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Original Article

Cleaning Aids in Dentistry: A Cognizant Survey

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ABSTRACT:

Objective- To assess the knowledge regarding various cleaning aids in dentistry among patients visiting OPD of Oral Medicine and Radiology. **Material and Methods-** A cross-sectional questionnaire was employed to evaluate awareness among patients attending OPD of Department of Oral Medicine & Radiology in Babu Banarsi Das College of Dental Sciences, Babu Banarsi Das University Lucknow. A total of 300 questionnaires were distributed among patients and results were collected and analyzed statistically using SPSS software version 17.0. **Results-** Toothbrush & toothpaste found the major aid (59.3%) while toothbrush & toothpowder and datun were reported at 21.0% & 19.7% respectively. A majority of the responders did not use any secondary methods for plaque control. **Conclusion-** The present study clearly shows that there is a lack in appropriate oral hygiene aid awareness amongst study participants. The need to educate regarding proper oral hygiene care & to conduct outreach programs by dental professionals is the call for hour.

Key words: Dental care, oral hygiene.

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INTRODUCTION

Healthy life style highlights an important aspect of regular health monitoring that is '*dental care*' which is often neglected and underestimated, but it needs to be valued and practised as it affects overall systemic health greatly (Jain N et al 2012). The viable etiological factors leading to these oral diseases are genetic predispositions, developmental abnormalities, poor oral hygiene and traumatic incidents (Tash RH et al 1969). Oral diseases are a major public health concern owing to their high prevalence and their effects on the individual's quality of life (Butt AM et al 2009).

Knowledge about oral hygiene habits is considered to be an important proviso for health issues, in spite of the fact that there is poor association between knowledge and attitude in cross-sectional studies, although studies have shown that there is confederacy between awareness and desirable oral condition (Bhat PK et al 2010). Time to time various studies have been done to evaluate awareness and attitude of

people about oral health, still there is destitution of education in rural population, which makes 70% of population in India (Patil AV et al 2002). Moreover, people residing in urban areas, in spite of having unchallenging opportunity to dental care, marked negligence is seen in dental diseases (Gundala et al 2010). Therefore the present study was conducted to assess the oral hygiene awareness and practices amongst out patients in the Department of Oral Medicine & Radiology, Babu Banarsi Das College of Dental Sciences, Lucknow, Uttar Pradesh (India).

MATERIAL AND METHODS

A cross-sectional questionnaire study was employed to evaluate awareness among patients attending OPD of department of Oral Medicine & Radiology, Babu Banarsi Das College of Dental Sciences. The study was conducted after obtaining permission from Institutional Ethical Committee. A verbal consent of all patients was also taken.

A convenient sampling technique was employed to recruit the study participants. Empirical sample size determination was employed to obtain the sample size which came up to 300.

A pre-designed & pre-evaluated questionnaire containing 10 variables was used for the present study. The patients included were from both rural and urban population and

constitutes both literate and illiterate groups between 18 to 70 years of age. The study questionnaires constitute information regarding name, age, gender, education, occupation and address. The questionnaire was further sorted to assess the knowledge regarding various cleaning aids in dentistry. Results were subjected for statistical analysis.

QUESTIONNAIRE USED IN THE STUDY

1- Do you clean your teeth?
I. Yes II. No

2 – How do you clean your teeth ?

- I. Toothbrush and toothpaste**
- II. Toothbrush and powder**
- III. Others (Datun, Finger, Charcoal powder)**

3 – How often do you brush your teeth each day?

- I. Once II. Twice**
- III. More than twice IV. Sometimes**

4- What type of tooth brushing methods do you employ?

- I. Vertical II. Horizontal III. Combined**

5- Which secondary methods for plaque control do you use?

- I. Dental floss II. Interdental brushes**
- III. Toothpicks IV. None**

6- Do you clean your tongue?
I. Yes II. No

7- Have you ever noticed smell from your mouth?

- I. Yes II. No**

8-Do you know oral health is related to systemic health?

- I. Yes II. No**

9-How often do you visit a dentist?

- I. Only in problem**
- II. Once in three months**
- III. Once in 6 months**
- IV. Between 1 and 2 years**

10- Do you think it is essential to meet a dentist after 6 months?

- I. Yes II. No**

The data was recorded to Microsoft Excel and then results were scrutinized by using SPSS statistical software.

