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Knowledge, Practices and Attitude of Oral Health Care Among Health Care Workers in Primary Health Care Centres of Gulbarga District, Karnataka

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ABSTRACT

Aim: To assess knowledge attitude and practices of oral health care among health care workers in primary health care centers of Gulbarga district, Karnataka.

Materials and Method: Descriptive cross sectional study was held at primary health centers chosen by simple random technique. Sample included all health care workers in these centers. Semi structured self-administered questionnaire was used.

Results: The response rate was 100% with a opinion that dental health is an integral part of general health. 99% of them were of the opinion that brushing was the best oral hygiene measure. Knowledge regarding etiology of dental caries and tobacco as etiology of oral cancer was adequate. No difference was encountered in knowledge, attitude and behavior with regard to the high and low educated or between hierarchy of service or socio-economic groups.

Conclusion: Primary health care workers can be of good help in providing dental health to the community.

Keywords: Primary health care workers, oral hygiene measures, oral health, knowledge practice and attitude.

INTRODUCTION

Interest in addressing the unmet oral health needs of the citizens of the world has manifested itself lately in noteworthy expression of commitment. Oral health is integrated with general health and support for community program offering essential oral health with primary health care increasing[1]. In this regard, health care workers at primary health centers (PHC) have very important role to play in advising the patients who attend primary health centers with various general health problems and also complain about their oral health problems regarding the maintenance of oral health. For these health care workers to advise others, it is imperative for them to have sufficient knowledge regarding oral health and proper oral hygiene measures. Thus, this study was directed at knowing knowledge, attitude and practices among health care workers in primary health care centers of Gulbarga district, Karnataka so as to assess their capability and sufficiency of knowledge to advice patients who go to them with dental problems.

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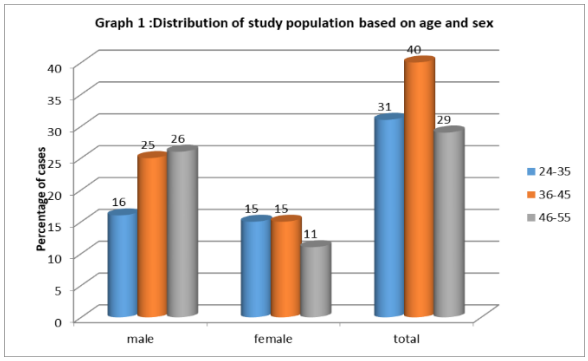
MATERIALS AND METHOD

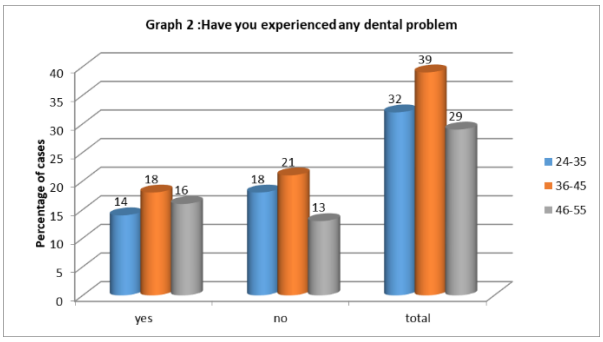
This descriptive cross sectional study was conducted in randomly selected primary health care centers of Gulbarga district. All the health care workers working in these PHC were included in the study. Thus, the total sample constituted of 200 subjects between the age group of 25-60 years. Of them 118 were males and 82 were females. Ethical clearance was obtained from the ethical committee of H.K.E.S S. Nijalingappa dental college, Gulbarga. Prior to the commencement of the study, consent was obtained from the hospital authorities and also from the participants of the study. Pilot study was undertaken in a PHC to check the feasibility of the study and design the final proforma. This PHC was not considered in the final study sample in order to avoid bias. The final proforma consisted of a 32 semi-structured questionnaire, which had questions regarding, general information, personal oral hygiene practicesand knowledge regarding adverse habits and their daily encounter with patients with dental problems at PHC. All the health care workers at these PHC's were included in the study. At the time of examination strict privacy was maintained for them to fill the proforma. Whenever necessary, the questions were explained in the local language. After completion, the data was tabulated as master charts and converted to master tables and the results were presented.

