

Assessment of Parental Knowledge and Attitude Regarding Child Dental Care

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ABSTRACT

Background: For the permanent healthier dentition, primary teeth play important role. Early loss of primary teeth causes many difficulties including ectopic bad esthetic, malocclusion, poor social interaction, poor speech skills, low self-esteem and spaceloss of the successor teeth. The aim of the study was to assess the knowledge and attitude of parents about dental care for their children between ages of 5 to 12 years visiting the consultant department of Liaquat University of medical & health sciences (LUMHS), Jamshoro. **Methods:** This was a descriptive cross sectional study, 250 parents formed the study group. Sampling technique was convenience. A questionnaire was filled by parents or guardians regarding level of education, purpose of visit to the hospital, willing or not willing to undergo restorative treatment of the child, reason for willingness or unwillingness and age of starting brushing. **Results:** Out of total 250 parents 73 (29.2%) were uneducated and 177 (70.8%) were educated, 165 (66%) were mothers and 85 (34%) were fathers. Children who visited hospital for pain were 183 (73.2%), 45 (18%) visited hospital for pain and swelling & 22 (8.8%) visited hospital for pain swelling and fever. Parents who responded that it was unnecessary to restore the primary teeth of their children were 205(82%) because they consider milk teeth unessential as they will shed off sooner or later. Parents who cannot afford the treatment are 35 (14%) and 10 (4%) gave reason that they don't have time to go for restorative treatment for milk teeth of their children. Children who started tooth brushing at the age of 4 were 77 (30%) who started at the age of 5 were 65 (26%) and 108 (44%) of children did not start tooth brushing till the age of 12. **Conclusion:** The knowledge and attitude of parents regarding restorative treatment of their children was unfavourable and awareness regarding dental care was poor.

Keywords: Child, Dental care, Parent's attitude, Knowledge.

INTRODUCTION

One of the crucial factors which affect the overall well-being is dental health.^[1] Care should be taken in the primary dentition stage as the outcome of the untreated deciduous teeth can have detrimental impact on the secondary dentition.^[1,2] Therefore, oral health maintenance is a requisite for childcare.^[3] Prevalence of early childhood caries is witnessed on a large scale globally. "Early Childhood Caries is defined as the presence of one or more decayed (noncavitated or cavitated lesions), missing (due to caries) or filled tooth surfaces in any primary tooth in a preschool-age child between birth and 71 months of age".^[4] Parents, particularly mothers are the primary cornerstones of a child's lifestyle and their oral habits are reliant upon parental awareness,

perception and attitude.^[2-6] Such habits include perception and attitude.^[2-6] Such habits include tooth brushing technique, preserving oral hygiene and eating habits which are acquired from the family.^[5] Minimized tooth decay is noticed among children who routinely follow oral hygiene instructions.^[2,6] Another precautionary measure for children is visiting a dentist timely. This is crucial for proper examination of the oral cavity so that tooth decay can be diagnosed early and for educating parents, giving guidance about dietary intake regarding their child's dental care and counseling them to acquire preventive measures for them.^[7] Pakistani population is facing widespread teeth problems especially among the people living in rural areas who are less educated, increasing the necessity of awareness of oral health measures across the nation.^[8]

MATERIALS AND METHODS

This is a Descriptive Cross sectional study with Non Probability Consecutive sampling conducted by Community Dentistry Department of Liaquat University of Medical & Health Sciences, Jamshoro/Hyderabad, Pakistan from November

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2019 to December 2019. Sample size of 250 is selected; a structured, self-administered questionnaire was distributed among 250 parents having children between 5 and 12 years of age. Those having mentally and physically handicapped children were excluded from the study. Written consent was obtained from participants. Total of 250 questionnaires were distributed among the participants. Incomplete forms were excluded from the study. SPSS-20 was used for data analysis.

