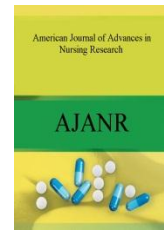




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ORAL HEALTH KNOWLEDGE, ATTITUDE AND PRACTICES AMONG NURSING STAFF OF TEACHING HOSPITAL

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ABSTRACT

The objective of the study was to assess the oral health knowledge, attitude and practice amongst nursing staff. Material and Method: This was a hospital based analytical study conducted in the Mahatma Gandhi Dental College and Hospital and Department of Obstetrics and Gynaecology, S. M. S. Medical College, Jaipur. The study group comprised of 150 nursing staff. Following written consent, a self-administered questionnaire assessed level of oral health knowledge, attitude and practices of nursing staff. Data were analyzed statistically. Result: Mean age of the respondent was 33.4 ± 6.16 years. All of them knew that consuming too much sweets cause tooth decay. Majority of them (85.3%) knew that gum bleeding meant inflamed gums. A total of 79.4% had the correct knowledge regarding the role of dental plaque as caries producing agent. 83% believed that regular visit to dentist is necessary. Tooth ache was the driving factor for dental visit for 41.3% of the staff. 52.7% staff brushed their teeth twice a day. About 22.6% used mouthwash, floss and toothpick as part of their oral hygiene. In conclusion, this study highlights important gaps in dental knowledge and practices related to oral and dental healthcare among nursing staff. More intense dental health education, including oral health promotion can lead to improved oral and dental health.

INTRODUCTION

Health is a common concern in most communities. Health continues to be a neglected issue despite hypocrisy. However, during the last few decades there has been a renewed interest that health is a fundamental right and a worldwide social goal, and is essential to the satisfaction of basic human needs and to an improved quality of life [1]. Oral health has long been restricted to the health of teeth. Moreover, oral health can be a sign of general health and well-being.

Oral health is an integral part of complete health

and a fundamental factor of quality of life. Good oral hygiene and a positive attitude towards maintaining it, reflects individual's health, confidence, life style and personality also [2]. Habits like cleaning of teeth, use of mouth rinse, use of tobacco and smoking affect the oral hygiene and oral health. Global goals for oral health by the year 2020 are specified for development of quality of oral health systems" (WHO, 2010) [3].

Of late, there is a sea change in the dentist's approach and management of oral diseases. The emphasis is shifting from treatment to prevention of oral diseases and promotion of oral health, thereby increasing one's quality of life. The main objective of the dental profession

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should be the attainment by all people, the highest level of dental health. So, it is the primary concern of health professionals to impart a positive oral health knowledge and behavior in the society [4]. Nursing personnel play a role of linking between patients and doctors in the hospital and help in health promotion and preventive information dissemination, therefore it is very important that their own oral health knowledge is good and their oral health behavior conforms to expectation of the community people. The purpose of the study was to investigate the oral health knowledge, attitude and practice among the nursing staff of Mahatma Gandhi Dental College and Hospital and in the Department of Obstetrics and Gynaecology, S.M.S. Medical College, Jaipur.

MATERIALS AND METHOD

A self-administered questionnaire based survey was conducted in the Mahatma Gandhi Dental College and Hospital and in the Department of Obstetrics and Gynaecology, S.M.S. Medical College, Jaipur, between January and June 2014. Questionnaires were given to 150 nursing staff who were willing to participate in the study after obtaining written consent. There were eight questions to evaluate the oral health knowledge of the respondents. The second section contained questions related to attitude of nursing staff towards dental health. The third section contained questions assessing the respondent's oral health practices. Data collected were statistically evaluated.

RESULTS

A total of 150 nursing staffs were surveyed. Majority of them (45.3%) were 35 years or above 35 years of age. The age of the nursing staffs was in the range of 22 – 50 years, with a mean of 33.44 ± 6.16 years. (Table 1).

Knowledge of oral and dental health

All respondents knew that consuming too much sweet would cause dental caries (100%). 62.7% knew that too much fizzy drinks affect teeth adversely. Regarding the knowledge of gingival conditions, a majority of them (85.3%) knew that gum bleeding meant inflamed gums. A total of 81.3% of the respondents knew the basic composition of plaque and 79.4% had the correct knowledge regarding the role of dental plaque as caries producing agent. 92.7% staff agreeing brushing their teeth would help in preventing gum disease. Likewise, Only 70% of the staff surveyed knew that fluoride helped to prevent tooth decay. (Fig 1)

