

# Knowledge, Attitude and Practice Regarding Dental Hygiene in Patients of Sialkot and Multan, Pakistan

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## ABSTRACT

**Aim:** To find out the perspective of knowledge, attitude and practice regarding dental hygiene in patients visiting teaching hospitals of Sialkot and Multan, Pakistan.

**Methods:** This was a comparative cross-sectional study conducted at Islam Dental College, Sialkot and Nishter institute of dentistry, Multan during the year 2021. By using random sampling technique, about 400 patients were included in the study. A questionnaire was asked based on the aim of the study and the data was collected and analyzed.

**Result:** Male patients were more in numbers as compared to the female patients with an age range between 25-55 years in both cities. More than 65% patients had insufficient knowledge about various dental hygiene aids available and their proper usage along with their impact on dental hygiene. Very low practice and attitude has been found regarding dental hygiene. More than 60% of the patients in both cities don't know importance of maintaining good dental hygiene on their overall health status.

**Conclusion:** Very low level of KAP has been found in patients of both the cities and counseling sessions along with community work and seminars should be carried out to emphasize the importance of maintaining good dental hygiene.

**Keywords:** Knowledge, attitude and practice (KAP), patients, hygiene.

## INTRODUCTION

Oral health is one of the major parts of general health with valuable impact on patient's quality of life. In order to keep a good oral health, good dental hygiene maintenance is needed<sup>1,2</sup>.

Dental hygiene is important in every facet of life but it is often not given the required value and importance<sup>3</sup>. Our physical health is associated with the oral health condition. Any change in the normal human physiology can show itself in the oral cavity, as seen in infections, nutritional deficiencies etc<sup>4,5</sup>. Dental hygiene is irrespective of the age group. Having a busy schedule in the life is not an excuse to dental hygiene practice.

Dental hygiene is mainly associated with the understanding and actions towards it. However, only knowledge regarding dental hygiene is not enough because without the desired approach and practice, dental hygiene may be not good enough<sup>5,6</sup>. The results of keeping poor dental hygiene should be known by everyone. Those who maintain good dental hygiene can become a role model for their relations and also for the people at large.

Various methods have been formulated to maintain good dental hygiene. Brushing is the most common and effective way to maintain a good dental hygiene<sup>7, 15</sup>. According to The American Dental Association (ADA), the right way for brushing i.e., keeping the tooth brush bristles at an angle of 45° on the gingivae and teeth and moves it backward and forward in short strokes<sup>8,9</sup>. Along with tooth brushing, oral rinses and mouth washes can also be used as aid in maintaining better hygiene. Tooth flossing is also used as a

method to keep inters dental hygiene<sup>10</sup>. Fluoridated mouth wash can also facilitate in reducing tooth decay<sup>10,11</sup>. Another way to keep a better dental hygiene is to use less sugary food stuff<sup>12</sup>.

The perspective of knowledge, attitude and practice are all very significant in keeping good dental hygiene. The goal of this study is to assess the knowledge, attitude and practice amongst patients in teaching hospitals of Sialkot and Multan.

## MATERIALS & METHODS

This was a comparative and cross-sectional study conducted in teaching hospitals of two cities of Pakistan i.e., Islam dental college, Sialkot and Nishter institute of dentistry, Multan after permission from Institutional Review Board of both the hospitals over a period of 6 months in the year 2021. By using random sampling technique, 400 patients were enrolled as total in the study, 200 from Sialkot and 200 from Multan after taking their consent. The study was approved by the ethical board and questionnaire be validated. The data was collected by asking questions regarding knowledge, attitude and practice. SPSS version 25 was used to analyze the data.

## RESULTS

Socio-demographic data of patients in both cities have been shown in Table 1. Knowledge, attitude and practices have been shown in table 2,3 and 4 respectively.

