

Knowledge, Attitude & Practice Regarding Use of Personal Protective Equipment among Dental Assistants working at Multan Medical and Dental College Multan, Pakistan

MOHSIN JAVAID¹, MUHAMMAD JAMIL², MUHAMMAD SAADULLAH³, EHSAN HAIDER⁴, MUSTAFA SAJID⁵, ASAD MAHMOOD⁶

¹ Demonstrator, Department of Community Dentistry, Multan Medical and Dental College Multan

² Associate professor, Operative Dentistry, Multan Medical and Dental College Multan

³ Assistant Professor, Department of Science of Dental Materials, Institute of Dentistry, CMH Medical College Lahore

⁴ Assistant professor, Orthodontics, Multan Medical and Dental College Multan

⁵ Assistant professor, Operative Dentistry, Multan Medical and Dental College Multan

⁶ Associate professor, Department of Oral Biology, Lahore Medical and Dental College Lahore

Correspondence to Dr. Muhammad Jamil, Email: mustafa_sajid@hotmail.com Cell: +92-3337615145

ABSTRACT

Background: The mouth gives a steady air to numerous significant organisms. Consequently, these creatures are a steady danger for cross disease in dental setting¹. Oral health experts are three times additionally anticipated than the other populace to get debased with other blood endured infirmities and in addition hepatitis B². Hepatitis B has been ranked among those diseases which can cause death.

Aim: To increase more prominent understanding and understanding with respect to the learning, state of mind, routine with regards to utilizing PPE among dental associates and along these lines to counteract the blowout of contamination as well as enhancing the healthiness of these healthcare workers.

Setting: Multan Dental College Multan

Methodology: It was the questionnaire-based cross-sectional study. Here the simple random sampling technique had been utilized in a private sector hospital of Multan city. 96 participants completed a questionnaire. Information was analyzed by Statistical Package for Social Sciences having the dimension of $P < 0.05$.

Results: 72.5% partakers had a decent learning about the PPE's consumption. 75% partakers have a decent frame of mind for the consumption of PPE. 65% participants use it. P-esteem of information vs training was 0.046, which was statistically significant and P-esteem of disposition versus training was 0.015, which was likewise measurably critical.

Conclusion: Knowledge, frame of mind and training of these health care workers had been great as well as good however less over the created nations. These discoveries feature that Education programs on the benefits of Standard precautionary measures should be created on regular basis.

Keywords: Dental assistants, Personal Protective Equipment, Infection Control Guidelines, Health care workers, Standard precautions,

INTRODUCTION

Human services Benefactors particularly are inclined to getting to be tainted by different microorganisms in the event that they don't use right sullyng control measures while offering consideration regarding the patients. Oral wellbeing experts are exceedingly in danger because of usage of apparatuses having physical mastery as well as regularly having halfway entree in circumstance that is decanted in mouth fluid. Limiting the dangers of cross-disease is a focal point of each dental methodology, with the end goal to improve the brilliance of consideration for infected individuals & shielding the health care workers; on account of moreover real need to propel prosperity of experts, patients as well². Dental colleagues are the wellbeing experts working intimately besides infected individual, beneath direction of specialist. Their fundamentally work is to support the authorities and are incorporate into various mediations which joins: to engage, remove elastics, precisely clean coronal portion, whitening of dentition, Preparing and apply crevice materials for seal,

took starting impressions for break down models & protecting health care workers; because it's legal requirement for promotion of safety of the infected individuals and doctors as well². "Oral health partners have been named as those wellbeing experts working intimately with infected individuals, beneath direction of oral specialist." Their fundamentally work is to support the authorities and are incorporate into various mediations which joins: to engage, remove elastics, precisely clean coronal portion, whitening of dentition, Preparing and apply crevice materials for seal, took starting impressions for break down models⁴. Having ultimate objective of achieving that dimension of prosperity, gatekeepers are compulsory to utilize singular protective equipment and conform to all of the rules and controls in the midst of remedial methodologies, to avoid chances to get defilements. The terminology "personal protective equipment (PPE) is utilized to point all defensive gear which oral expert or oral medical caretaker may use in careful practice." Commonly, it joins the going with parts: glasses, veil for mouth, one a time use gloves, shake strong gloves (for purging reason) etc². Demonstration for standard particularly utilization of PPE is accepted as great adjusting strategy in contradiction of workplace unified

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communication of contaminations in hominid organizations surroundings⁵.

