ORIGINAL ARTICLE

Assessment of 3rd Year MBBS and BDS Student's Knowledge about Hepatitis B Virus and THEIR Attitudes Towards Patient Care in Islam Dental College, Sialkot

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ABSTRACT

Hepatitis B virus is the most common cause of death in developing country like Pakistan. Most common acute symptoms of this DNA virus are nausea, vomiting, abdominal pain, fatigue and jaundice skin and eyes. Mode of transmission is via blood and its products. Most commonly healthcare workers are the volunteer spreading the virus among the community because of lack of knowledge and improper teaching methodology and assessment methods. Identifying and rectifying the community health issues are very important. BDS and MBBS students' knowledge must be assessed and measures are needed to improve.

Material and methods: Cross sectional study of two months had been conducted in Islam Medical and Dental College Sialkot to assess the knowledge of hepatitis B virus and their attitude towards hepatitis B patient's care in clinical medical and dental OPD and wards. Close ended questionnaire to assess knowledge and attitude was given.

Results: 83 students participated in this study. Mean age of students is 22 years. 41(49.39%) 3rd year BDS students and 42(50.60%) 3rd year MBBS students were included. 61.5% MBBS students had given correct answered about hepatitis B knowledge while 56% BDS students had given correct answered about attitude towards hepatitis B patient care.

Conclusion: 3rd year MBBS students have better knowledge of hepatitis B virus than BDS students while BDS students have slightly better attitude towards hepatitis B patient care.

INTRODUCTION

Hepatitis B is a blood borne viral infection that targets the hepatic system¹. It is 10th most common cause of death. Out of 350 million infected patients, 270 million are from developing countries. Asian countries have 75% prevalence². Pakistan is one of most prevalent country among them^{3,4}. Hepatitis B virus is a DNA virus that has acute symptoms like nausea, vomiting, abdominal pain, fatigue and jaundice skin and eyes. Its mode of transmission is via blood, body fluids and sexual contact with infected individuals⁵. It is a virus-host immune system interaction that potentially attacks the liver and may progress to cirrhosis and hepatocellular carcinoma⁶. Incidence of Hepatitis B in Pakistan is 6.62%⁷. This rising rate may be due to lack of proper health facilities, poor economic status and inadequate public awareness about the transmission of major communicable diseases like HBV, HCV and HIV. Medical and Dental practitioners, auxiliaries staff as well as students performing procedures are at high risk of exposure to these blood-borne pathogens⁸. Saliva and gingival crevicular fluid have been established source of HBV transmission, which makes the oral health care professionals more at risk9. During dental procedures, transmission of infections could occur through direct contact of blood, saliva or contaminated body fluid and with an injury from needle or sharp instruments¹⁰. Medical and Dental schools are teaching basic knowledge and arranging infection control workshops and drills to train them¹¹. In addition to vaccination, standard universal

precautions, infection control protocols and proper postexposure management workshops and drills must be arranged to control cross infection among health care workers¹². Sound knowledge and awareness of blood borne infections like Hepatitis B, modes of transmission, vaccination and knowledge of safe practices and prevention is mandatory for students, who are the clinicians of the future¹. Medical and dental students start their clinical rotation in third year and involved in management of patients and handling of instruments and materials. The purpose of this study was to assess the knowledge and attitude of students in caring Hepatitis B patients to identify the educational deficiency so to educate them and train their attitude in early clinical academic years. Knowledge of hepatitis B virus disease is equally important for each health care worker. MBBS and BDS students are equally exposed in 3rd year clinical rotations duties and good check points to teach them in early academic years.

MATERIALS AND METHODS

Cross sectional study had been conducted in Islam Medical and Dental College Sialkot in January and February 2020. 100 Study participants, out of which 83 participants completed the questionnaire. Third year BDS and MBBS students who were willing to participate, included in the study and those who were not willing to participate were excluded from the study. The study was approved by the institutional ethical review committee. Instructions and purpose of the study was explained to all them prior to attempt the questionnaire. A developed questionnaire consisting of 27 closed ended questions to assess the knowledge and attitude about HBV. Informed consent and data were collected on hard copy from each participant. Confidentiality of data was maintained. The survey took an average only 10 to 15 minutes to complete. This questionnaire consists of three components i.e., Demographic Data, Knowledge and Attitude assessing questions. Likert scale-based options like Agree, Disagree and Undecided was used in knowledge and attitude accessing questions.

