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Research Article

**A STUDY ON PARENTAL AWARENESS ABOUT THEIR
CHILDREN'S FIRST DENTAL VISIT IN PAKISTAN**¹Dr Adnan Haider, ¹Dr Anooshay Ejaz, ¹Dr Sara Qureshi¹Punjab Dental Hospital, Lahore.**Article Received:** January 2019**Accepted:** February 2019**Published:** March 2019**Abstract:**

Introduction: Contrary to earlier misconception, when people, undermining importance of the oral health, used to go to dentists for the treatment of their ailing teeth only at the time they could not bear the pain, it is now realized and accepted universally that oral health is an essential part of the general health of any age group be it adults or children.

Aims and objectives: The basic aim of the study is to analyze the parental awareness and behaviour about their children's first dental visit in Pakistan.

Material and methods: This cross sectional study was conducted in Punjab Dental Hospital, Lahore during 2018. The data was collected through a questionnaire. We chose a convenience sample of 300 participants. There have been no similar studies to extrapolate or calculate the sample needed. Parents were approached during their visits to our outpatient and inpatient departments. We excluded parents of children with such conditions as developmental delay, musculoskeletal disability, and respiratory compromise, as their needs in a dental home could be very challenging.

Results: Majority (29%) of the children visited the dentist for the first time at the age of 3–6 years while the least percentage (8%) visited the dentist for the first time at age 0–1 year. A statistically significant difference was found between the responses ($P \leq 0.05$). Majority (72.67%) of children were being accompanied by parents during their first dental visit. Majority (40.33%) of the parents said that overall experience of the first visit of their children was good.

Conclusion: It is concluded that bulk of the parents were unaware about the appropriate age of their children's first dental visit. Most of the parents brought their children to dentist after their children experienced pain or suffered from dental caries.

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INTRODUCTION:

Contrary to earlier misconception, when people, undermining importance of the oral health, used to go to dentists for the treatment of their ailing teeth only at the time they could not bear the pain, it is now realized and accepted universally that oral health is an essential part of the general health of any age group be it adults or children. Nevertheless, it has been unfortunate to find that children get victimized to dental caries at the budding stage of their life as early as 12 months of age [1]. Over and above difficulty in eating, sleeping, altered growth, psychological effect, and also the increased risk of developing dental caries in permanent teeth, pain is the main problem associated with early childhood caries [2]. Hence, the prevention of dental caries in children is of greater importance during the early phase of their life so that they are not incapacitated at all to do all the essential activities of their developing life in a healthy manner and to the maximum required degree [3].

Oral health needs to be maintained from early in life. A very high prevalence of dental diseases among Pakistani children makes it even more important. However, many expectant mothers are oblivious to the consequences of poor oral health for their children. Mothers with poor oral health are more likely to infect their babies with caries causing bacteria, consequently increasing the risk of early childhood caries [4]. So, an early dental check-up visit after birth is of prime importance in dental disease prevention. An early check-up dental visit provides the dentist with an opportunity to educate the parents about appropriate feeding and oral hygiene practices in their child. Any abnormality in oro-facial tissues can also be detected and managed at early stage. It is recommended that the first dental check-up visit should be made as soon as first primary teeth erupt; and not be later than 12 months of age [5]. A comprehensive age-specific prevention program may include educating parents about proper oral hygiene procedures for infants and toddlers, appropriate feeding/dietary routine, fluoride application/supplements if indicated, early detection of oral habits, management of teething symptoms, prevention of accidental dental injuries, and treating incipient caries if already developed [6].

Aims and objectives

The basic aim of the study is to analyze the parental awareness and behaviour about their children's first dental visit in Pakistan.

MATERIAL AND METHODS:

This cross sectional study was conducted in Punjab Dental Hospital, Lahore during 2018. The data was collected through a questionnaire. We chose a convenience sample of 300 participants. There have been no similar studies to extrapolate or calculate the sample needed. Parents were approached during their visits to our outpatient and inpatient departments. We excluded parents of children with such conditions as developmental delay, musculoskeletal disability, and respiratory compromise, as their needs in a dental home could be very challenging.