Attitude of women towards dental health

70.7% considered oral health should be a

priority. Majority of the staff (84%) agreed that all should have a dental checkup regularly and 50.7% agreed that it should be every 6 months but during the previous twelve months only 30% staff had attended the dentist. The most common reason for visiting the dentist was for pain (41.3%) and for general dental check up (32%) (Table 2).
Current dental practices

Majority of the subjects (52.7%) used to brush their teeth twice daily, 42% brushed their teeth once daily and only 5.3% subjects clean their teeth after every meal. Tongue cleaning was done regularly only by 22.3% of the subjects, while 77.7% of the women never had the habit of tongue cleaning. Only 10% used dental floss weekly or more, 7.3% of women said that they used mouthwash more than once a month. 54% of staff used fluoridated toothpaste. Majority of staff (73.3%) spent 2 minutes or more on tooth brushing. 40% women changed their tooth brush in one to three months, 26% once in 4 to 6 months, 24% once in 7 to 9 months and 10% once in 10 to 12 months (Table 3).

Benefits of using toothpaste

All nursing staff was aware that toothpaste use make mouth clean and fresh. 92.7% knew that using toothpaste prevent dental decay and only 58% believed that it prevents oral cancers. (Table 4).

DISCUSSION

The health care professionals come across a number of patients in their routine practices. With proper knowledge and oral health behavior, they can play an important role in the oral health education of individuals and groups and act as role models for patients, friends, families and the community at large. Hence, the present study was undertaken to assess the oral health knowledge, attitude and practices among the nursing staff working in Mahatma Gandhi Dental College and Department of Obstetrics and Gynaecology S.M.S. Medical College, Jaipur.

Regarding the knowledge of gingival conditions, a majority of them (85.3%) knew that gum bleeding meant inflamed gums. Similar results were observed by Kaira et al [5], Al-Omiri et al [6] and Farsi J.M.A et al [7]. 79.4% of nursing staff knew that dental plaque can lead to dental caries

Majority of them (84%) were of the opinion that regular visit to dentist is necessary and 50.7% believed that it should be every 6 months but during the previous twelve months only 30% staff had attended the dentist. Our results were in consistent with that of Kaira et al [5], Timmerman et al [8].

For 41.3% of the staff, toothache was the driving factor for visiting the dentist. Toothache was the driving factors for 60 % of medical students and 36% of nurses in



Mohammad Abdul Baseer et al study [9]. Al-Omari and Hamasha [10] reported 50% of the dental students in a Jordanian study and Sharda and Shetty [11] reported that in 30.3% of the professionals tooth ache was the main reason for dental visit. The main reason for dental visit was also reported to be toothache in a study by Doshi *et al* [12]. In the present study, 32% of the staff visited the dentist for routine check-up this percentage was much lower than 65.2% reported by Mohammad Abdul Baseer et al [9]. This reflects that being a developing country it is almost obvious the curative services predominant over preventive ones. Overall, most of the staff included displayed positive attitudes to oral health. However, the good knowledge and attitudes displayed were not fully reflected in their oral health practices.

The present study revealed that 100 % of the nursing staff used toothpaste and toothbrush to clean their teeth. Similar results were observed by Doshi *et al* [12] and in a study by Maatouk *et al* [13] among Tunisian dental students. This was higher to that reported by Kaira *et al* [5] where 70% of nursing students used toothpaste and Amith

et al [14], where 82% of the participants used toothpaste. The percentage was lower (96.7%) in a study reported by Sharda and Shetty [11].

42% of the respondents used to brush their teeth before breakfast in the morning. It could be mainly due to the feasibility of the time as well as to feel fresh in the early start of the day. It is in accordance with the study by Doshi D et al [12] and Kaira et al [5]. 52.7% of the staff used to brush their teeth twice a day our results are consistent with results of a study by Al-Omiri et al [6] where 52% of the respondents used to brush their teeth before going to bed at night also but our results were lower than the results observed by Kaira et al⁵ where 69% of the respondents brush their teeth twice a day.

Only 10% of the staff used dental floss as an oral hygiene aid; this percentage was much lower compared with 22.7% students in a study reported by Sharda and Shetty [11], in Kuwaiti adults in a study by Al-Shammari et al [15], of the dental students in a study by Maatouk *et al* [13] and 34.2% of the health professionals in Mohammad Abdul Baseer et al [8].

