

## COMPARISON OF KNOWLEDGE, PRACTICES AND PERCEPTIONS REGARDING ORAL HEALTH IN URBAN AND RURAL AREAS OF JODHPUR CITY

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### ABSTRACT

Objective: To compare the knowledge, practices and perceptions regarding oral dental health in the urban and rural people in Jodhpur city. Methodology: This was a pre tested questionnaire based cross sectional survey, conducted in urban and rural areas of Jodhpur city. A total of 598 subjects were selected for the study. Out of which 299 were of urban areas and 299 were of rural areas and were taken forward for the further examination. Results: chi square test was used to analyze the data and it was found that the rural participants were more affected than the urban participants and had less knowledge about maintaining good oral hygiene. CPI and loss of attachment was found to be more in rural population than urban populations.

**Key Words:** Urban Areas, Rural Areas, Oral Health Education, Oral Dental Health, Periodontal Health, CPI.

### INTRODUCTION

An individual can prevent many diseases if he maintains his oral health. Oral health is the most neglected part of health in an individual's life and oral diseases are a major public health concern as it has a greater effect on the individual's quality of life. Oral diseases have a great number of predisposing factors mainly: genetic predispositions, developmental problems, poor oral hygiene and traumatic incidents [1]. A larger number of oral diseases can be prevented and even treated by providing and improving oral health knowledge, practice and perception among the common individuals. Oral health is considered the essential part of health [2]. Poor hygiene maintenance is also a major factor in impaired oral health in the denture wearers as they do not get enough guidance about maintaining the hygiene of their dentures. Many people lack the motives for seeking the dental health opinion from the dentists and rather takes opinion from other people who themselves are not much aware about it [3]. Majority of population in South East Asian region do not have specific trends to visit qualified

health facilities which leads to many oral health diseases [4]. People living in the rural areas as compared to the urban areas are more prone to the oral disease due to their poor socio-economic status or due the lack of knowledge related to the oral health maintenance. This also leads to the deteriorated oral health of the younger generations of both the areas. This study focused on the oral health knowledge and practices and the current periodontal health status in the urban and rural areas.

### AIMS AND OBJECTIVES

To compare the knowledge, practices and perceptions regarding oral dental health in the urban and rural people in Jodhpur city.

### MATERIALS AND METHODS

This was a pre tested questionnaire based cross sectional survey conducted in urban and rural areas of Jodhpur city, Rajasthan, India. A total of 598 subjects were selected from both the urban and rural areas. 299

participants were from urban areas and 299 were from rural areas.

#### Inclusion Criteria:

1. All the people of urban and rural areas of Jodhpur city above the age of 18 years.
2. People who were willing to take part in the study.

#### Data Collection Procedure:

A pre tested questionnaire was designed and distributed to the people living in urban and rural areas of Jodhpur city. Both the urban and rural areas were selected randomly and 20 questionnaire formats were distributed per selected areas for the purpose of data collection. A smaller area from both the urban and rural areas was selected from which only 19 participants were selected. Written consent was taken from each participant before giving out the questionnaire. The CPI and loss of attachment for each participant was recorded by examiner himself. The data was tabulated and analyzed for further examinations.

#### RESULTS

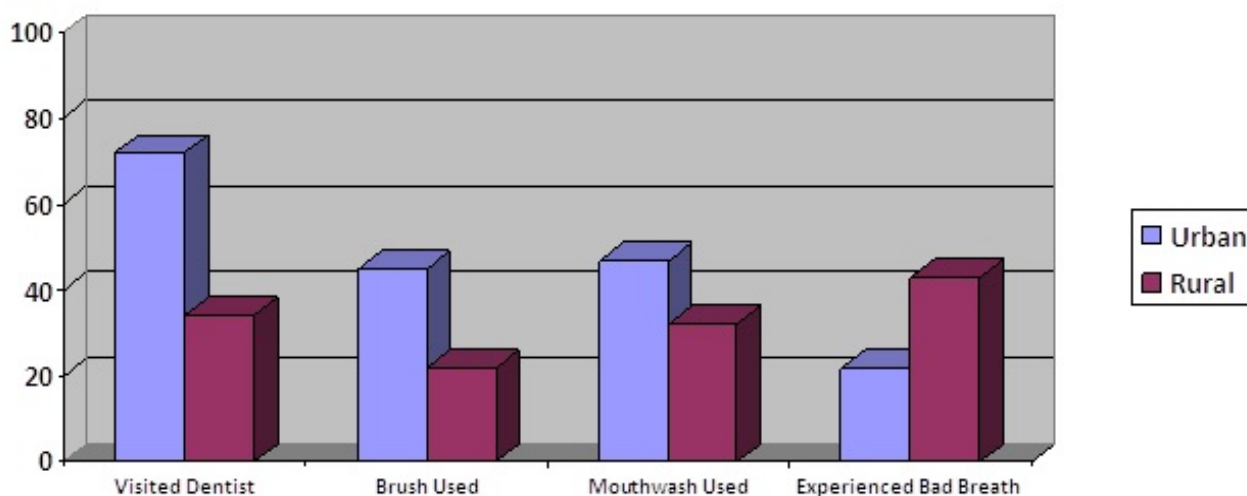
There was a significant difference between the result obtained from the urban and rural areas. It was seen that the urban areas people were more aware about their oral health than the rural areas people. The urban participants were following better oral hygiene practices

