Brief Communication

Knowledge of Non-dental Students in Kermanshah about Dental Specialties

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Abstract

Knowledge of dental specialties leads to referral and proper therapy. The present study was intended to determine the knowledge of non-dental students about dental specialties. In this descriptive cross-sectional study, 703 students form among all students of Kermanshah were selected based on their responses to 9 questions and the results were classified into 3 groups of poor, average and good. Data were analyzed by SPSS (version 18) using chi-square test. In terms of knowledge, 38 (5.4%), 261 (37.1%) and 404 (57.5%) were classified into poor, average and good groups, respectively. The knowledge of female non-dental students was significantly higher than that of the male counterpart (P-value<0.05). No significant difference was reported between non-dental and dental students. It seems that the students investigated in this study have acceptable knowledge about dental specialties. It is necessary to make more attempts to make different dental specialties known to the public and in the society.

Keywords: Knowledge, Dentistry, Special services

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Introduction

ack of knowledge about dental specialties and special services is a major issue for the patients visiting dental clinics. This has caused a wide range of therapeutical complications, and consequently brought about a lot of complaints in the medical council and forensics. Promoting the knowledge of people about dental specialties, and function and responsibilities of every specialty is a measure that should be taken to decrease the incidence of these problems. In line with this, it has been found that even the knowledge of the educated people about dental specialties is inadequate (1). The findings of the studies conducted on the knowledge of the people about features and medical domains of oral and maxillofacial surgery are indicative of the poor knowledge of people in the society. Even the knowledge of healthcare specialists about oral and maxillofacial surgery is insufficient (2-3). Many people have a relatively poor knowledge about medical courses even at subspecialty levels, but in terms of knowledge about dental specialties, observations indicate that many people do not know even the meaning of these courses and this is more obvious in the deprived cities with no faculty of dentistry (2-4).

Recently, the School of Dentistry has been established in Kermanshah. So, there will be problems about identification of domains and medical responsibilities of different dental specialties. The present study can help determine the knowledge of students, as educated people, at universities in Kermanshah and evaluate their knowledge in each of the courses and then purposefully plan to enhance this knowledge in the society. Thus, the present study was carried out to determine the knowledge of non-dental students in Kermanshah about dental specialties in 2010.

Methods

This descriptive cross-sectional study was carried out on 703 non-dental students studying at different universities in Kermanshah in 2010. A 9-item questionnaire was applied to collect the data. The validity of the questionnaire was measured via content validity by 5 faculty members at Kermanshah School of dentistry. Also, testretest method was applied to evaluate the reliability of the questionnaire, so that the questionnaire was completed by 20 students and after 2 weeks the same students completed it again. Correlation coefficient of the questions was 90% before and after 2 weeks.

The participants were selected through cluster sampling. Taking into account the number of students at different faculties, a number of them were randomly chosen and given the questionnaires to complete. The questionnaire contained questions about demographic information of the participants such as age, gender, academic level and the faculty they studied in. The student studied at basic sciences, pharmacology, engineering, social sciences, health, nursing and literature faculties, and Payam-e-Noor and Islamic Azad Universities.

The correct responses to 9 questions about the knowledge of dental specialties were calculated and those with 1-3,

4-6 and 7-9 correct responses were classified into 3 groups of poor, average and good knowledge, respectively. Data were analyzed by SPSS (version 18) using chi-square test. P-value <0.05 was considered significant.

Results

The mean age of the 703 participants in the present study was 22.22±19.3, 346 (49.2%) of whom were male and the rest were female. In terms of knowledge, 38 (5.4%), 261 (37.1%) and 404 (57.5%) of them were classified into 3 groups of poor, average, and good. 599 (85.2%) had heard the term orthodontics. These frequencies for oral and maxillofacial surgery and restorative dentistry, periodontics, dental prostheses, pediatric dentistry, oral medicine, endodontics, oral radiology, and oral pathology courses were 458 (66.7%), 425 (60.5%), 391 (55.7%), 387 (55.0%), 335 (47.7%), 318 (45.2%), 281 (40.0%), 276 (39.3%) and 181 (25.8%), respectively.