Table 1. Age Distribution of the participants

| Age (years) | Number | Percentage |
|-------------|--------|------------|
| 20 – 25 | 18 | 12 |
| 25 – 30 | 21 | 14 |
| 30 – 35 | 43 | 28.7 |
| ≥ 35 | 68 | 45.3 |

Mean age 33.4 ±6.16 years, range 22-50

Table 2. Attitude of women towards dental health

| Variables | Number | Percentage |
|---------------------------------------|--------|------------|
| Regular visit to dentist is necessary | | |
| Yes | 126 | 84.0 |
| No | 10 | 6.7 |
| Do not know | 14 | 9.3 |
| Frequency of dental visit | | |
| Regularly every 6 month | 76 | 50.7 |
| Only at the time of dental Pain | 58 | 38.7 |
| Never | 16 | 10.6 |
| Last dental visit | | |
| < 6 months | 16 | 10.7 |
| 6 months – 1 year | 29 | 19.3 |
| 1year – 2 years | 24 | 16.0 |
| > 2years | 41 | 27.3 |
| Never | 40 | 26.7 |
| Reason for last Dental visit | | |
| Pain | 62 | 41.3 |
| General dental check up | 48 | 32.0 |
| Consider oral health as priority | | |
| Yes | 106 | 70.7 |
| No | 44 | 29.3 |

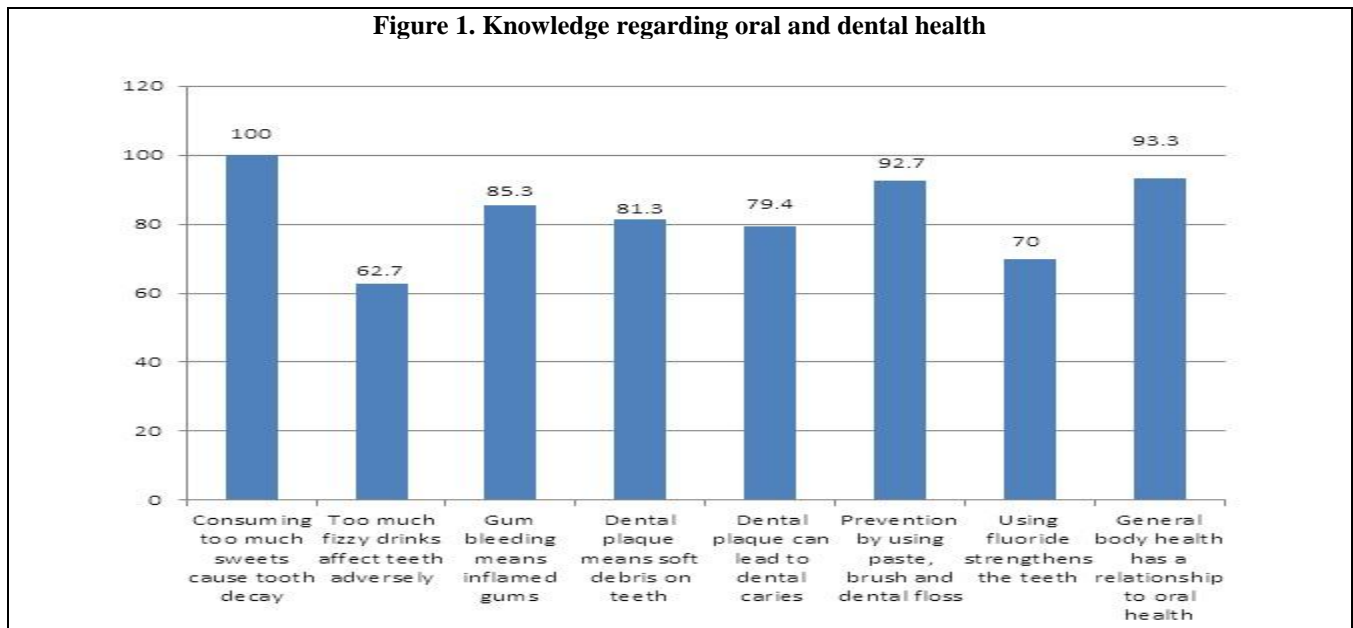


Table 3. Oral Hygiene Practices followed by Nursing Staff

| Variables | Number | Percentage |
|---|--------|------------|
| Type of toothpaste used | | |
| Fluoridated | 81 | 54.0 |
| Non- Fluoridated | 32 | 21.3 |
| Do not know | 37 | 24.7 |
| Frequency of tooth brushing | | |
| Once a day | 63 | 42.0 |
| Twice a day | 79 | 52.7 |
| More than twice a day | 8 | 5.3 |
| Time spent for brushing | | |
| <1 minute | 18 | 12.0 |
| 1 minute | 22 | 14.7 |
| 2 minutes | 71 | 47.3 |
| >2 minutes | 39 | 26.0 |
| Additional Cleansing material used | | |
| Mouthwash | 11 | 7.3 |
| Toothpick | 8 | 5.3 |
| Dental floss | 15 | 10.0 |
| Frequency of changing toothbrush | | |
| 1 – 3 months | 60 | 40.0 |
| 4 – 6 months | 39 | 26.0 |
| 7– 9 months | 36 | 24.0 |
| 10 – 12 months | 15 | 10.0 |

