Deciphering the self-perceived dilemma of oral health among university students

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Abstract

Objective: The aim of this study is to assess self-reported oral health knowledge and practices among academicians of province of Sindh, Pakistan

Methodology: A descriptive cross-sectional study was conducted with the help of a self-administered questionnaire, among students from all academic years of different colleges in province of Sindh, Pakistan. Sample size was calculated to be 647. The questionnaire inquired about demographic details of students which included students' age, gender and specialty. First part of questionnaire assessed knowledge of the students about their oral health care while the second part was based on practices. Results were defined using descriptive statistics.

Results: Results showed that students from all three departments participated equally in the study, while females were seen to be in majority among the sample. A huge number of respondents went to visit dentists only when needed. Tooth brush with tooth paste was found to be the commonest method of teeth cleaning.

Conclusion: Despite proximal access of dental services, most of the students did not have the habit of visiting dental clinic timely and lacked sufficient awareness about oral health care. It is therefore recommended that comprehensive awareness sessions be conducted for students.

Introduction

Oral wellbeing is a straightforward and essential piece of undergrads’ lives yet may regularly be ignored or undermined as a result of expanded feelings of anxiety and unfortunate propensities related with the school setting. Although quite difficult, school days might be a standout amongst other circumstances to build up long lasting solid habits, including oral wellbeing schedules [1]. Well maintained dental wellbeing not only elevates a person to look and feel good, it additionally helps in saving oral activities. Oral wellbeing is viewed as a vital piece of a person’s general wellbeing [2].

The proceeding increment in the predominance of dental caries and periodontal infections in the developing nations makes it necessary to present essential oral health care in the educational modules of public wellbeing courses. The securing of proper information and identifying with oral wellbeing, oral maladies, anticipation and administration of dental issues is imperative [3,4,5].

As undergraduates and post graduates change from pre-adulthood into adults, their wellbeing propensities may influence their future health inclinations. Amid this progress, the individuals who have poor oral hygiene may acquire better habits in the event that they are given good counsel. Accordingly, it is fundamental and vital to look at students’ wellbeing practices on the basis that these practices affect students' physical wellbeing and ways of life as they grow [6]. Studies have found that undergrads with better self-assessed wellbeing status or those studying in health sciences related fields are occupied with healthier practices and had more positive wellbeing related demeanors and propensities than different students had. For instance, medicinal school students hold fast to a more positive, healthy ways of life than non-health related students [7].

The association between awareness and behaviour has been discussed earlier too [8]: knowledge, behaviour, cognition and capabilities are predispositions to act. And this relation happens to be much significant in professionally qualified people when compared to general people [9,10].

Oral self-care practice is a successful preventive measure for keeping up great individual oral wellbeing which is a necessary piece of one’s general wellbeing. For dental wellbeing experts, their health convictions and states of mind influence their oral self-care measures as well as conceivably impact their capacity to persuade patients to embrace preventive oral health care methods [11,12]. This thus affects peoples comprehension of preventive oral wellbeing measures [9]. It is in perspective of this vital connection that Kawamura et al [13], pushed for undergrad dental training to incorporate extensive projects in preventive care that enables dental practitioners to propel patients for oral self-care. Such instructive exertion should empower dental understudies create stable wellbeing practices [12] which are not impacts by individuals' qualities [10,14].

Aim of current investigation is to get to self-revealed oral wellbeing practices, demeanors and way of life among Students of Sindh, Pakistan

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Objectives

To assess oral hygiene practices, problems, awareness and habits among students of Sindh colleges, Pakistan.

Methodology

Data was collected in person and also via online form distributes among students undergoing graduates and postgraduate studies in different colleges of province of Sindh, Pakistan. It is a cross sectional descriptive study. Sample size was 647. Among them number of respondents who were as students undergoing severe stress or depression and absent at the time of survey were excluded, as depression can lead to false positive reporting of results. Consent was taken prior to filling of questionnaire from all students. Data from these students was collected using a structured self-administered questionnaire. The questionnaire comprised of demographic details as age, gender and specialty of the student, however anonymity was assured by not recording the name of the respondents. First part of the questionnaire comprised of questions about knowledge related to oral health which included dental visits information, usage of several cleaning equipment and methods, and effects of smoking and dietary habits. Second part of the questionnaire comprised of behavior and practices about oral health care. The questions included were about frequencies of meals and brushing. Also questions regarding delaying dental visits were included.

Results

Among reasons for visiting the dentist, dental pain or emergency was the most reported reason according to students (69.40%). Esthetics was the second main reason (22.72%). Reasons for delaying the visit cost (39.88%), time shortage (27.67%) and fear of dental procedures (20.40%). Frequency of teeth brushing only once daily was found among majority of students (41.58%). Most of the students (72.49%) believed that smoking is the causative agent of oral cancer and majority (70.02%) believed that oral health and general health is inter-related.

Discussion

Patients must be well informed regarding correct practices and increase awareness of oral diseases by their health care providers. The fact that these students are future health care takers of nation, they must inherit proper oral health care measures, behavior and attitude during their study course, so they can guide patients in a proper manner. In Pakistan students are exposed to patients in their third years during their clinical and hospital rotations. Although studies had been conducted in different parts of the globe accessing oral hygiene perception among students [13,14,15]. In Pakistan very few studies have given serious consideration in this regard.