Interest for dental techniques has been uplifting in ongoing period as individuals have turned out to be more discerning of their mouth wellbeing and about every one of the aces great oral feel suggests. Keeping up and practicing stern nonsocial disease regulator tasks in this manner have never been so vital to guarantee the wellbeing and insurance of dental human services experts and other junior colleagues who might be indirectly associated with the intercession procedure. Considering the majority of this keeping, it is the obligation of oral wellbeing Workers to entirely pursue the prescribed conventions and in addition directions for controlling the defilement, Using PPE which can thusly diminish the odds of proliferating of different disease-causing organisms and stop the movement of cross contagion⁶. Blowout of disease may result from contaminated gadgets or starting with one individual then onto the next by means of interaction⁷. All the prosperity business related estimates must be recognized and should be kept by the colleagues in dentistry. The major criticalness of tidiness, the job of gear utilized for insurance and each one of the commitments and obligations related with ought to be engaged⁸.

METHODS

The cross-sectional examination conducted by utilizing questionnaire based in public sector hospital of district Multan. Apparatus included on factors for acquiring their Information, frame of mind as well as practice rank, subsequent to taking the educated assent from the ready members, the collected data was analyzed with SPSS having noteworthy dimension of P<0.05 & was tabulated.

RESULTS

Of 96 contributors, 72 were male & 24 were female. As shown in figure 1.

100% (96) participants use gloves without fail when serving the infected individual. 78(81.25%) participants use facemask without fail when serving the infected individual. 2.08% (2) participants use cover for eye without fail when serving the infected individual. 56(58.3%) participants use skull covers without fail when serving the infected individual. 2(2.08%) participants use plastic aprons without fail when serving the infected individual (Fig. 2).

Middle had been taken by way of an end point point because median has been a proper ration for normally distributed information and the distributed articles additionally utilized the middle as a end point.

Knowledge level /score: 6 things were inside the space of learning and the base score was 6 whereas the greatest score was 10. A score of 7 had been considered as an end point i.e., score not exactly or equivalent to 7 was measured great whereas score above 7 was considered poor. 68 out of 96 (70.8%) participators had a great information regarding PPE & 28 out of 96 contributors (29.2%) has a lack of information regarding PPE. As shown in the table 1

Attitude level/score: 5 things inside the space of frame of mind and the base score was 5 whereas the greatest score was 7. A score of 5 had been considered as an end point

i.e., score not exactly or equivalent to 5 was thought great while score above 5 was thought poor. 72 out of 96 (75%) contributors had a good frame of mind regarding PPE & 24 out of 96 contributors (25%) had a poor frame of mind regarding PPE (Table 2).

Practice level/score: 6 things inside the area of training and the base score was 11 whereas the most extreme score was 16. A score of 13 had been considered as an end point i.e., score not exactly or equivalent to 13 was thought great whereas score more 13 was thought poor. 62 out of 96 (64.6%) contributors custom it whereas 34 out of 96(35.4%) contributors do not custom it (Table 3). P-esteem of learning versus training was 0.046. As shown in table 4. P-esteem of frame of mind vs training was 0.015, those had been measurably critical (Table 5)