Table 4. Benefits of using Toothpaste

| Variables | Yes No. % | No No. % | Do not know No. % |
|-----------------------------|--------------|-------------|----------------------|
| Makes mouth clean and fresh | 150 100 | 0 0 | 0 0 |
| Prevents dental decay | 139 92.7 | 6 4.0 | 5 3.3 |
| Prevents oral cancers | 87 58.0 | 48 32.0 | 15 10.0 |

Figure 1. Knowledge regarding oral and dental health

CONCLUSION

It may be concluded that there is an important gap in dental knowledge and practices related to oral and dental healthcare among the nursing staff. It is recommended that oral health education programs related to basic preventive dentistry topics should be included

during the training of these health professionals. With improved oral health knowledge and practices, these health professionals can be used for community oral health educational and instructional programs in places where there is shortage of dental work force for catering to the oral health needs of the society.

REFERENCES

1. SS Hiremath. (2007) Textbook of preventive and community dentistry Elsevier Publisher, 4.
2. US Department of Health and Human Services. (2000). Oral health in America, a report of the surgeon general – executive summary. Rockville, MD, US Department of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health.
3. Hobdell M, Petersen P E, Clarkson J, Johnson N. (2003). Global goals for oral health 2020. *International Dental Journal* 53, 285–288.
4. Dental Public Health, an introduction to community dentistry by G Slack.
5. Kaira LS, Srivastava V, Giri P, Chopra D. (2012). Oral health related knowledge, attitude and practice among nursing students of Rohilkhand Medical College and hospital, a questionnaire study. *J Orofac Res.* 2(1), 20-23.
6. Al-Omiri MK, Board J, Al-Wahadni AM, Saeed KN. (2006). Oral health attitudes, knowledge, and behavior among school children in North Jordan. *J Dent Education* February, 70 (2), 179-187.
7. Farsi J.M.A, Farghaly M.M, Farsi N. (2004). Oral health knowledge, attitude and behavior among Saudi school students in Jeddah city. *J of Dentistry*, 32, 47-53.
8. Timmerman EM, Hoogstraten J, Meijer K, Nauta M, Eijkman MA. (1997). On the assessment of dental health care attitudes in 1986 and 1995, using the dental attitude questionnaire. *Community Dent Health*, 14, 161–65.
9. Mohammad Abdul Baseer, Mohammed Suliman Alenazy, Mohammad AlAsqah, Mansoor AlGabbani, and Aleemullah Mehkari. (2012) Oral health knowledge, attitude and practices among health professionals in King Fahad Medical City, Riyadh. *Dent Res J (Isfahan)*, 9(4), 386–392
10. Al-Omari QD, Hamasha AA. (2005) Gender-specific oral health attitudes and behavior among dental students in Jordan. *J Contemp Dent Pract*, 6, 107–14.
11. Sharda AJ, Shetty S. (2010). A comparative study of oral health knowledge, attitude and behaviour of non-medical, Para-medical and medical students in Udaipur city, Rajasthan, India. *Int J Dent Hyg*, 8, 101–109
12. Doshi D, Baldava P, Anup N, Sequiera PS. (2007). A comparative evaluation of self-reported oral hygiene practices among medical and engineering university students with access to health-promotive dental care. *J Contemp Dent Pract*, 8 (1), 068-075.
13. Maatouk F, Maatouk W, Ghedira H, Ben Mimoun S. (2006). Effect of five years of dental studies on the oral health tunisian dental students. *East Mediterr Health J*, 12, 625–631
14. Amith Holenarasipur Vasanthakumar, Audrey Madonna D’Cruz, Shahima Samad, Shanima, Shazmi Hasan Dhinda, Sheikh Mohammad Mansib, Shreya Nayak. (2013). Oral hygiene practices among paramedical staff of a private dental institution in India. *RSBO*, 10(3), 205-210
15. Al-shammari KF, Al-Ansari JM, Al-Khabbaz AK, Dashti A, Honkala EJ. (2007). Self-reported oral hygiene habits and oral health problems of Kuwaiti adults. *Med Princ Pract*, 16, 15–21.

