

The Relation of Knowledge in Restorative Dentistry in Upper-Middle-Class Society with Frequency of Regular Dental Visits

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Abstract

Background: The development of education, socioeconomic conditions, technology, and public awareness of the importance of oral and dental health encourages an improvement of dental and oral health services. This service form is a visit to the dentist. Middle to upper-class societies with better economic conditions and good education have a greater opportunity in gaining knowledge about restorative dentistry care as well as in utilizing dental and oral health services. The purpose of the research is to know the relation of restorative dentistry care knowledge with the frequency of regular visits to dentists in upper-middle-class society. Method: using a cross-sectional study design with the instrument of research in questionnaire form. The number of samples was 100 people using the purposive sampling method in the Surakarta region. The collected data were tested using Kruskal Wallis statistical tests. Result: The results showed that most of the sample (72%) had good knowledge and most of them (54.2%) had regular visits to the dentist. The Kruskal Wallis test shows that there was a correlation between the high knowledge group ($p = 0,027$) and intermediate knowledge group ($p = 0.004$) with a regular dental visit frequency. Conclusion: There was a correlation between restorative dentistry treatment knowledge and the frequency of regular visits to dentists in upper-middle-class society. High and Intermediate knowledge about restorative dentistry have a significant correlation with a regular dental visit.

Keywords: Restorative Dentistry Treatment, Dentist Visit, Upper Middle Class.

Introduction Section

Dental pain is the main reason and common for someone to visit a dental office.¹ According to Risesdas data in 2007 the percentage of Indonesian citizens who had oral health problems was 23,4% but the amount who get proper oral health treatment is 29,6%.² Maintaining oral health from infant to adult is imperative for total well-being. Therefore, utilization of preventive dental health services should be applied and one of them is routine dental visits. Changes in lifestyle result in increasing oral health problems based on Risesdas data in 2013 which is 25,9% and the absorption of oral health treatment is 31,1%.³ Untreated oral disease can lead to a catastrophic with decreasing the quality of life and create major withdraw in welfare.⁴ Most of oral health disease can be prevented by routine dental treatment.⁵ At dental clinic, dentist usually treat patient with options base on their case, restorative dentistry is the most frequent treatment perform by a dentist.⁶ There are also another restorative treatment such as inlay, only, jacket crown and veneer. The most weakness from restorative dentistry is high treatment cost and it require more than one visit.⁷ Oral health attitude , income and knowledge about dentistry contribute to the decision of dental treatment.⁸ A person's Oral health attitude and practice can be seen on brushing habit, dental flossing, using mouthwash and dental visit.⁹ Several factors are obstacles for dental visit utilization, for example limited knowledge about oral health treatment, high cost and exemption of dental treatment insurance coverage.¹⁰ Another obstacles factors like sociodemografic factors for example age, gender, education, social economic status and living place category whether uptown or rural have impact in the general health facility utilization.¹¹ At certain social level, these factors influence the availability of oral health treatment facility while at family level mostly influenced by income, parent's education, oral health belief as well as oral health attitude and practice.¹²

Method

This research is a cross sectional study design using questionnaire survey instrument. Research subject is the upper middle class citizens who make a dental visit in Surakarta district. The determination of upper middle class category is based on Kuppuswamy scale. Total sample is 100 respondents. All respondents are obliged to fill the informed consent for filling the questionnaire, but the ethical clearance was obtained before the initial procedures. The questionnaire contains points in which is an adaptation from the previous research with calibration and validation. Data collection is from the questionnaire that had been filled by the respondent in the Dental Office. Data analysis using Non-Parametric statistic with Kruskal-Wallis test with $p < 0.05$ and 95% CI. SPSS 20 for windows software is used for the analysis.

Results

Result from Kruskal-Willis test shows that upper middle up group with high knowledge and intermediate category knowledge in Restorative Dentistry treatment have significant association with Dental Visit Frequency with $p = 0.027$ and $p = 0.004$, respectively (Tabel 1).

Tabel 1. Kruskal-Willis test Knowledge Category in Restorative Dentistry Treatment and Dental Visit Frequency.

Knowledge	Frequency	N	Mean	<i>P value</i>
Poor	Seldom	1	2,63	0,221
	Never	4	4,50	
	Total	5		
Intermediate	Routine	9	16,78	0,004
	Seldom	13	18,50	
	Never	1	8,19	
	Total	23		
High	Routine	39		0,027
	Seldom	24		
	Never	9		
	Total	72		

Discussion

This research shows that High Knowledge about Restorative Dentistry Treatment have significant association with Dental Visit Frequency (p value = 0.027). On the High Knowledge category mean for a routine dental visit is 41,91 and the highest mean, among two other categories (seldom and never). Highest mean on a routine dental visit is relevant to several previous research which state that the higher economic status the more he can fulfill his livelihood need, including choice in qualified health facility.¹³ Intermediate Knowledge about Restorative Dentistry Treatment has a significant association with Dental Visit Frequency (p value= 0.004). Intermediate Knowledge category has the highest mean for seldom frequency (mean = 18.50) this mean higher compare to routine and never frequents. The cause of Intermediate Knowledge possess by Upper Middle Class is because they do not have time to spare, time and gain additional knowledge about dental health. Individual knowledge is one of the factors that determine the agility of a person to seek and make effort in the health service, the higher the knowledge the better their preventive behavior.¹⁴ Overall, the respondents are in the seldom group dental visit or they only came when in dental pain. According to previous research, most people reluctant to spend time visiting a dental office due to inefficient allocation time other factors are the distance and prolonged treatment time.¹⁵ Traumatic feeling also has a major factor to influence Dental Visit behavior.¹⁶ Poor Knowledge about Restorative Dentistry with Dental Visit Frequency have no significant association with Dental Visit Frequency ($p=0.221$). There are factors that cause Upper Middle Class never visit dental office one of them is most people feel reluctant or they seem does not see the importance of having dental visit. We can conclude that in Upper Middle Class society proper knowledge about restorative dentistry treatment has a significant association with Dental Visit Frequency. This fact shows that particular health knowledge in commoners affects their health seeking behavior. This research proves that in Upper Middle Class society,

knowledge is a proxy to determine dental seeking behavior. Societies with high ability to pay and have extra knowledge about specific health treatment tend to give attention to maintain their health.^{16,17,18,19,20}

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