

KNOWLEDGE AND PERCEIVED BARRIERS TOWARDS TOBACCO CESSATION COUNSELLING AMONG DENTAL PROFESSIONALS IN INDIA

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ABSTRACT

Background: The health consequences and economic cost of tobacco use are extensive. Tobacco use has a significant impact on general and oral health. As members of an important health profession, dentists have a duty to promote oral health and healthy lifestyles among their patients, by raising their awareness about the harmful effects of tobacco on health and guiding them in conquering tobacco addiction.

Materials and methods: The survey was conducted during the period of January 2016 to June 2016 from the Department of . The institutional ethical approval was obtained prior to the start of the study. The calculated sample size was 250 at 95% confidence level and 5% confidence interval. 250 registered dentists practicing across the 14 districts in Chhattisgarh were included to meet the prior determined sample size. The structured questionnaire consisted of questions pertaining to attitudes toward smoking cessation, practices in smoking cessation, and barriers to smoking cessation. A four-point Likert scale of "not at all," "to some extent," "considerable extent," and "great extent" was used to indicate their degree of agreement and involvement in smoking cessation attitudes and practices, respectively. Four main barriers to smoking cessation as identified in previous studies - lack of training, lack of remuneration, lack of time, and fear of losing patients - were listed and the dentists were asked about their degree of agreement or disagreement.

Results: 41 dentists considered that to a great extent lack of patients motivation was the barrier in providing tobacco cessation counseling. The difference observed was not significant. All 121 males and 79 females considered lack of time in consultation as a barrier in providing tobacco cessation counseling to their patients. The difference observed was not statistically significant ($P = 0.489$). Majority of the female dentists 75 and 34 male dentists considered lack of financial incentives as a barrier to a great extent in providing tobacco cessation counseling. The difference found was not statistically significant. 89 dentists considered to a great extent that the fear of damaging dentist-patient relationship was the barrier in providing tobacco cessation counseling.

Conclusion: The present study concludes that dentists are aware that they play an important role in motivating patients to quit Tobacco. Dentists should overcome all barriers which prevent them from providing Tobacco cessation counseling to their patients. Dental care settings provide an exceptional opportunity to reach Tobacco users and provide brief cessation counselling and treatment to reduce oral and other tobacco-related health conditions. Dentists share a moral responsibility by getting involved in helping their patients to quit tobacco by learning the correct Techniques.

KEYWORDS: Awareness, Tobacco, Oral

Cancer, Tobacco Cessation, Dentists.

INTRODUCTION

Dental practitioners have a credible and important role in providing Tobacco cessation services. Dentists' counselling in conjunction with Tobacco cessation medications can encourage patients to make successful quit attempts and can promote successful Tobacco cessation. The dental clinic can be an important source of Tobacco cessation. Patients' increased awareness that dental professionals may be a Tobacco cessation resource, and dentists' increased confidence in providing Counselling, NRT, pharmacotherapy can help patients quit Tobacco and improve their oral health. Dentists, dental hygienists and other professionals have been on the front lines of tobacco control for many decades, and most dental practitioners have long believed that counseling is an important part of their practice.¹ Advice from and intervention by dental professionals has also been shown to be effective, and at least 14 high-quality clinical trials have shown that dental professionals have helped tobacco users to quit.²

AIM & OBJECTIVE OF THE STUDY

To assess the knowledge and perceived barriers of Dentists towards tobacco cessation counselling of Dentists towards Tobacco Cessation.

METHODOLOGY

The survey was conducted during the period of January 2016 to June 2016 from the Department of . The institutional ethical approval was obtained prior to the start of the study. The calculated sample size was 250 at 95% confidence level and 5% confidence interval. 250 registered dentists practicing across the 14 districts in Chhattisgarh were included to meet the prior determined sample size. A systematic random sampling method was employed to select the sample size for the study. The questionnaires along with the informed consent sheet were sent to the dentists by post and the duly filled forms along with the signed consent form were obtained through return post. The participants were reminded about the return of the filled forms through SMS and emails. 200 dentists returned

the completely filled forms and were included in the survey. A self-administered questionnaire by George et al and Ibrahim et al previously in a similar study^{3,4} was adapted and utilized in the present survey. The structured questionnaire consisted of questions pertaining to attitudes toward smoking cessation, practices in smoking cessation, and barriers to smoking cessation. A four-point Likert scale of "not at all," "to some extent," "considerable extent," and "great extent" was used to indicate their degree of agreement and involvement in smoking cessation attitudes and practices, respectively. Four main barriers to smoking cessation as identified in previous studies - lack of training, lack of remuneration, lack of time, and fear of losing patients - were listed and the dentists were asked about their degree of agreement or disagreement. The dentists were also asked to specify other barriers that they perceived in their practice. The questionnaire was pretested in a group of dentists who were not included in the main study. The reliability of the questionnaire was found to be kappa = 0.92. The response rate was 100%. Data were manually entered into the computer, tabulated, and analyzed. Data analysis was performed using the software IBM SPSS Inc., Chicago, USA version no.18. Pearson's Chi-square test was employed in the survey. The level of significance was set to be $P < 0.05$.