RESULTS

Total 100 questionnaires were distributed. 83 participants completed the questionnaire. 47 (56.62%) male students and 36 (43.37%) female students with male to female ratio of 1.3:1 answered the questionnaire. The age of the students was ranged from 20-25 years (mean age: 22

Table 2: Knowledge of hepatitis B among the study population

years). 41(49.39%) students were from 3rd year BDS and 42(50.60%) were from 3rd year MBBS.

Table 1: General	characteristics of the	study	participa	nts
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Variables		Number of subjects (%)		
Gender	Male	47 (56.62%)		
	Female	36 (43.37%)		
Year of Study	3 rd Year BDS	41(49.39%)		
	3 rd Year MBBS	42(50.60%)		

Overall majority of study participants had adequate knowledge on hepatitis B infection and its mode of transmission. Knowledge level regarding hepatitis B infection was better in 3rd year 61.5% as compared to 3rd year 38.46% class (Table 2).

On the questions regarding the attitude of students towards hepatitis B infected patients, 56% BDS students and 44% MBBS students had given correct answered. 3rd year BDS students had slightly better attitude towards hepatitis B patient care than MBBS.

Questions	Class	Agree	Disagree	Undecided
Corrier of happtitic P are at right of infacting others	3 rd yr BDS	90.2	9.8	
	3rd yr MBBS	88.1	9.5	2.4
Can hepatitis B spread through casual contact such as holding of hands, sharing of toilet and	3 rd yr BDS	41.5	56.1	2.4
drinking in the same glass	3 rd yr MBBS	33.3	64.3	2.4
Can benetitie B enreed through contact with ener wound	3 rd yr BDS	85.4	7.3	7.3
Can nepatitis B spread through contact with open wound	3rd yr MBBS	76.2	19.0	4.8
Con benetitie D beve transmitted by blood and blood products	3 rd yr BDS	80.5	19.5	
Can nepatitis B have transmitted by blood and blood products	3rd yr MBBS	83.3	16.7	
Can banatitia P have transmitted by up starilized syringes, and surgical instruments	3 rd yr BDS	82.9	12.2	4.9
Can nepatitis B have transmitted by un-stemized synnges, and surgical instruments	3rd yr MBBS	83.3	16.7	
	3 rd yr BDS	53.7	43.9	2.4
Can nepatitis B have transmitted through saliva	3rd yr MBBS	54.8	38.1	7.1
la hanatitia B asyrually transmitted diasasa	3 rd yr BDS	48.8	46.3	4.9
is nepatitis b sexually transmitted disease	3rd yr MBBS	57.1	38.1	4.8
Con hanatikia Bivirua asusa livar asusa	3 rd yr BDS	75.6	24.4	
Can repairits B virus cause liver cancer	3rd yr MBBS	73.8	21.4	4.8
	3 rd yr BDS	87.8	9.8	2.4
	3rd yr MBBS	81.0	16.7	2.4
Dess handitis Busseins provide protection	3 rd yr BDS	90.2	7.3	2.4
Does nepaillis B vaccine provide protection	3rd yr MBBS	90.5	7.1	2.4
Do you think honotitis B virus has laboratory test	3 rd yr BDS	92.5	5.0	2.5
	3rd yr MBBS	95.1	4.9	
la hanatitia P aurahla/arayantahla	3 rd yr BDS	85.0	10.0	5.0
is nepatitis d curable/preventable	3rd yr MBBS	81.0	11.9	7.1
Do you think that hangtitia P has next avreaure prephylavia	3 rd yr BDS	67.5	17.5	15.0
Do you unink unachepatius o nas post-exposure propriylaxis	3rd yr MBBS	73.8	11.9	14.3