RESULTS

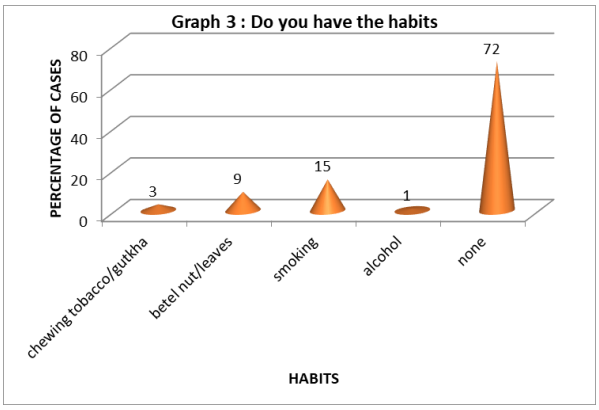
200 subjects participated in the present descriptive cross sectional study, which consisted of both sex in the ratio of 5.9:4.1 the results of this study are presented in the form of number (n) and percentage (%).



Graph 1 shows the distribution of study population according to age and sex.



Graph 2: Answer to question "Have you experienced any dental problem".



Graph 2: Answer to question "Do you have the habits".

Table 1 displays some of the questions asked and their response. All (100%) of them were of the opinion that dental health is an integral part of general health. When asked if they had experienced any dental problem 48% said yes. Wherein, the highest experience was in the age group 46-55 years. It also showed gradual increase of dental health problem, which increases with increasing age (graph 2). 65% of the overall samples had visited a dentist some time or the other and for others, lack of time was the main constraint for visiting the dentist.

Table 2 shows questions pertaining to personal oral hygiene practices. 100% of the health care workers are in the habit of cleaning their teeth regularly. 99% of them use toothbrush. 81% use toothpaste and 16% use tooth powder as the agent. 46% of them brushed their teeth daily once and 54% brushed twice. 89% of them claimed to rinse their mouth after every meal. 37% used toothpick occasionally.

Table 1: Displays some of the questions asked and their response.

S.no	Questions	Yes n (%)	No n (%)
1.	Do you think dental health is an Integral part of general health	200 (100)	-
2.	Do you have any previous dental problems	96 (48)	104 (52)
3.	Have you visited Dentist before	130 (65)	70 (35)
4.	What inhibits you from having a regular dental check up A) Lack of time B) Fear C) Other reasons	 102 (51) - 98 (49)	 - - -

Table 2: Personal oral hygiene practices.

S. no	Questions	Response n (%)
1	Do you clean your teeth regularly?	200 (100)
2	What aid do you use to clean your teeth? a) Toothbrush b) Finger	 198 (99) 2 (1)
3	What agent do you use to clean your teeth? a) Tooth paste b) Tooth powder c) Others	 162 (81) 32 (16) 6 (3)
4	How many times do you clean your teeth? a) Once b) Twice c) More than twice	 92(46) 108(54) -
5	Do you rinse your mouth after every meal? a) Yes b) No	 178(89) 22(11)
6	Do you use tooth pick to clean your teeth? a) Yes b) No	 74(37) 126(63)

Table 3: Knowledge regarding adverse habits.

S.no	Questions	Response n (%)
1.	Do you have the habit of? a) chewing tobacco/ ghutka b) betel nut/betel leaves c) smoking d) alcohol	 6(3) 18(9) 30(15) 2(1)
2.	Do you know these habits are harmful to health? a) Yes b) No	 194(97) 6(3)
3.	Do you know that consumption of tobacco might lead to oral cancer? a) Yes b) No	 184(92) 16(8)

Table 4: Primary health care profession of the subjects and dentistry.

S. no	Questions asked	Response n (%)
1	Do you feel dental services are available to rural population? a) Yes b) No	 138(69) 62(31)
2	Have you visited any dental camp? a) Yes b) No	 92 (46) 108 (54)
3	Have you come across patients with dental problems in PHC? a) Yes b) No	 198 (99) 2 (1)
4	What type of dental complaints have you come across? a) Tooth ache b) Tooth decay c) Swelling of jaws d) Others	 82 (41) 46(23) 4(2) 68(34)
5	What do you suggest when you come across such patients? a) Refer to dentist b) Advice medicine c) Refer to physician	 178(89) 22(11) -
6	Do you like to participate in community dental programs and projects? c) Yes d) No	 190(95) 10(5)

Graph 3 shows the adverse habits as depicted by different age groups by which we can infer that majority of them having adverse habits belonging to age group between 36-45 years. 97% of them knew that adverse habits are injurious to oral health. 92% of them thought that consumption of tobacco might cause cancer as shown in table 3.

