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DENTAL TREATMENT: PATIENTS' EXPECTATIONS, SATISFACTION AND DENTIST BEHAVIOR IN HAIL, SAUDI ARABIA

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ABSTRACT

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Key words:

Dental Patients' expectations, Dental Patients' satisfaction survey, Dental treatment expectation and satisfaction **Background:** Providing an adequate care based on patient's perceptions and expectations is an absolute must to accomplish comprehensive dental treatment because patients are considered to be the core of health care facilities.

Material & Method: It wasan observational study having a cross-sectional design conducted in Hail, Saudi Arabia. Two hundred samples were collected from eight different private dental clinics in Hail city using non probability, convenientsampling technique. Study tool was a self-administered face and content validated questionnaire. Data was displayed as number and percentage.

Results: It was observed thatpatient'sexpectations were belowtheir satisfaction level in most of the parameters measured.Compared to 126 (82.4%) who expect dentist patiently listen to their problems, 143 (93.5%) dentist did so. Additionally, 117 (76.5%) expected dentist to discuss the treatment options while 131 (85.6%) did so, whereas126 (82.4%) expected dentist explanation of the chosen treatment procedure, while 136 (88.9%) did so.

Conclusion: The present study resulted in an overall satisfaction level of 88.9%. We recommend further researches regarding this issue and expanding the study to reach governmental dental clinics and also emphasizing on the importance of patients' rights in community health programs.

Clinical Significance: It is an ethical responsibility of a dentist to maintain affirmative attitude with their patients, and they should explain different treatment options alongside their clinical outcome to their patients. The present study was formulated to measure that

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INTRODUCTION

Oral health has a great influence on the quality of an individual's life. Orodental diseases especially odontogenicpain adversely affect day-to-day life to perform routine functions. In school goers, success of a student depends up on his/her health.

Schools fail to achieve their prime educational mission if the studying students or teaching staff are not healthy.¹Students with bad orodental health are expected more to experience toothache due to which they remain chronically absent from their school and don't perform as good as their colleagues with better oral health status.² Suffering from toothache and consequent absenteeism of school children is quite common and has been reported in many studies.³ Similarly, absenteeism due to oral pain in employees (workers) has also been investigated and reported in various studies with varying

Corresponding author:* **Ammar Ahmed Siddiqui Department of Dental Public Health, College of Dentistry, University of Ha'il, Saudi Arabia findings.^{4,5} Maintenance of good orodental health therefore, becomes an utmost priority to stay healthy but once the oral health of a person is compromised, as per charter of WHO it is the duty of a dental practitioner to restore the oral health to the satisfaction of the patient.⁶

Satisfaction is defined as "an individual's feeling of pleasure resulting from achievement or fulfillment of his/her expectations.⁷Since patients are the core of health care system, patients' satisfaction is considered an essential aspect for the quality of dental care.⁸It is therefore mandatory for a dental clinician to provide an adequate dental care based on the patients' perceptions and expectations to give satisfactory results for the patients.

Patients requiring dental treatment often come with predetermined expectations about what occurs in a dental operatory. The patients may have expectations regarding a variety of concerns such as, waiting time, the hygiene and appearance of the clinic, financial considerations, and clinical care outcomes, relationships with the dental practitioner and clinic staff. They expect to have a polite and courteous relationship with everyone connected with a dental clinic. Some simple and routine measures of a practice, such as appointment scheduling, telephone protocols, staff interaction, dissemination of information, and answering patients' inquiries are critical factors which increase and maintain patient satisfaction.

Limited number of studies have examined the fulfillment of patient's expectations by comparing patient's views on ideal behavior and the actual behavior of dentists.⁹. Laheti et al reported that a mean score of 52.2% of patient say that dentists should tell about preventive procedure which is considered an ideal situation and materialized in the treatment, furthermore, 36.7% of patients say that it's not important that dentists shake hands with the patients and it is not materialized in the treatment.¹⁰ Whilst R. Hashim found a mean of dental satisfaction score according to sociodemographic characteristic was 18.4 for male and 19 for female.¹¹ Thus, dental health care providers are demanded to reach health from all of its aspects which will reflect on the quality of dental services and improve patients attitude and behaviors since the quality of care has a subjective profile, as it involves cognitive evaluation process or a structural measure. On the other hand, patient satisfaction tends to have an objective profile and determinant, which is patients' subjection.¹² This is why measuring Patient expectations, satisfactions and dentist behaviortoward dental care is a crucial issue. Therefore the aim of this study was to evaluate the level of patients satisfaction for treatment expectations and dentist behavior during the dental visit.

MATERIALS AND METHODS

It was an observational study having a cross-sectional design and was conducted in Hail, Saudi Arabia. Verbal and written informed consent was taken from the participants and the medical director of each clinic prior to the beginning of the face and study. Self-administered content validated questionnaire was used as study tool to determine the value of expectation and satisfaction before and, after undergoing dental treatment. Reliability of questionnaire was measured through internal consistency using cronbach's alpha test. The value of test was 0.73, which make the questionnaire reliable. The questionnaire was divided into two parts: The first part, gathered the socio demographic data, such as (sex, age, occupation and education), and the second part captured the level of expectations and satisfaction. Sample size of the present study was 200 collected from 8 different private dental clinics in Hail, city using non probability, convenient sampling technique. However 153 questionnaires were returned giving a response rate of 76.5 %. The study was approved by the ethical committee, University of Hail, having an approval number H-2016-024. The data was displayed and analysis done on Statistical Package of Social Sciences, SPSS version 20. Data was displayed as number and percentage.