RESULTS

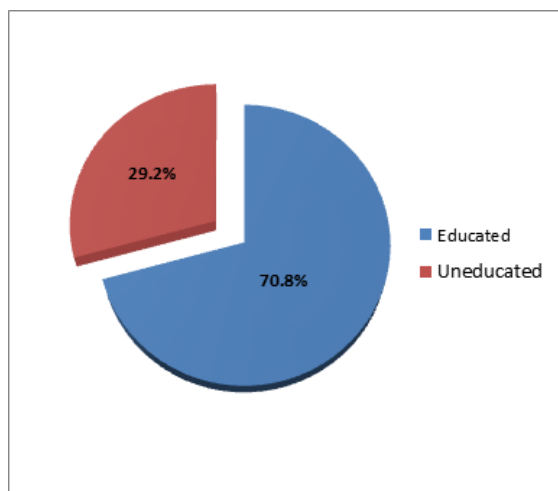


Figure 1: Showing Education of parents

Table 1: Status of Child's Dental Care and Responses from Parents

1. Purpose of visit to hospital?			
Pain	Pain + swelling	Pain + swelling + fever	Routine dental checkup
73.2%	18%	8.8%	0%
2. Parents accompanied children?			
Mothers		Fathers	
66%		34%	
3. Reasons of unwillingness of parents to undergo restorative treatment in deciduous teeth of their children			
Time	Economy	Unnecessary	
4%	14%	82%	
4. Age of starting tooth brushing by children			
4 years	5 years	Did not start	
30%	26%	44%	

Out of total 250 parents 73 (29.2%) were uneducated and 177 (70.8%) were educated [Figure 1], 165 (66%) were mothers and 85 (34%) were fathers. Children who visited hospital for pain were 183 (73.2%), 45 (18%) visited hospital for pain and swelling & 22 (8.8%) visited hospital for pain swelling and fever. Parents who responded that it was unnecessary to restore the primary teeth of their children were 205(82%) because they consider milk teeth unessential as they will shed off sooner or later. Parents who cannot afford the treatment are 35 (14%) and 10 (4%) gave reason

that they don't have time to go for restorative treatment for milk teeth of their children. Children who started tooth brushing at the age of 4 were 77 (30%) who started at the age of 5 were 65 (26%) and 108 (44%) of children did not start tooth brushing till the age of 12 [Table 1].

DISCUSSION

According to my study it is found that the key factor for the maintenance of child's oral health is parental knowledge and awareness. These results are reliable with the findings of other study carried out by Wong et al,^[9] and Lee Amp carried out in Hong Kong and established a like conclusions.^[10] Additional study conducted by Peterson PE et al,^[11] in Kuwaiti mothers in school teachers also have same findings. This is because parents are the decision makers of their children and they play important role in the habits they adopt. If parents have good knowledge and positive attitude regarding oral health consequently their children will have good oral hygiene. Therefore, maternal factors cannot be ignored. Children alone cannot take care of their teeth properly because they are dependent on their mothers therefore educating parents is essential.

According to my study oral health behavior of parents and their level of knowledge and attitude about child dental care were found negative. These findings are in related with the findings of previously reported study of Rajab LD in Jordon on oral health behavior of school children and parents.^[12] The concept behind this negative attitude is the thinking of parents that primary teeth will shed off and they will be replaced by permanent teeth so milkteeth are not necessary to be restored.

In the present study 70.8% parents were educated and 29.2% were uneducated. The possible reason for not visiting to the dental hospital for the dental treatment of children was uneducated parents. Most common reason to visit hospital was pain (75%). Similar findings were reported by Mohebbi et al in their study in Tehran. Reason that they have no concept of regular dental checkup.

Certain limitations of this study that affect child oral health are parent's socio-economic status and monthly income. Since monthly income is a sensitive issue there were more chances of parents not participating in this study, hence these factors were not assessed in this study; further studies can be carried out considering these factors.

CONCLUSION

This study concludes that, essential oral health behaviours in parents reflect in their young children, like frequency of carbohydrate consumption and tooth brushing habits.

Furthermore, it illustrates that for maintenance of children dental health status, promotion of parent's knowledge and attitude regarding important oral health determinants should be taken into account. Education level of parent is also an important factor for maintenance of child's oral hygiene to good level. It was found that child's visits to dental health care providers was depending on severe symptoms like pain, swelling and any other discomfort thus provoking the need of knowledge of preventive dentistry among parents.

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