Fig. 1: Sex dispersal

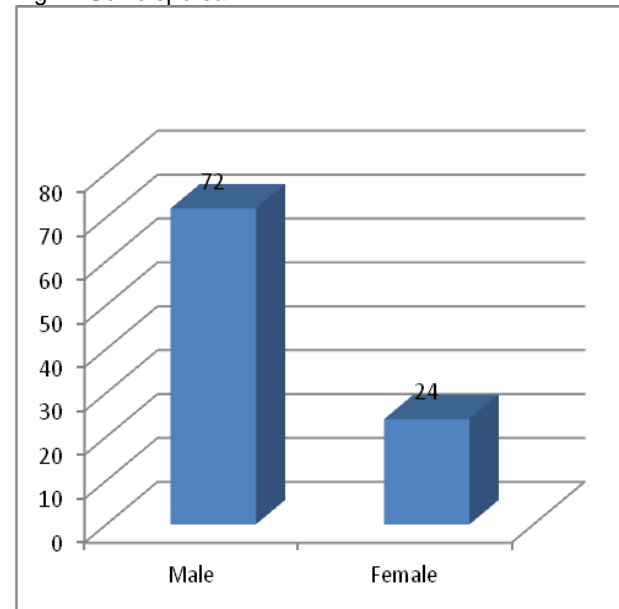


Table 1: Information score

Knowledge Score	n	%age
Good	68	70.8%
Poor	28	29.2%

Table 2: Frame OF mind score

Attitude Score	n	%age
Excellent	72	75%
unsatisfactory	24	25%

Table 3: Practice score

Practice Score	n	%age
Great	62	64.6
Poor	34	35.4

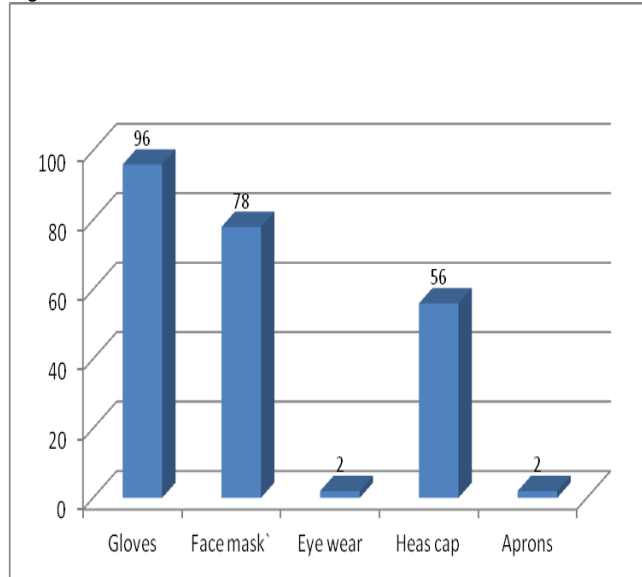
Table 4: Comparison of Knowledge with Attitude & Practice

	Knowledge		P-esteem
	Good	Poor	
Attitude			
Good	52(76.5%)	16(23.5%)	0.716
Poor	20(71.4%)	8(28.6)	
Practice			
Good	50(73.5%)	18(26.5%)	0.046
Poor	12(42.9%)	16(57.1%)	

Table 5: Assessment of Frame of mind, Practice

Practice	Attitude		P-esteem
	Good	Poor	
Good	54(75%)	18(25%)	0.015
Poor	8(33.3%)	16(66.7%)	

Fig. 2: PPE Utilization



DISCUSSION

As per CDC rules worldwide safety measures are set of activities which are essential regarding the avoidance of contamination from blood tolerated or body liquid borne contamination. Universal safety measures are pleasantly outlined and exceptionally successful to control blood borne infections that will secure human services laborers and additionally patients, from getting severe contaminations for example, HBV, HCV, HIV. For that appropriate learning and powerful practices of widespread precautionary measures are exceptionally fundamental⁹.

In my study, 96% of the participants from private sector said that they use gloves every time while assisting the patient as compared to 100% participants who alleged gloves usage when assisting the infected individual, these results has been much better as the findings reported by F.J.T Burke (almost half of the participants)¹⁰. In another study, Noura A. Al-Essa found Almost every participant always used gloves, it's almost similar to our findings¹¹.

In my study 90% participants from said that they use facemask every time while assisting the patient as compared to 81.25% from public sector who reported that they use face mask every time while assisting the patient, these results are much better than the percentage reported by Amna maqbool (46.1%)¹².

I found that 6% participants said that they use protective eyewear when assisting the infected individual as compared to 2.08% participants who reported that they use protective eyewear when assisting the infected individual, a reduced amount of as compared to those of S L Farrier. Might be due to reason of individual dentist is responsible for uptake of protection for all persons within surgery environment¹³.

In my study, 18% of the participants from private sector said that they use head caps every time while assisting the patient as compared to 58.3% participant from public sector who reported that they use head caps every time while assisting the patient it's less as compared to another study of Nohiura A. Al-Essa (65%)¹¹.

4% of the participants said that they use aprons when assisting the infected individualas compared to 2.08% participants who reported use of plastic aprons when assisting the illed persons, beneath the percentage of Amna (12.7%)¹². Due to unavailability of the aprons might be. In one other study, Noura A. Al-Essa found 95% participants used aprons during patient's handling, it's much greater than the findings of my study¹¹. The pattern of use may be affected by working practices and knowledge acquired before qualification¹⁴.

This study shows that Gloves were the most commonly used (PPE), it's similar to findings by Arinze-Onyia SU¹⁵. When considering use of gloves during sterilization procedures, the results of private & public sector were almost similar i.e 90% of the participants from private sector reported that they use gloves during the sterilization procedures and 91.6% of the participants from public sector reported the use of gloves during sterilization procedures. These results of my study are significantly different from those reported in one other study by means of S.L. Farrier (<50%)¹³.

P-esteem of learning versus training was 0.046, which is statistically significant and P-esteem for frame of mind vs training 0.015, which is also measureably critical. It's similar to findings reported as J. Dagher, it's may be due to SOP's, policies at governmental level, constant reinforcement, strict monitoring & evaluation system, adequate basic infection control programs in and regularly updated recommendations circulated by the government¹⁶. It might likewise be because of the way that as of late there has been much worry over the disease control works on, including the proceeding with medical instruction session arranged in significance to contamination control rehearses, stern observance of disease switch practices¹⁷.

CONCLUSION

Information, frame of mind & training has not been upto the mark as of established republics. That's why establishments ought to yield concern about educating the wellbeing providers in regards to use of PPE as well as Persistent instructive projects and in addition preparing workshops and the required facilities to allow compliance IC policies must be provided.

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