RESULTS

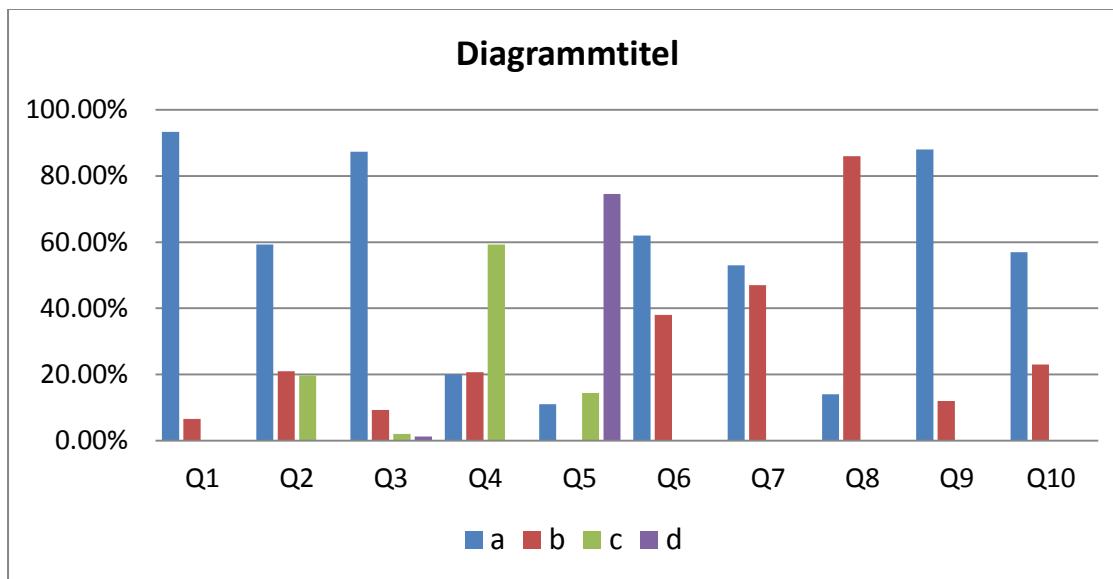
In the present study a total of 300 patients attending OPD of dental college formed the study sample. A clear male predilection was noted with 72% (216) male members while the rest were females (27%). In view of their educational background, 65% were educated while 35% were illiterates. Approximately, 71% of the study patients belonged to rural areas while 29% were from urban areas. A majority of study participants reported they clean their teeth 93.3% (280). Toothbrush & toothpaste found the major aid (59.3%) while toothbrush & toothpowder and datun were reported at 21.0% & 19.7%. It was noticed that majority (87.3%) of patient brushes their teeth once daily

while 9.3% brushed twice daily. 2% patient brushes more than twice while 1.3% patient brushes occasionally.

A majority of the responders did not use any secondary methods for plaque control (74.6%). It was disappointing to note that none of them use interdental brushes 62% of the participants clean their tongue while the rest did not use any cleaning aid for tongue cleaning. The result of the present study concluded that education level also play a major role about knowledge, attitude and behavior regarding impact of oral health on systemic conditions. Moreover individuals have tendency to visit dental clinics only when the problem gets worse.

TABLE 1-AWARENESS PER PARTICIPANTS-

Q1	280(93.3%)	20 (6.6%)	0%	0%
Q2	178(59.3%)	63(21.0%)	59 (19.7%)	0%
Q3	262(87.3%)	28 (9.3%)	6 (2%)	4 (1.3%)
Q4	60 (20%)	62(20.7%)	178(59.3%)	0%
Q5	33 (11%)	0%	43 (14.4%)	224(74.6%)
Q6	186 (62%)	114 (38%)	0%	0%
Q7	160 (53%)	140 (47%)	0%	0%
Q8	43 (14%)	257 (86%)	0%	0%
Q9	263 (88%)	37 (12%)	0%	0%
Q10	172 (57%)	128 (23%)	0%	0%



DISCUSSION

The present cross sectional questionnaire study was conducted to assess the oral hygiene awareness among the study sample of 300 participants. Our study has depicted clearly that still in India there is lack of skilled and motivated dental health care because of several transitional stage in country.

The present study reported that 72% of males were interviewed, clearly showing a greater utilization of dental services when compared to their female counterpart. This study was in concordance with the study conducted by Kapoor et al but contradictory to study conducted by Helsinki et al.

59.3% of the responders brush their tooth which is in contrast to the study conducted by Kapoor et al wherein 90.3% them used brushes. This could probably be the cause of the periurban population predominance in the OPD of dental collage.

As mentioned in the result none of them used interdental brushes. 11% used floss which shows clearly there is a failure in the use if interdental aid as a preventive tool. This is similar to the study conducted by Jamjoom HM wherein no subject used floss for interdental cleaning.

Bad breath was experienced in 53% of the study participants which was similar to the study of Kapoor et al (47.2%) but in contrast to Kumar et al (21%).

Tongue cleaning was done by 62% of the patients in the present study which is in contrast with the study done by Jain et al. Tongue cleaning aids for oral hygiene maintenance are not very much popular among the population which shows lack of awareness of oral health.

CONCLUSION

The present study demonstrates that there is a lack in appropriate oral hygiene aid awareness amongst study participants. The need was felt to educate both the rural and urban population regarding proper oral hygiene care & to conduct outreach programs by dental professionals to create awareness of oral hygiene aids.

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