The results demonstrated majority of the students had concern regarding their oral health status. This is in line with study conducted among Turkish students. Previous researches have also depicted that dental hygiene practices are defined by gender and female members

| Table 1. Knowledge about oral health |
|------------------------------------|
|                                      | N= 647 |
| Appropriate age for first           |        |
| dental visit                        |        |
| during first year of life           | 142 (21.95%) |
| after eruption of all primary teeth | 52 (08.03%)  |
| unless needed                       | 453 (70.02%) |
| Best teeth cleaning aid             |        |
| tooth brush only                    | 12 (01.85%) |
| tooth paste with finger             | 3 (00.46%)  |
| tooth brush with tooth paste        | 255 (39.41%) |
| dental floss                        | 35 (05.41%)  |
| chlorhexidine mouthwash             | 102 (15.77%) |
| brushing and flossing               | 240 (37.09%) |
| Is flouride beneficial for teeth    |        |
| yes                                | 387 (59.81%) |
| no                                 | 260 (40.19%) |
| Tooth paste is chosen because of    |        |
| flavour                            | 116 (17.93%) |
| price                              | 110 (17.00%) |
| effectiveness                       | 158 (24.42%) |
| brand                              | 263 (40.65%) |
| Knowledge about diet                |        |
| sugar is harmful for teeth          | 139 (21.48%) |
| fresh fruits are good for teeth     | 189 (29.21%) |
| flavoured juices are good for teeth | 56 (08.66%)  |
| soft drinks are erosive             | 263 (40.65%) |
| Smoking habit and its effect on     |        |
| health                             |        |
| smoking causes oral cancer          | 496 (72.49%) |
| smoking causes staining of teeth    | 138 (21.33%) |
| smoking has no effect on teeth      | 13 (02.01%)  |
| Influence of oral health upon       |        |
| general health                      |        |
| oral health has an impact           | 453 (70.02%) |
| oral health has no impact           | 194 (29.98%) |
oral hygiene was much lower than should have been among health
visited their dentists only for emergency treatments [24].
need be. Although this aspect has to be investigated even more. Studies
be because of their dependence and easy access to dental facility when
in Pakistan regarding Oral Hygiene than in students of Middle East.
clear indication of increase awareness programs among dental students
had poor oral health awareness which was contrary to our findings
habit of brushing their teeth twice or even more daily, although dental
flossing habits have been studied previously too, wherein it has been
reported that most of the respondents brush twice daily or more,
however, the usage of dental floss continues to stay low [20, 21, 22, 23].
Just like a study conducted in Turkey showed that 67.6% and another
one conducted in Italy showed that 92.1% of university students had a
habit of brushing their teeth twice or even more daily, although dental
flossing was only seen in 14.9% of Italian students and 3% of Turkish
students [24,23].

Table 2. Oral health Practices

| Oral health Practices                  | N=647 |
|---------------------------------------|-------|
| Frequency of tooth brushing           |       |
| once daily                            | 269 (41.58%) |
| twice daily                           | 122 (18.86%) |
| once weekly                           | 119 (18.39%) |
| do not brush regularly                | 157 (21.17%) |
| Frequency of sugar intake             |       |
| once daily                            | 263 (40.65%) |
| more than once daily                  | 250 (38.64%) |
| once or twice weekly                  | 97 (14.99%) |
| do not take sugars                    | 37 (05.72%) |
| Last dental visit                     |       |
| last month                            | 67 (10.36%) |
| last year                             | 287 (44.36%) |
| more than a year ago                  | 164 (25.35%) |
| don’t remember                        | 129 (19.94%) |
| Reason for visiting the dentist       |       |
| dental pain                           | 449 (69.40%) |
| esthetics                             | 147 (22.72%) |
| routine check up                      | 51 (07.88%) |
| Reason for delaying dental visit      |       |
| fear                                  | 132 (20.40%) |
| cost                                  | 258 (39.88%) |
| distance                              | 78 (12.06%) |
| time constraints                      | 179 (27.67%) |
| Frequency of meals per day            |       |
| two                                   | 38 (05.87%) |
| three                                 | 153 (23.63%) |
| more than three with snack between meals | 456 (70.48%) |

of the society have shown to be in a position of better maintaining
their dental health [16,17]. The fact that in Pakistan, ratio of Females
in medical school is much high than males can be one of the reasons,
for this increased concern regarding their aesthetics. This increased
concern is also found in a similar study [19].

The oral hygiene habits of this sample were different from previous
studies as 41.58% reported only once daily brushing and alarmingly
21.17% said that they do not brush regularly. Tooth brushing and
flossing habits have been studied previously too, wherein it has been
reported that most of the respondents brush twice daily or more,
however, the usage of dental floss continues to stay low [20, 21, 22, 23].
Just like a study conducted in Turkey showed that 67.6% and another
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flossing was only seen in 14.9% of Italian students and 3% of Turkish
students [24,23].

A study by Baseer MA et al reported concern among dental
students regarding their oral hygiene, overall these reported students
had poor oral health awareness which was contrary to our findings
where Students were well aware of their dental hygiene. This can be a
clear indication of increase awareness programs among dental students
in Pakistan regarding Oral Hygiene than in students of Middle East.

The relatively frequent use of sugary foods intake by students may
be because of their dependence and easy access to dental facility when
need be. Although this aspect has to be investigated even more. Studies
done in past have shown that instead of free and easy availability
of dental care, dental visits were not seen among a large number of
students [25, 26, 27]. A study in Jordan showed that 80% of the sample
visited their dentists only for emergency treatments [24].

Overall, the habits of university students towards maintaining their
oral hygiene was much lower than should have been among health
sciences students. Programmed dental health education sessions may
be incorporated in all specialties of health sciences to promote good
dental hygiene maintenance [24].

Conclusion

Confounding factors in present study was unequal ratio of gender
due to increase female students, perception of students from different
socioeconomic backgrounds have variations in their course fees and
cultural differences. Further studies taking into consideration these
factors and on a larger scale can reveal more interesting findings.

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