Statistical analysis

Qualitative and quantitative data are expressed as percentages. Descriptive statistics were used to summarize demographics and all other characteristics of the participants. A two-sided P -value <0.05 was statistically significant. Some data were missed, since the study was survey-based. Missed data were not accounted for in the analysis. All statistical analyses were done using SPSS version 21.0

RESULTS:

Majority (29%) of the children visited the dentist for the first time at the age of 3–6 years while the least percentage (8%) visited the dentist for the first time at age 0–1 year. A statistically significant difference was found between the responses ($P \leq 0.05$). Majority (72.67%) of children were being accompanied by parents during their first dental visit. Majority (40.33%) of the parents said that overall experience of the first visit of their children was good. About 39.67% of the children had positive behavior as per Frankl's scale, during their first dental visit. About 53.67% of the participants said that they might return for the next appointment for their children, while 28.67% were not sure about their coming for recall visit.

Table 01: Analysis of frequency distribution of different aspects at the first dental visit

Age of the child at the time of first visit		Person accompanying the child at the time of first visit		Overall experience of first dental visit	
Age	n (%)	Person	n (%)	Experience	n (%)
0-1 year	24 (8.00)	Parent	218 (72.67)	Very good	102 (34.00)
1+-3 years	51 (17.00)	Sibling	26 (8.67)	Good	121 (40.33)
3+-6 years	87 (29.00)	Grand parent	27 (9.00)	Satisfactory	43 (14.33)
6+-9 years	86 (28.67)	Guardian	29 (9.67)	Bad	24 (8.00)
>9 years	52 (17.33)	Alone	0 (0.00)	Very bad	10 (3.33)
χ^2 (df)	47.433 (4)*	χ^2 (df)	529.500 (4)*	χ^2 (df)	159.500 (4)*
Child's behavior during first dental visit		Are you likely to return for next appointment?		What treatment was provided at the first time of the visit?	
Definitely positive	96 (32.00)	Definitely yes	34 (11.33)	Problem for visit was treated	121 (40.33)
Positive	119 (39.67)	Probably no	86 (28.67)	Only oral examination/X-ray done	74 (24.67)
Negative	54 (18.00)	Definitely no	19 (6.33)	Only medication prescribed	48 (16.00)
Definitely negative	31 (10.33)	Probably yes	161 (53.67)	Only advice provided	57 (19.00)
χ^2 (df)	63.387 (3)*	χ^2 (df)	164.453 (3)*	χ^2 (df)	42.267 (3)*

*Highly significant $P < 0.0001$

DISCUSSION:

It is very distressing to find that dental caries takes toll of health of a child of an age of <3 years which is the budding phase of his life growth. As a matter of fact, owing thereto, preventive measures taken at the early stages hold great significance since it has been observed that incidence of dental caries is high among those who are infected before the age of 3 years [6]. Over and above other common preventive measures, the important factors facilitative to establishing the oral health of children are proper oral hygiene and balanced diet, awareness about appropriate timing of children's first dental visit, recall visits, behavior of children in dental clinic, and the positive attitude of parents/guardians [7]. In the current study, as many as 29% of the children are reported to have visited the dentist for the first time at the age of 3–6 years, while the least percentage of 8% visited the dentist for the first time at the age of 0–1 year. This finding corroborates with various previous studies conducted in Saudi Arabia, wherein the parents/guardians exposed their children to dentist at 3–6 years of age. The underlying reason is their misconception, whereby they do not require to take their children to dentists/pedodontists unless any problem arises, especially before the age of 1 year [8].

The AAPD has recommended that the first dental examination should be at the time of eruption of first tooth and no later than 12 months of age. A study by Schroth et al (2007) reported that parents who believed that primary teeth are important had children with a high number of sound primary dentition [9]. On the other hand, low parental knowledge and poor attitudes towards oral health have been associated with higher caries experience in infants and young children. Dental caries and its complications affect the child's quality of life, both physically and psychologically. Childhood oral disease, if untreated, can lead to pain and other serious health problems, such as oral abscess, cellulitis, bone loss, and spread of infection via the bloodstream [10]. An early dental check-up visit ensures that a relationship is built between the child and the dental staff. In addition, early dental visits provide the dentist with an opportunity to educate the parents about different preventive modalities both professional and at home [7].

CONCLUSION:

It is concluded that bulk of the parents were unaware about the appropriate age of their children's first dental visit. Most of the parents brought their children to dentist after their children experienced pain or suffered from dental caries. There is ample need to raise

awareness among masses regarding the importance of taking oral health care of their children quite seriously at the earliest budding stage of their life.

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