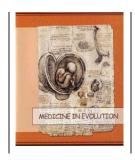
# Oral and general seeking pattern behavior among adult dental patients



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#### **Abstract**

There is a need to identify the reasons why individuals do not attend regular medical checkups and to assess the main sources for health information. In this cross-sectional study were included 110 dental patients (50% females), with mean age of 51.25 years (SD±12.26) from Bucharest. The participants completed an anonymous questionnaire with items related to their dental visits habits and the main sources of medical information. Results: most of the patients (71.8%) used to visit the dentist for emergency reasons, especially patients with low level of education and reduced self-assessed socio-economic status. The main source of oral health information is the dentist (70%) and for general health, the physician (73.6%). Conclusion: there is a need for active involvement of dentists and general practitioners in the health education of their patients.

Keywords: medical information, health promotion, healthcare services.

#### INTRODUCTION

The context in which patients and individuals seek dental and general health information changed recently due to the diffusion of the media and reveal the autonomous medical search besides the dentist and physician [1, 2].

Notwithstanding recently appeared health channels for communication, doctors still remain the most reliable source of information for their patients [2].

Some studies showed that there are active communication channels (e.g. interpersonal, print, Internet) and passive channels (e.g. radio and television), both as primary oral and general information sources for health issues [3, 4].

In order to reduce inequities in medical information availability, there is a need to understand patient's medical information-seeking behavior [5].

#### MATERIAL AND METHODS

In this cross-sectional study were included 110 patients (50% males), aged between 33 and 75 years, from Bucharest. The participants have received and completed an anonymous questionnaire with items related to their dental visits habits (reasons for presenting to the dental office: regular check-ups or emergency); the main sources of medical information, and also socio-demographic data (age, gender, self-assessed socio-economic status, and education level).

Respondents were assured of data confidentiality.

The subjects were divided in two age groups: adults (18-64 years) and elderly (> 65 years).

#### **RESULTS**

The mean age of the subjects was 51.25 years (SD±12.26) and 50% of them were females. The main background characteristics of respondents are presented in Table I. Most of the dental patients were adults (81.8%) and with higher education (more than 12 years of study, and with medium self-assessed socio-economic status (SES). Half of subjects are employed.

Table I. Characteristics of dental patients included the study

Variables	N (%)
Gender	
Female	55 (50)
Male	55 (50)
Age	
Adults	90 (81.8)
Elderly	20 (18.2)
Education level	
≤8 years of study	8 (7.3)
9-12 years of study	47 (42.7)
>12 years of study	55 (50)
Socio-economic status (SES) -	
self-assessed	
Low	12 (10.9)
Medium	53 (48.2)
High	45 (40.9)
Labor market status	
Employed	55 (50)
Other conditions	55 (50)

Regarding the main reasons for attending the dental office, most of the patients (71.8%) used to visit the dentist for emergency reasons (pain or other severe oral problems), mainly men and with no differences by age (Table IIa), patients with low level of education and low self-perceived SES (Table IIb).

Although in a small number, there are four subjects who are on their first visit to a dental office (Table IIa).

Table IIa. Pattern of visiting dentist by age and gender

	All	G	ender	Interval age		
	N	Males	Females	Adults	Elderly	
	(%)	(N)	(N)	(N)	(N)	
Every 6-12 month	27	8	19	21	6	
(check-up)	(24.5)					
Emergency	79	47	32	65	14	
(pain/problems)	(71.8)					
Never	4 (3.6)	0	4	4	0	

Table IIb. Frequency and reasons for visiting dentist by SES and education level

	Education (years of study) (N)			Self-assessed SES (N)		
	≤8 9-12 > 12			Low	Medium	High
Every 6-12 month	0	12	15	0	14	13
Emergency (pain)	8	32	39	10	37	32
Never	0	3	1	2	2	0

In terms of dental information, the main source is the dentist (70%). Mass media and both sources (media and the dentist) are chosen in small proportions (7.3%) and 6.4% respectively. Nearly one quarter (16.4%) say they have information regarding oral health or choose not to answer this question (Table IIIa).

Of those who declared the dentist as the only source of information, most have higher education and an increased level of self-assessed SES (Table IIIb).

Regarding the main sources of general health, the situation is similar to the one described above: most of the participants (73.6) are informed by the physician, especially men under 65 years of age (Table IVa), those with more years of study, with medium and high self-perceived socio-economic status (Table IVb).

A percentage of 14.5% of the subjects did not answer the question related with sources of medical information or say that are not informed in this regard, mainly females and elderly (Table IVa). Media and is a variant little chosen by respondents (3.6%), as well as the version with both sources of information (mass media and the physician), see Table IVa.

Table IIIa. Sources of oral health information by age and gender

	All	G	ender	Interval age		
	N (%)	Males (N)	Females (N)	Adults (N) (18-64 ys)	Elderly (N) (≥ 65 ys)	
None	18 (16.4)	6	12	3	15	
Dentist	77 (70)	40	37	72	5	
Mass media	8 (7.3)	5	3	8	0	
Dentist and media	7 (6.4)	4	3	7	0	

Table IIIb. Sources of oral health information by SES and education level

	Education (years of study) (N)			Socio-economic status (SES) self- assessed (N)		
	≤8	9-12	> 12	Low	Medium	High
None	3	11	4	11	7	0
Dentist	3	34	40	0	40	37
Mass media	2	2	4	1	2	5
Dentist and media	0	0	7	0	4	3

Table IVa. Sources of general health information by age and gender

	All	Ge	ender	Interval age		
	N (%)	Males (N)	Females (N)	Adults (N) (18-64 ys)	Elderly (N) (≥ 65 ys)	
None	16 (14.5)	8	8	4	12	
Physician	81 (73.6)	42	39	73	8	
Mass media	4 (3.6)	1	3	4	0	
Doctor and media	9 (8.2)	4	5	9	0	

Table IVb. Sources of general health information by SES and education level

	Education			Socio-economic status (SES) self-assessed			
	(years of study) (N)			(N)			
	≤8	9-12	> 12	Low	Medium	High	
None	5	11	0	11	3	2	
Physician	3	34	44	0	44	37	
Mass media	0	2	2	1	2	1	
Doctor and media	0	0	9	0	4	5	

#### **DISCUSSIONS**

It is important to identify the reasons why individuals, in general, do not go to regular medical checkups throughout life.

The results of the present study revealed that incorrect medical and dental attendance is related with reduced education level and socio-economic status, similar with other studies [6, 7].

Subjects with increased level of education usually present for regular dental and medical check-ups, issue found in similar studies [8, 9, 10].

#### **CONCLUSIONS**

The addressability behavior at the dental office is largely incorrect, the participants included in this study addressed to the dentist when a problem or pain occurs, only a quarter present for regular checkups. There are also subjects who have never been to a dentist's office. The results show that the main source of medical information is the dentist and the physician. The media is a source of medical information, but in a small proportion.

The active involvement of dentists and general practitioners in the health education of patients is required.

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