Table 1: Socio-demographic data of the patients in both cities

Variables ( Multan) 200				Variables( Sialkot) 200			
		N	%			N	%
Sex	Male	133	66.5	Gender	Male	121	60.5
	Female	67	33.5		Female	79	39.5
Age	25-34	45	22.5	Age	25-34	52	26
	35-44	95	47.5		35-44	89	44.5
	45-55	60	30%		45-55	59	29.5
Marital status	Married	123	61.5%	Marital status	Married	137	68.5
	Un married	77	38.5%		Un married	63	31.5
Employment Status	Yes	131	65.5%	Employment Status	Yes	143	71.5
	No	69	34.5%		No	57	28.5
Locality	Urban	85	42.5	Locality	Urban	98	49
	Rural	115	57.5		Rural	102	51

Table 2: Evaluation of knowledge of dental hygiene in patients of both cities

Knowledge ( Multan ) 200	Yes	No	Knowledge ( Sialkot ) 200	Yes	No
Do you know about the dental hygiene?	87	113	Do you know about the dental hygiene?	95	105
Do you know about methods to maintain dental hygiene?	79	121	Do you know about methods to maintain dental hygiene?	85	115
Do you know about brushing techniques?	35	165	Do you know about brushing techniques?	31	169
Do you know the lack of brushing can cause tooth decay?	105	95	Do you know the lack of brushing can cause tooth decay?	112	88
Do you know about flossing technique and mouthwash uses?	65	135	Do you know about flossing technique and mouthwash uses?	54	146

Table 3: Evaluation of attitude of dental hygiene in patients of both cities

Attitude ( Multan ) 200	Yes	No	Attitude ( Sialkot ) 200	Yes	No
Do you know about the value of dental hygiene?	67	133	Do you know about the value of dental hygiene?	71	129
Do you regularly consult the dentist for routine dental check up?	71	129	Do you regularly consult the dentist for routine dental check up?	78	122
Do you brush your teeth daily?	41	159	Do you brush your teeth daily?	51	149
Do you use any method of dental hygiene other than brushing?	31	169	Do you use any method of dental hygiene other than brushing?	63	137
Do you consider dental hygiene as matter of significance?	66	134	Do you consider dental hygiene as matter of significance?	91	109

Table 4: Evaluation of practice of dental hygiene in patients of both cities

Practice ( Multan ) 200	Yes	No	Practice ( Sialkot ) 200	Yes	No
Do you categorize about brushing timing?	81	119	Do you categorize about brushing timing?	110	90
Do you recognize how to exercise dental floss?	51	149	Do you recognize how to exercise dental floss?	63	137
Do you know for how much period a brush can be used?	37	163	Do you know for how much period a brush can be used?	51	149
Have you any idea about time duration of brushing?	25	175	Have you any idea about time duration of brushing?	22	178
Do you rinse your mouth with mouthwash?	21	179	Do you rinse your mouth with mouthwash?	15	185

## DISCUSSION

Dental hygiene is very much connected to the attitude as well as practices to maintain it along with a better knowledge that a person has toward it. It has also seen that only having the knowledge regarding dental hygiene is not enough as without better attitude and correct practice the results will be unsatisfactory<sup>13</sup>.

The current study compared the perspectives of knowledge, attitude and practice among the patients of two cities of Pakistan. Better knowledge regarding the dental hygiene has been observed in patients of urban areas as compared to the rural ones as seen in the results.

Less knowledge has been observed regarding various dental hygiene aids available along with their usage in patients of both the cities. However, patients in both the cities have awareness that lack of brushing can cause dental decay.

Brushing teeth is one of the main methods to keep dental hygiene and in the present study patients in both cities have shown little knowledge about the brushing techniques and proper time for brushing that show their lack of attitude toward learning correct techniques and faulty brushing practices. Tooth brush and tooth paste are the mostly used dental hygiene aids as shown by the other studies as well<sup>14</sup>.

Furthermore, the relationship between dental hygiene and oral health has been of great significance and it needs massive efforts for patients education by practical approached toward it. The results indicated that dental health needs edification and impetus to develop better attitude and practice among public<sup>15</sup>.

## CONCLUSION

A very low KAP regarding dental hygiene has been found in patients of both the cities. So, serious efforts should be carried out at individual and community level to raise the KAP regarding dental hygiene.

**Conflict of interest:** Nil

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