Table 4 shows questions pertaining to their primary health care profession and dentistry. 69% felt that dental health care is available to rural population and only 31% felt that it is not reaching them. 46% of them had visited some or the other dental camp held. 99% of them had come across patients with dental problems at PHC at some time or the other. 41% of the times it was tooth ache, 23% of the times tooth decay, 2% of the times it would be swelling of the jaws. When they came across such patients 89% of the times they referred to a dentist. Majority (95%) were of the opinion that programs and projects connecting to dentistry should involve common man and also primary health care workers.

DISCUSSION

A review of literature of the community-oriented oral health and primary health care reveals one dominant and disease oriented practice model with dental practitioners being the principle and most exclusive actors. An alternative to this biomedical model of dental care that may be better suited to translate health promotion principles into action in the community level is to practice involving hygienists and other health care providers. The WHO stewardship should include the support of dental hygiene practice in PHC's, by which many regulatory restrictions and barriers would be relaxed thus enabling response to the WHO's call for community based projects[1].

Although there are many studies conducted on any particular sector of health care providers, there are no reports of previous studies done among primary health care workers at primary health centers. As these PHC's are located at a distance from the district headquarters, patients in these regions tend to go to PHC's for dental health workers at these centers can be of help in providing advice regarding oral health, provided they have sufficient knowledge. In under resourced countries, the use of non-oral health workers in promotion of oral health, can contribute substantially in improving oral health, can contribute substantially in improving oral health and this oral health is highly recommended[2,3].

The response rate in the present self-administered semi-structured questionnaire was 100%. Oral health care was given similar priority as that of general health which is similar to the studies of Walid EI, Nasir F, Naidoo F and Jones H, Newton JT, Bower EJ[4]. 100% of the participants cleaned their teeth every day and 99% of them were of the opinion that brushing was the best oral hygiene measure. 46% of them brushed once daily and 54% of them brushed twice which is better than the study conducted by Tewari A,Goyal A,among rural communities of Haryana[5] and the study conducted among Chinese adults by Lin HC, Wong MC, Wang ZJ, Lo EC[6].

Knowledge regarding etiology of dental caries and tobacco as etiology of oral cancer was adequate among these health care workers which was found to be similar to the study conducted among nursing staff[2] and another study conducted by Sohn W, Ismail AI, Koleker JL[7]. The most common complaint of the patients approaching health care workers for dental advice was tooth ache (41%) which was the common complaint encountered even in a similar study conducted by Maunder PE, Landes DP[8] in 2005. When encountered with such patients, most of the times (72%) they referred to a dentist as they did not have technical knowledge nor the equipmental facility to provide curative treatment. This finding was also similar to findings by Maunder PE, Landes DP[8].

As there was no difference encountered in regard to knowledge, attitudeand behavior in regards to the high and low educated or between cadre of service or socio economic groups of these health care workers, thus those results have not been presented in this study. Further studies could be recommended with these in mind.

CONCLUSION

The respondents had adequate knowledge regarding oral hygiene practices and could give primary advice to the patients they encountered with dental problems. Primary care providers could play a pivotal role in the provision of preventive services. Thus involving the primary health care workers in dental health programs and projects will be helpful to reach out dental health to majority of the population.

CONFLICT OF INTEREST

No potential conflict of interest relevant to this article was reported.

REFERENCES

1. Monajem S. Integration of oral health in to primary health care. Int Dent Hyg 2006 feb ; 4(1):47-51

2. Walid EI, Nasir F, Naidoo F. Oral health knowledge, attitude, and behavior among nursing staff in Lesotho. SADJ 2004 Aug; 59(7):288,290,292.

3. SohnW, Ismail AI, Tellez M. Efficacy of educational interventions targeting primary care providers practice behaviors: An overview of published systematic reviews. J Public Health Dent 2004 summer:64(4): 164-72

4. Jones H, Newton JT, Bower EJ. A survey of oralcare practices of intensive care nurses. Intensive Crit Care Nurs 2004 Apr; 20(20):69-76.

5. Tewari A, Gauba K, Goyal A. Evaluation of existing status of knowledge, practice and attitude towards oral health of rural communities of Haryana-India. J Ind Soc Pedod Prev Dent 1991 Mar; 9(1):21-30.

6. Lin HC, Wong MC, Wang ZJ, Lo EC. Oral health knowledge, attitude practice of Chinese adults. J Dent Res 2001 May; 80(5); 1466-70.

7. SohnW,Ismail AI, Koleker JL. Knowledge of oral cancer and screening practices of primary care providers at federally qualified health centers. J Public Health Dent 2005 summer; 65(3):160-5.

8. Maunder PE, Landes DP. An evaluation of role played by community pharmacist in oral health care trust in the north of England. Br Dent J 2005 Aug 27; 199(4):219-23.