than the rural participants. About 72.6% of urban people had visited dentist before whereas it was only 34.4% in rural people. 48.5 % of the urban participants used toothbrush and tooth paste for brushing there tooth while it was found to be only 22.4% in rural areas. The tooth brushing time for significant people in urban areas was found to be around 2 min (64.5%) were as it was only 16.4% in rural areas. 45.5% of participants used soft toothbrushes in urban areas were as only 22.7% in rural areas used it. 47.8% people never used mouthwash in urban areas but it was only 31.4% in rural areas. 71.6% people in urban areas were using and knowing about the use of flossing to maintain better oral hygiene but only 12.7% in rural areas were using and knowing about it. Bad breath was experienced by 22.7% of the participants in the urban areas but was found to be more in the rural areas (43.1%). The percentages are tabulated in table 1.

When the CPI and loss of attachment was calculated for the urban and rural areas using the chi square test in which the rural areas result showed most significance than that of urban areas. It was found out that only participants with bad breath were significantly affected by the periodontal problems in the urban areas were as rural participants were affected more by it. Rural participants result showed that they were affected by the periodontal problems due to their poor oral hygiene, poor oral practices and many other reasons.

**Table 1. Answers to questionnaire for urban and rural participants in percentages**

Variable	Urban				Rural			
	a)	b)	c)	d)	a)	b)	c)	d)
<b>Visited Dentist</b>	72.6	15.4	10.0	2.0	34.4	21.7	28.1	15.7
<b>Cleaned Teeth Using</b>	48.5	31.4	12.4	7.7	22.4	42.1	24.7	10.7
<b>Duration of Cleaning Teeth</b>	64.5	16.7	3.0	15.7	16.4	26.4	32.1	25.1
<b>Type of Brush Used</b>	1.3	45.5	35.5	17.7	11.4	22.7	36.5	29.4
<b>Used Mouthwash Before</b>	18.7	47.8	23.1	10.4	15.1	31.4	28.8	24.7
<b>Experienced Bad Breath</b>	22.7	32.1	30.4	14.7	43.1	24.1	19.4	13.4



## DISCUSSION

The objective of the study was to understand and find out the current oral hygiene practices and knowledge present in the urban and rural populations of Jodhpur city, Rajasthan, India. In this study, 598 participants were selected from both the urban and rural areas, 299 from each. It was found that the urban participants had a better knowledge and practice related to oral hygiene maintenance when compared to the rural participants. This may be due to the socio-economic difference between the two or due to the less awareness among the general masses regarding the maintenance of oral hygiene [5]. Different studies have shown that the chances of many diseases can be reduced if an individual maintains a proper oral hygiene and urban people are more aware about their oral hygiene and use proper methods for it than the rural people [6, 7]. It is generally seen that the oral hygiene habits are transferred from the parents to their children [8]. So, if there are different educational programs conducted at school levels only, than there will be a higher chances of improving the oral hygiene in the future generations [9].

Different studies have shown that there is a significant difference in the oral hygiene practices when compare the urban and rural school children [10]. Efforts should be made to improve the oral hygiene practices and knowledge about it in both the urban and rural areas[11-20].

## CONCLUSION

Results of this study showed that oral health among the urban study participants was good as compared to the rural participants which was poor and needed to be improved. The study also showed that there was more of compromised periodontal health status in rural participants than that of urban. These results suggest that simple preventive oral health measures among study participants like brushing twice a day is not a normal practice in the selected rural population. So a systematic community oriented and educational oral health promotion programs are needed to target the lifestyles in different general population groups which will improve the general health of the individuals.

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