Table 3: Attitudes to hepatitis B infected patients among the study population

Questions	Class	Agree	Disagree	Undecided
Would you accept hepatitis B patient in the same class as yours		80.5	17.1	2.4
		69.0	26.2	4.8
You don't mind sharing food with hepatitis B patient		48.8	46.3	4.9
		45.2	47.6	7.1
Chronic infection with hepatitis B is shameful		40.0	57.5	2.5
		26.2	71.4	2.4
	3 rd Yr BDS	43.9	53.7	2.4
Snaking nand/hugging nepatitis patient makes you uncomfortable		21.4	71.4	7.1
	3 rd Yr BDS	34.1	58.5	2.4
Caring for nepatitis patient makes you uncomfortable		28.6	71.4	
	3 rd Yr BDS	39.0	58.5	2.4
Hepatitis infected doctors/dentist/nurses should be allowed to work		47.6	52.4	-
Medical/dental personal should refuse treatment to hepatitis patient		31.7	58.5	9.8
		26.2	69.0	2.5
All patients should be tested or hepatitis infection before they receive health care		87.8	12.2	
		71.4	23.8	4.8
	3 rd Yr BDS	85.4	12.2	2.4
Following infection control guidelines will protect from being infected with nepatitis infection at work		81.0	11.9	7.1
In Pakistan hepatitis vaccination must be mandatory for all health care workers		87.8	4.9	7.3
		73.8	9.5	16.7

DISCUSSION

Over all out of 13 questionnaires about hepatitis B diseases, 3rd year MBBS students had given 8 correct answers, while 5 correct answers were given by 3rd year BDS students. 83.3% MBBS students knew that hepatitis B could transmit through blood and blood products while 80.5 % BDS students answered correctly. Similarly, 57.1% MBBS students knew that hepatitis B virus could transmit sexually, while 48.8% BDS students knew that 64.3% MBBS students were aware that hepatitis B virus could not transmit through casual contact such as holding of shaking hands, sharing toilets and drinking in the same glass, while 56.1 % BDS students knew this. A study conducted in medical and health science students revealed knowledge on transmission of hepatitis B through sexual route at 65.5%, by contaminated needles and syringes at 71.7%, by blood transfusions¹³. Another study found 38% final year BDS students think HBV can cause transmission via casual contact¹⁴.

Current study reported that medical students had better knowledge of Hepatitis B infection and its prevention aspects than dental students. Another study conducted in Odisha India by Choudhury P also revealed that MBBS students have better knowledge and attitude than BDS students⁵.Another study also concluded dental students had less knowledgeable than medical students¹⁵. Whereas BDS students' behavior is better than MBBS students. 80.5% of 3rd year BDS students had accepted to stay with hepatitis B patients in the same class, while 69% of 3rd MBBS students only accepted. This shows more positive attitude of 3rd BDS students towards caring of hepatitis B patients. Similarly, 48.8% 3rd BDS students were willing to share food items while 3rd MBBS 45.2% students were accepted. 57.5% BDS students disagree that hepatitis is shameful condition while 71.4% MBBS students disagree with this statement. MBBS students showed positive attitude towards hepatitis B patients. Out of 10 attitude questionnaire's, BDS students had 6 correct answers, while MBBS had 4 correct answers. Another study conducted among medical and dental students of private medical university in Karachi also showed¹⁶ mean attitude score of BDS students were 70.83% while 61.95% MBBS students were observed. The results showed that in general dental graduates has overall higher score level of attitude, behavior and infection control as compared to MBBS students. Although there is not much difference to study of student's attitude in caring hepatitis B patients. Still there is slight better attitude of BDS students, we believe that 3rd year BDS students have more clinical interactions with hepatitis B patients in their more clinical dental department rotations. In contrast a study conducted among dentists revealed only 10.2% were willing and 89.8% were not willing to treat HBV patients¹⁷. The purpose of this survey was to observe and compare students' attitude, so that further teaching methodology could modify to teach students and be able to serve communicable disease patients in the society. Although there is not much difference comparing knowledge and attitude of 3rd year MBBS and BDS students, there is still need to work on community-based curriculum to give more weightage to community-based diseases teaching like hepatitis. Further studies and surveys must be conducted to identify the curriculum issues and teaching methodologies to improve our health care teaching to serve community.

CONCLUSION

3rd year MBBS students have better knowledge of hepatitis B virus mode of action, spread and vaccination than 3rd year BDS students. On the contrary, 3rd year BDS students have better attitude towards caring of hepatitis B patients. Female students have better knowledge and attitude than males overall.

