman¹⁴ in a study reported that all the practitioners agreed that dental conditions or diseases can be associated with or cause psychiatric problems. The present study reported that 163(75.1%) of GDPs

and 54(24.9%) of PG were aware that dental diseases may be related to psychological disorders. ($p=0.29$)

Dental surgeons in general practice do encounter psychotic patients with anxiety, prolonged bereavement reactions, or patients with a high degree of disappointment.¹ Gupta et al² in a study reported that 82(70.69%) of GDPs and 51(70.8%) of PG encountered dental patients with psychological problems. Abdurrahman¹⁴ in a study reported that 114(86.3%) of the GDPs encountered dental patients with a psychological problem. The present study reported that 179(74.9%) of GDP and 60(25.1%) of PG encountered dental patients with a psychological problem. ($p=0.09$)

GDPs generally presumed one of the two approaches when referring a patient to a dental specialist. Lloyd – Williams et al¹⁰ in a study reported that 29% of GDPs provided some basic treatment and then referred the patient to the specialist, 71% of the remaining GDPs reported that they would prefer to refer such patients to the dental specialist without giving any treatment and only 9% of GDPs stated that they referred dental patients with possible mental health problems to their general medical practitioner. Gupta et al² in a study reported that 21.5% of GDPs provided basic treatment and treated the psychological problems but only 8 of the dental practitioners referred their patients to a psychiatrist and 15 referred to medical practitioners. Abdurrahman¹⁴ in a study reported that 14% responded that they would provide treatment for dental-related problems and ignore the psychiatric illness and 11% agreed that basic dental treatment should be provided before focusing on psychiatric treatment. However, 51% of the dentists preferred direct referral to a psychiatrist without offering any dental treatment. The present study reported that 130(74.3%) of GDPs and 45(25.7%) of PG provided simple treatment and manage the psychological cause of disease. ($p=0.25$) One hundred and sixty-two (76.4%) of the GDP, 50(23.6%) of PG referred their patients to the medical practitioner. ($p=0.96$). One hundred and fifty (74.6%) of GDPs and 51(25.4%) of PG referred the patients to a psychiatrist. ($p=0.22$)

In certain conditions where GDPs do not refer dental patients with psychiatric problems, A study done by Friedlander et al reported that they spent more extra time to listen and then treat the patient.¹³ Abdurrahman¹⁴ in a study reported that around 24% of dental practitioners agreed that they should allocate extra time to interact with psychologically ill patients. The present study reported that 159(75%) of GDPs and 53(25%) of PG allocated extra time to the patients. ($p=0.28$) Lloyd-Williams¹⁰ in a study reported that 25(46%) of them provided treatment accordingly. It is recommended that dentists should spend much more time assessing psychiatrically ill patients and that further

treatment be planned properly by collaborating with appropriate medical professionals.¹⁴

Referral to a psychiatrist was associated with social stigma and stated that patients were reluctant to be referred when informed about their psychological problem. This is consistent with the perception that people who are considered as mentally ill have more negative aspects and thus more societal refusal regardless of their behavior.²¹ Abdurrahman¹⁴ in a study reported that most participants believed that psychiatric referral was socially stigmatizing. The present study reported that 150(76.9%) of GDP and 45(23.1%) of PG believed that psychiatric referral was socially stigmatizing. ($p=0.78$)

Lack of formal training is a significant barrier that could be resolved simply by introducing dedicated training programs designed to develop the understanding and the potential impact of the major diagnostic conditions of psychotic illnesses concerning oral health.²⁰ Abdurrahman¹⁴ in a study reported that most of the participants felt that they lacked the competence to manage psychologically ill patients and wanted to improve their skills. Gupta et al² in a study reported that 67(93.05%) of PG and 96(82.7%) of GDP were found to be concerned that their skills have to be enhanced to manage psychiatric patients. The present study reported that 171(76%) of GDP and 54(24%) of PG were concerned that their skills should be enhanced to manage psychiatric patients. ($p=0.74$) Therefore a dental surgeon should be competent to handle and manage patients with psychological problems.

Limitations

The study was limited to small sample size and limited study settings. Further studies are required on a larger scale.

CONCLUSION

The present study concluded that dental surgeons do encounter problems in identifying their dental patients with psychological disorders. Therefore there is a need for formal training in psychological counseling by adding it to the undergraduate dental curriculum.

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- | | |
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| 2 Aisha Wali: | Contributed to data analysis, final write-up and drafting of the manuscript |
| 3 Muhammad Ain ul Haq: | Contributed to final revision of the manuscript |
| 4 Sadia Naqvi: | Contributed to literature search |
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