International Journal of Current Advanced Research

ISSN: O: 2319-6475, ISSN: P: 2319 – 6505, Impact Factor: SJIF: 5.995

Available Online at www.journalijcar.org

Volume 6; Issue 3; March 2017; Page No. 2879-2881 DOI: http://dx.doi.org/10.24327/ijcar.2017.2881.0131



PATIENTS ATTITUDE TOWARDS DENTAL TABOOS

Rinieshah Nair R.Baskran and T.N. Uma Maheswari

Saveetha Dental College and Hospital, Chennai. 600007

Article History: Received 20th December, 2016, Received in revised form 24th January, 2017 Accepted 4th February, 2017, Published online 28th March, 2017

Copyright©2017 Rinieshah Nair R.Baskran and T.N. Uma Maheswari. This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

INTRODUCTION

Taboo is a Tongan word which mean forbidden. It is usually found among a certain society. Each society has its own taboo, and they stand out from one another. Those taboos are handed down from one generation to another. (1) There are many types of taboos, even in the medical field. Medical taboos are a little peculiar as they cause it society to believe that diseases are supernatural curses on the victim. Like medical taboos, dental taboos also exist. (2) Those taboos have influenced the society on a whole new level and that has caused the people to not visit the dentist when they experience a toothache. (3) When the people are credulous in their beliefs, less importance will be given to oral care. (4) That will lead to unnecessary pain and extent like gingivitis and dental carries. (5,6) For this purpose, a study has been done to investigate the attitude of patients towards dental taboos in Chennai. (7,8,9) The main purpose of this study is to assess dental misbeliefs among patients in Saveetha Dental College and suggest possible measures of correcting those misbeliefs.

MATERIALS AND METHODS

This study was carried out in Saveetha Dental College, Chennai. In my study, I have selected the participants in a meticulous manner. The participants were chosen based on their ability to read and understand English as the questionnaire is written in English. The people who were not able to read and understand English were not chosen to participate in this study. Before handing out the questionnaires, a consent form was distributed to the participants for research requirement purposes. A survey was then taken by distributing a set of 13 questions in a formatted questionnaire, among the selected patients of Saveetha Dental College.

The personal information collected were name, age and gender of the patient. Subsequent questions were to evaluate the effect dental taboos versus oral health knowledge. The patients were asked to answer a predesigned questionnaire as seen in table (1). It required them to answer 13, yes or no questions related to dental taboos and their opinions about it. The data was then collected and tabulated for further investigation.

Table 1 Questionnaire on dental taboos that was given to the patients of Saveetha Dental College.

NAME OF RATIONT	AGE/SEX	
QUESTIONS		
1. Does your teeth become issue after cleaning?	Yes/No	
2. Ocean the sofraction of the upper tooth have any effects to one's eyesight?	alde Yes/No	
3, is it recessory to visit the dential failure the em- your primary teeth?	ption of Yea/No	
4. Are regular dontal appointments necessary?	700)740	
6. Does the space between your teath bring you good kick?		
ii. Would you rather use your lingers to clean your teeth, rather than using a toothbrush?		
7. Do you agree that you should stop brushing your teeth after your gums bleed?		
S. Are artificial ben'h better then repairing the impacted senti?		
S. Dione new bringer blackers your health?		
10. Are south that appear white, stronger?		
11. Are cloves and experiyour cheese for pain reduction at the teath?		
12. Do you believe that the fourth that has fallers, should be thrown on the rootbou?		
13. In it your belof that the possession of lenth at to the provide the transitioner?	beth are lad omen Yes/file	

RESULTS

The total number of participants in this survey was 105 people.

The study population was distributed according to various categories.

They include

Tabular representation of different age groups of male and female (table 2)

- 56 people were male
- 49 people were female

^{*}Corresponding author: Rinieshah Nair R.Baskran Saveetha Dental College and Hospital, Chennai. 600007

Table 2 sample chart

age group (years)	male	female	total number
10 to 20	8	9	17
21 to 30	13	11	24
31 to 40	16	13	29
41 to 50	11	14	25
50 and above	3	7	10

Graphical represent of the prevalence of positive and negative response for all 13 questions in the questionnaire (figure 3)