Conflict of interest: Authors have no conflict of interest

REFERENCES

- Ali A, Khan S, Malik SM, Iqbal MH, Aadil M. Comparison of knowledge and attitudes regarding hepatitis B among healthcare professionals in Pakistan. Cureus. 2017 Feb 23;9(2).
- Shigri AA, Leghari MA, Mazhar S, Bano M. Knowledge, Attitude And Practice Of Hepatitis B Among Dental And Medical Students Of Private Medical University, Karachi. Pakistan Oral & Dental Journal. 2015 Mar 1;35(1).
- Umer M, Iqbal M. Hepatitis C virus prevalence and genotype distribution in Pakistan: Comprehensive review of recent data. World journal of gastroenterology. 2016 Jan 28;22(4):1684.
- Ali M, Idrees M, Ali L, Hussain A, Ur Rehman I, Saleem S, Afzal S, Butt S. Hepatitis B virus in Pakistan: a systematic review of prevalence, risk factors, awareness status and genotypes. Virology journal. 2011 Dec;8(1):1-9.
- Sharma S, Attokaran G, Singh KS, Jerry JJ, Ahmed N, Mitra N. Comparative evaluation of fracture resistance of glass fiber reinforced, carbon, and quartz post in endodontically treated teeth: An in-vitro study. Journal of International Society of Preventive & Community Dentistry. 2016 Jul;6(4):373.
- Rathi A, Kumar V, Majhi J, Jain S, Lal P, Singh S. Assessment of knowledge, attitude, and practices toward prevention of hepatitis B infection among medical students in a high-risk setting of a newly established medical institution. Journal of laboratory physicians. 2018 Oct;10(04):374-9.
- Ali A, Khan S, Malik SM, Iqbal MH, Aadil M. Comparison of knowledge and attitudes regarding hepatitis B among healthcare professionals in Pakistan. Cureus. 2017 Feb 23;9(2).
- Mahesh R, Arthi C, Victor S, Ashokkumar S. Hepatitis B infection awareness among dental graduate students: A cross sectional study. International scholarly research notices. 2014;2014.
- Mahboobi N, Porter SR, Karayiannis P, Alavian SM. Oral fluid and hepatitis A, B and C: a literature review. Journal of oral pathology & medicine. 2012 Aug;41(7):505-16.
- Al-Abhar N, Moghram GS, Al-Gunaid EA, Al Serouri A, Khader Y. Occupational exposure to needle stick injuries and hepatitis B vaccination coverage among clinical laboratory staff in Sana'a, Yemen: cross-sectional study. JMIR Public Health and Surveillance. 2020 Mar 31;6(1):e15812.
- Massaroli A, Martini JG, Moya JL, Bitencourt JV, Reibnitz KS, Bernardi MC. Teaching of infection control in undergraduate courses in health sciences: opinion of experts. Revista Brasileira de Enfermagem. 2018;71:1626-34.
- Boeira ER, Souza AC, Pereira MS, Vila VD, Tipple AF. Controle de infecções e medidas de segurança do paciente abordados em projetos pedagógicos da enfermagem. Revista da Escola de Enfermagem da USP. 2019 Jan 31;53.
- Mesfin YM, Kibret KT. Assessment of knowledge and practice towards hepatitis B among medical and health science students in Haramaya University, Ethiopia. PLoS One. 2013;8(11):e79642.
- Khurram M, Qaisar A, Zafar KJ, Wahid A, Hassan F, Javed M. Assessment of Knowledge and Attitude Towards Hepatitis B Infection Among Dental Students in Two Teaching Hospitals of Punjab, Pakistan. Annals of Punjab Medical College (APMC). 2020 Mar 31;14(1):78-82.
- Paul, P. and Arumugam, B., 2015. Knowledge and awareness regarding hepatitis B infection among medical and dental students: a comparative cross-sectional study. Int J Res Med Sci, 3(9), pp.2352-2356.)
- Leghari, Mohammad Ali. (2015). Knowledge, attitude and practice of hepatitis b among dental and medical students of private medical university, Karachi. Pakistan Oral & Dental Journal. 35.
- 17. Khalil H. Willingness of Saudi dental professionals to treat hepatitis B virus infected patients. Nige J Clin Pract. 2015;18(2):247-50.