RESULTS

Out of 200 dentists to whom the questionnaire was administered. The response rate was 100%. The demographic details of the respondents according to Age-wise numbers distribution of Dentists is 20-25 years: 11, 25-30 years: 53, 30-35 years: 65 Above 35 years: 71. The Gender-wise numbers are Males: 121 and Females: 79. The Type of practice-wise numbers are Private practitioners: 107, Academicians: 33 and Both: 60. There was no difference in the results in terms of age, gender, or type of practice. The findings of the study are as follows 100% of the dentists agreed that it is the duty of every dentist to advise patients about tobacco cessation. Figure 1 shows percentage of Dentists who received Training on Tobacco cessation counseling.

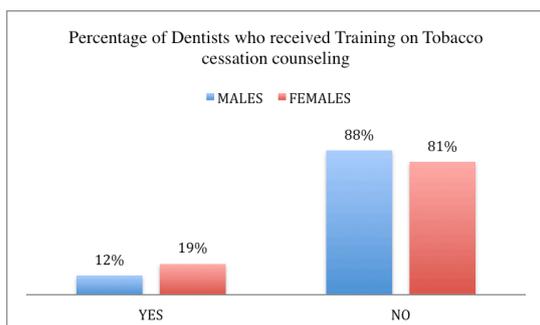


Figure 1: Percentage of Dentists who received Training on Tobacco cessation counseling.

Majority of the female dentists 75 and 34 male dentists considered lack of financial incentives as a barrier to a great extent in providing tobacco cessation counseling. The difference found was not statistically significant. 89 dentists considered to a great extent that the fear of damaging dentist-patient relationship was the barrier in providing tobacco cessation counseling. The difference was found to be statistically significant ($P = 0.01$) as seen in Figure 2.

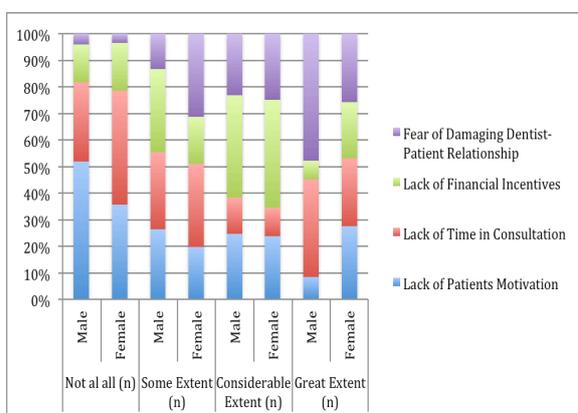


Figure 2 : Barriers of Dentists to provide Tobacco Cessation Counselling

DISCUSSION

In the current study, 100% of the respondents feel that it is the duty of every dentist to encourage patients to stop tobacco. This is in close agreement with the study of and Amit *et al.*⁶ with 97 % and Raja *et al.*⁷ in which 94% and is Sadaf *et al.*⁸ have agreed that it is the duty of every

dentist to advise patients about tobacco cessation. The study also reveals that the Dentists are capable of tobacco cessation if certain barriers on this noble path are removed. The most common barriers for successful tobacco cessation as perceived by the dentists in the current study were, Lack of Patients Motivation, Lack of Time in Consultation, Lack of Financial Incentives and Fear of Damaging Dentist-Patient Relationship. Johnson *et al.*⁸ also in their study had mentioned the same common barriers as perceived in the current study, i.e., lack of time, lack of training, and lack of patient education materials but added another barrier as lack of reimbursement. The important role of formal training to the Dentists and their staff in achieving tobacco cessation has emphatically come out in both these studies though the percentage of the respondents on this aspect differs slightly. It is heartening to note from the current study that not withstanding various barriers on the path to achieve successful tobacco cessation, the Dentists in Chhattisgarh motivate educate their patients to quit Tobacco. The hazardous effects of Tobacco on general and oral health are well known, therefore strategies can be formulated in this region.

CONCLUSION

The present study concludes that dentists are aware that they play an important role in motivating patients to quit Tobacco. Dentists should overcome all barriers which prevent them from providing Tobacco cessation counseling to their patients. Dental care settings provide an exceptional opportunity to reach Tobacco users and provide brief cessation counselling and treatment to reduce oral and other tobacco-related health conditions. Dentists share a moral responsibility by getting involved in helping their patients to quit tobacco by learning the correct Techniques.

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