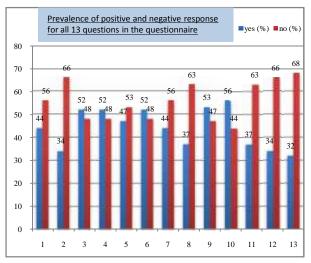


Figure 3

DISCUSSION

This research was conducted to assess the attitude of patients in Saveetha Dental College, towards dental taboos and suggest possible measures to correct those misbeliefs. A predesigned questionnaire was handed out to 105 dental patients from Saveetha Dental College. In that 105 people, 56 people were males and 49 others were females. From the questionnaire we can draw a conclusion which says, the maximum number of people who said yes for this survey was 56who agreed that teeth which appear whiter are stronger. In the article published by Humphris GM, Morrison T, Lindsay SJ, the maximum number of people agreed to the existence dental taboos. The most popular dental taboo in his article was the extraction of the upper tooth will affect the brain. (10) The minimum number of people who said no for this survey is 32 who disagree that the possession of teeth at birth is a bad omen to the grandfather. The mean value for the number of people who answered yes is 44.13333 and the mean value for the people who answered no is 55.86667. The study conducted by Johansson P, Berggren U, Hakeberg M, Hirsch J-M (11), also concluded that the number of people who are still blinded by dental misbeliefs are higher than the people who don't believe in them. In a nutshell, many people are still unaware of dental taboos and its absurdity. This willonly cause more dental problems for the individual. Therefore, dental taboos should be extracted from the minds of others to ensure the continuity of proper oral health and hygiene.

CONCLUSION

Everyone comes from a different family background with their own myths and beliefs. The individual can either learn from it or choose to believe it without a second thought. There are recent studies which prove that most of the misbeliefs are merely misbeliefs and should be corrected to ensure the oral health of the community. (12, 13) There are certain measures that can be taken to prevent the number of people who believe in dental taboos from increasing. More awareness campaigns should be carried out to educate the public about the importance of proper oral health. (14, 15) School children should be exposed to proper oral care at an early age to nip the problem in the bud. Mass media should also play its role in spreading information as quickly and to as many as possible. (16, 17) The public should be educated about the importance of good oral health and prevent dental taboos from becoming facts.

Refferences

- http://www.articlesbase.com/dental-care-articles/ popular-dental-myths-explained-and-busted-5134768. html.
- 2. http://www.articlesbase.com/dental-care-articles/general-dentistry-myths-1944643.html.
- 3. http://www.articlesbase.com/dental-care-articles/dental-myths-3260142.html.
- 4. V.Dhananjay, Cultural taboos in dentistry, dentairesrevista, (2010): ii (1): 35-37.
- 5. http://www.articlesbase.com/dental-care-articles/dental-myths-and-misconceptions-2640211.html.
- Park K. Park's Textbook of Preventive and socialthmedicine.20 ed., Jabalpur, M/s Banarsidas Bhanot, 2009; 589.
- 7. Kunzelmann K-H, Dunninger P. Dental fear and pain: effect on patient's perception of the dentist. *Community Dent Oral Epidemiol*. 1990; 18:264-266.
- 8. Kulich KR, Berggren U, Hakeberg M, Gustafsson J-E. Factor structure of the Dental Beliefs Survey in a dental phobic population. *Eur J Oral Sci.* 2001; 109:235-240.
- 9. Moore R, Brødsgaard I, Birn H. Manifestations, acquisition and diagnostic categories of dental fear in a self-referred population. *Behav Res Ther*. 1991; 29:51-60
- Abrahamsson KH, Berggren U, Hakeberg M, Carlsson SG. The importance of dental beliefs for the outcome of dental-fear treatment. *Eur J Oral Sci.* 2003; 111:99-105
- 11. Humphris GM, Morrison T, Lindsay SJ. The modified Dental Anxiety Scale: validation and United Kingdom norms. *Community Dent Health*. 1995; 12:143-150.
- 12. Johansson P, Berggren U, Hakeberg M, Hirsch J-M. Measures of dental beliefs and attitudes: their relationships with measures of fear. *CommunityDent Health*. 1993; 10:31.
- 13. Milgrom P, Weinstein P, Getz T. Treating fearful dental patients: a patient management handbook, 2nd edn. Seattle, WA: University of Washington Continuing Dental Education; 1995.
- 14. Kvale G, Milgrom P, Getz T, Weinstein P, Johnsen TB. Beliefs about professional ethics, dentist-patient communication, control and trust among fearful dental patients: the factor structure of the Revised Dental Beliefs Survey. *ActaOdontolScand*. 2004; 62:21-29.

- 15. Holtzman J, Berg R, Mann J *et al*. The relationship of age and gender to fear and anxiety response to dental care. *Spec Care Dentist*. 1997; 17:82-87.
- 16. Liddell A, Locker D. Gender and age differences in attitudes to dental pain and dental control. *Community Dent Oral Epidemiol*. 1997; 25:314-318.
- 17. Stabholz A, Peretz B. Dental anxiety among patients prior to different dental treatments. *Int Dent J.* 1999; 49:90-94.
- 18. Tunc EP, Firat D, Onur OD, Sar V. Reliability and validity of the Modified Dental Anxiety Scale (MDAS) in a Turkish popula- tion. *Community Dent Oral Epidemiol*. 2005; 33:357-362.

How to cite this article:

Rinieshah Nair R.Baskran and T.N. Uma Maheswari (2017) 'Patients attitude towards dental taboos', *International Journal of Current Advanced Research*, 06(03), pp. 2879-2881.

DOI: http://dx.doi.org/10.24327/ijcar.2017.2881.0131