The knowledge of female non-dental students was significantly higher than that of the male students (P<0.05). Also, no statistical significant difference was observed between the knowledge of medical and non-medical students. Table 1 demonstrates the correlation between students' academic level and their knowledge. Ph.D. students were more aware of the dental specialties.

Table 1: Correlation between students' academic level and knowledge of non-dental specialties

Academic level	Poor	Average	Good
Associate degree	8 (9.6%)	42 (50.6%)	33 (39.8%)
Bachelor degree	23 (5.0%)	170 (39.8%)	263 (57.7%)
Master degree	2 (10%)	5 (25.0%)	13 (65.0%)
Ph.D. degree	4 (2.8%)	44 (30.8%)	95 (66.4%)

Discussion

The present research was conducted to analyze the knowledge of non-dental students about dental specialties. According to the results of the present study, 5.4%, 37.1%, and 57.5% of all the participants had poor, average and good knowledge about dental specialties. Lack of knowledge about dental specialties may result in improper referral, disorders and various problems for people receiving services related to these courses.

There was no statistical significant difference between medical students such as pharmacology, medicine and nursing, and non-medical students in terms of knowledge about dental specialties. However, knowledge of medical students was expected to the higher than that of nonmedical students. The highest amount of referral was reported for restoration, orthodontics, endodontics and oral and maxillofacial surgery. Ameerally et al. (5) reported that only 21% of ordinary people had heard some information about oral and maxillofacial surgery course, while 83% knew about plastic surgery and 54% about otolaryngology. More referral to restorative specialist may be due to common dental cavities or the pain associated with it (6), and higher referral to orthodontist may be due to the inappropriate look resulting from jaw disorders and desire to fix those (7).

The findings of this study represent the knowledge of the participants in this study as the educated class of society; therefore, it is not correct to generalize it to all the society. Nevertheless, the students in Kermanshah had a rather acceptable knowledge about dental specialties. Further, attempts have to make to inform other people of dental specialties. This can be done through educational

programs in presented through the mass media and brochures to the people referring to clinics, offices and dental faculties in order for both people and dental specialists to take advantage of (8-9).

One of the limitations of this study is that only students studying at universities in Kermanshah were investigated. They belonged to educated class of the society and had more knowledge and general information compared to ordinary people. Further studies are suggested to analyze the ordinary people and compare the results with various social-economic classes.

Conclusion

Non-dental students in Kermanshah had acceptable knowledge about dental specialties.

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References

- 1. Burt BA, Eklund SA. Dentistry, dental practice, and the community: Elsevier Health Sciences; 2005.
- 2. Dunkin CS, Pleat JM, Jones SA, Goodacre TE. Perception and reality—a study of public and professional perceptions of plastic surgery. British Journal of Pastic Surgery. 2003; 56(5): 437-443.

- 3. Ifeacho SN, Malhi GK, James G. Perception by the public and medical profession of oral and maxillofacial surgery—has it changed after 10 years? British Journal of Oral and Maxillofacial Surgery. 2005; 43(4): 289-293.
- 4. Kujan O, Duxbury AJ, Glenny AM, Thakker NS, Sloan P. Opinions and attitudes of the UK's GDPs and specialists in oral surgery, oral medicine and surgical dentistry on oral cancer screening. Oral Dis. 2006; 12(2): 194-199.
- 5. Ameerally P, Fordyce AM, Martin IC. So you think they know what we do? The public and professional perception of oral and maxillofacial surgery. Br J Oral Maxillofac Surg. 1994; 32(3): 142-145.
- 6. Deljo E, Cavaljuga S, Meskovic B. Prevalence of dental caries in the municipality gorazde during the period 2007-2012. Mater Sociomed. 2013; 25(3): 163-166.
- 7. Klages U, Bruckner A, Zentner A. Dental aesthetics, self-awareness, and oral health-related quality of life in young adults. European Journal of Orthodontics. 2004; 26(5): 507-514.
- 8. Pittenger AL. The use of social networking to improve the quality of interprofessional education. Am J Pharm Educ. 2013; 77(8):174.
- 9. Sawyer SM, Conn JJ, Reid KJ, Dodds AE, Hudson L, Yeo M, et al. Working with young people: Evaluation of an education resource for medical trainees. J Paediatr Child Health. 2013; 49(11): 901-905.