



AWARENESS CONCERNING VIRUS INFECTION NON-HERITABLE THROUGH DENTAL PROCEDURES AMONGST DENTAL STUDENTS: A STUDY

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ABSTRACT

Due to improper safety measures by dentists in day to day practices infection to various viruses has become very common. Negligence and improper data and awareness concerning the modes of transmission of infective agents infection in routine dental procedures has become a matter of concern. The aim of this study was to judge the infection connected and awareness amongst dental students doing OPD and different dental procedure. A valid form relating to the attention concerning virus infection and varied infection management was distributed among the students. Most of the data in the form majorly consisted about the modes of transmission of infection of viruses. As secretions and contact are a major route of infection. Total infection amongst the students was found fulfilling by that we would be able to conclude that there is a need of continued infection management education amongst the students.

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INTRODUCTION

Of the assorted infections serum hepatitis infection possesses a significant health concern. Since serum hepatitis infection is one of the foremost common blood borne virus infection the health care employees and medical and dental professional are at higher risk activity.[1] HIV (Human Immunological Virus) and Hepatitis C virus (HCV) are extremely transmissible. The attainable routes of transmission embrace intermission being the foremost common one followed by contact through contaminated needles and vertical transmission from mother to kid throughout maternity.[2]

In dental setting the foremost mode of transmission is from needlestick injury and additionally from contact through blood and saliva on improper sterilization of instruments used on infected patients. Its been proven scientifically that HBV transmission majorly happens from exposure to saliva and crevicular fluid that

has been confirmed, that makes oral health care professional additionally vulnerable for liver disease infection.[3] As of year 2018, nearly 37.9 million of population measure infected with HIV globally. Population worldwide infected with HBV and their square measure nearly 350 million and their squares measure the chronic carriers.[4] HBV infections nearly double the days extremely contagious in comparison to HIV.⁴ Serum hepatitis and hepatitis C infection in long term will cause cirrhosis of liver and even carcinoma. These variety of infection square measure the healthcare facility in nature and chiefly coming in direct contact of contaminated needles and infected blood merchandise.[5] Among professional dentist's square measure place higher risk cluster as actual sufferers and carriers. Data and awareness concerning serum hepatitis infection ought to be given to all including dental college students, professionals, practioners, professional and employees. In India 4 % of population was calculable to be HBV carriers giving a complete pool of rough thirty six million carriers.[6-8] Risk of exposure for general dentists is concerning three to four fold bigger and for non immunized surgical specialist concerning six fold bigger than that of the final population. Special circumstances

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and opportunities in dental setting will cause the transmission of such organism to dental professionals and students. Correct education relating to modes of transmission and immunization to general public, all tending employees(HCV) and students will facilitate managing the unfold of infection.[7] There aren't any adequate information on the attention of the liver disease among dental faculty students in India. Thus this forms the bottom of the current study that aimed to analyse attention of serum hepatitis infection among the clinical students during a non public university.

MATERIALS AND METHOD

A cross sectional analytical study was conducted on dental students of India. A complete sample size of 100 students were enrolled in study. All the participants were educated concerning the aim of the study, and the consent was obtained from all of them. Participants in the study had an option to withdraw from the study at any point of time. Structured questionnaire was developed to use as guide to come on conclusion. It comprised of two parts, modes of transmission of infection (12 questions) and attitudes and practices (4 questions). 2 points was assigned for correct and wrong responses was given as 0. The scores was then calculated. The collected information was then analysed.

Variables were printed as proportions, frequencies, mean with their normal deviations, range, and percentages. Chi-square check was wont to verify the association between the variables, and therefore the level of significance was set at $P < \text{zero.05}$.

RESULTS

Of these, eighty (80%) were feminine, and therefore the average age was twenty four.13 years (18–33; ± 2.7). The mean overall cognitive content scores ranged from eight (50%) to sixteen (100%) with the overwhelming majority (91%) achieving a score of $>80\%$. there have been no important variations between the mean data scores and gender and course of study. However, there have been variations between some responses and therefore the clinical standing. A majority of nonclinical students knew that infective agent infections can be be transmitted through spittle ($P < \text{zero.01}$) and a major range of clinical students rumored that dentists habitually expertise needle stick injuries ($P = \text{zero.02}$). The mean scores for the modes of transmission domain were additionally comparatively high. quite common fraction (70%) of the respondents achieved a score of $>80\%$, and there have been no important variations between the genders and therefore the course of study. Clinical students had a marked higher mean score compared to the nonclinical students ($P = \text{zero.01}$) that indicated that their levels of data on modes of transmission were higher than the nonclinical students. a major range of nonclinical students incorrectly declared

that HBV can be unfold through shaking hands with AN infected person ($P < \text{zero.01}$) and thru coughing or reflex ($P = \text{zero.04}$). additional nonclinical students properly rumored that HBV can be unfold from sharing a toothbrush with AN infected person ($P = \text{zero.02}$) whereas additional clinical students were aware that HBV can be unfold throughout the birth method ($P = \text{zero.03}$). Regarding the screening for the HBV antibodies (antiHBs), 86% students admitted being screened before vaccination, 14% students were not screened. A total of 96% students reported having completed the vaccination schedule, 4% stated that they did not complete the schedule. The vast majority of both clinical 94% and nonclinical students (88%) reported that they had completed the vaccination schedule.

DISCUSSION

Similar to different studies, the bulk of respondents had a suitable level of data and displayed acceptable practices in respect to hindrances of the unfold of HBV.⁸ The clinical students had a considerably higher mean score, and this might result to their exposure to patients within clinical setting, the lectures received in pathology and biology and therefore the time spent interacting with supervisors throughout the clinical setting. Not amazingly, clinical students were additional attentive to needlestick injuries compared to non clinical as they were treating patients and either experienced needlestick injuries or were reminded on protocol to follow within the event the needlestick injury. A major variety of nonclinical students incorrectly perceived that HBV may be unfold through shaking hands. The non clinical students, therefore, inexplicit, that HBV will be transmitted through casual contact that is wrong. This might result to the very fact that maybe these aspects weren't lined within the students of junior years, relevant information was shared. This was confirmed by positive results obtained from clinical students United Nations Agency rumoured that HBV may be unfold by sharing a toothbrush with infected individual. Supported these findings it is clear that though the students achieved high score there have been still gaps in their data and as a result, number of them answered incorrectly. The very fact that 22 students were screened for HBV antibodies (anti- HBs) showed that school of dentistry incorporates an operating policy in administering the immunogen. Though vaccination is obligatory, students weren't being, followed up to make sure that they had received all the vaccinations. It was noticed that 92 rumored to possess the HBV vaccination schedule. This was lot higher in compared to identical study of Asian nation that rumoured solely 45 dental students having been insusceptible [9].

CONCLUSION

Information on attitudes and practice towards infection control of hepatitis, hepatitis vaccination its coverage and efficaciousness in normal public is a major challenge. Therefore, its vital to assess the perspective, data and awareness concerning safety protocols against

microorganism infection. Within the study, a group of individuals failed to understand that the HBV infection will be transmitted. There is still lot need to increase the awareness, extent and quality of health education, immunogen accessibility and availableness among general public to stop unfold of serum hepatitis.

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