RESULTS

Out of 200, a total of 153 (76.5%) responded to the questionnaires, 79 (51.6%) of them were male and 74 (48.4%) were female. Most of the participants were 21-30 years of age (44.4%) and 31-40 (22.9%) and (39.2%) had good educational level as they were university graduates(Table1). In general, we found that the level of expectation was lower than the satisfaction level.

Table 1 Socio Demographic data

Socio-Demographic	e Number Perce				
Data	(N)	n%			
Sex					
Male	79	51.6%			
Female	74	48.4%			
Total	153	100%			
Age (Group				
10-20	34	22.2%			
21-30	68	44.4%			
31-40	35	22.9%			
40 and above	16	10.5%			
Total	153	100%			
Occu	pation				
Employed	79	51.6%			
Not Employed	67	43.8%			
Retired	7	4.6%			
Total	153	100%			
Level Of	Education				
Primary School	4	2.6%			
Middle School	30	19.6%			
High School	57	37.3%			
University Graduate	60	39.2%			
Post Graduate	2	1.3%			
Total	153	100%			

About 124 (81%) patients expect their dentist to be presentable (Table2), whereas on the other hand 138 (90.2%) reported the dentist to be truly presentable (Table3) Regarding whether the dentist welcome their patients verbally or not, 113 (73.9%) expected same (Table2) while in contrast, 132 (86.3%) dentist actually welcomed their patients verbally.(Table3).

 Table 2 Depicting the patients expectation for the dental visit

Variables	YES n (%)	NO n (%)	Total
Do you expect the dentist to be presentable	124 (81 %)	29, (19%)	153
Do you expect the dentist to welcome you	113,(73.9%)	40, (26.1)	153
Do you expect the dentist to listen to your problem patiently	126, (82.4%)	27,(17.6%)	153
Do you expect the dentist to discuss the treatment option with you	117,(76.5%)	36,(23.5%)	153
Do you expect the dentist to explain treatment procedure	126,(82.4%)	27,(17.6%)	153

 Table 3 Depicting the patient's satisfaction for the dental visit

Variables	YES n (%)	NO n (%)	Total
Did you find the dentist presentable	138,(90.2%)	15,(9.8%)	153
Did the dentist welcome you verbally	132,(86.3%)	21,(13.7%)	153
Did the dentist listen to your problem patiently	143,(93.5%)	10,(6.5%)	153
Did the dentist discuss the treatment options with you	131,(85.6%)	22,(14.4%)	153
Did the dentist explain how the treatment is done	136,(88.9%)	17,(11.1%)	153

Furthermore, compared to 126 (82.4%) of patients who expect their dentist to listen to their problems patiently (Table2), 143 (93.5%) reported the dentist did listen to their problems patiently (Table3). Additionally, 117 (76.5%) expect dentist to discuss the various treatment options (Table2). On the other hand, 131 (85.6%) of participants reported that dentist virtually discussed treatment options with them (Table3). Concerning whether dentist explained the chosen treatment procedure or

not, 126 (82.4%) expect dentist to do so (Table2). Subsequently, it turned out that 136 (88.9%) got an explanation of the chosen treatment procedure (Table3).

DISCUSSION

To the best of our knowledge the present study was the first of its kind in Hail region of Saudi Arabia. The primary objective in planning of this study was to evaluate the level of patient's expectations, satisfaction, and dentists behaviors towards dental treatment. The present study is unique for many reasons, the most important one is it measured variables related to patients' rights, and also accounts for ethical responsibilities of dentist towards their spatients. As it is expected by dentists to inform their patients about every insights on availability of various dental treatments, so that they can make an informed decision. The present may serve as a baseline study which evaluated the level of patient satisfaction of dental treatment in our studied population.¹ Understanding patients' expectation not only provides a base line data to serve the patients adequately in the long term but also can be fruitful in management of patients in long run, or in the treatment that require many sittings such as prosthesis replacement/orthodontic treatments.¹⁴ In this study, the results showed that the level of satisfaction amongst patients was higher than the expectations level which goes against the study hypothesis. However this interesting finding also draws attention towards whether a patient knows, what is being expected from their dentists? with respect to various options of dental treatments/his attitude/behavior.Do they have the adequate knowledge of their rights? There exists a wide gap. Further studies needs to be plans in order to measure that. The present study was limited to private dental clinics only, which might be a possible factor of the present results as private sectors perceived to be more marketed bases and business oriented in general compared with governmental sector. In a study done at Dental Hospital attached to King Saud University, Rivadh, the result showed that patients satisfactions were higher than what researchers expected it to be, that is inagreement with the results of present study.¹⁵ The probable reason of high level of patients' satisfaction in this study seemingly were achieved as the dental training in a teaching institution is provided in a highly disciplined manner under the guidance of vastly experienced and professional faculty members. Interestingly another study conducted in a teaching institution in India presents the very comparable findings, that further enhances our argument which stated that patients satisfaction will probably be higher amongst teaching institutes having quality of facilities and competent faculty members.¹⁶ To show empathy, communicate effectively, and politely to influence audiencemay be a God gifted talent, not everyone is blessed with that skill, however it can be acquiredthrough continuous learning. ¹⁷ The findings of present study also showed that patients preferred dentists who have an adequate communication skills and showed empathy towards the patients, as the responses after the treatment showed that 86.3% of dentist virtually listened to patients carefully. Which is in accordance with Holt et al who found that the most important factor influencing a dentist's practice to be 'care and attention' rated as very important by 90% of respondents.¹⁸ Additionally, several studies which indicated that the dentist's explanation of dental issue and treatment options to the patient received a high score.^{19,20} The results are in line with the finding of this study as 85.6% of patients reported that dentists

actually discussed the various treatment options and letting the patients to choose the treatment based on their convenience and financial situation. On the other hand, Groucherand Alhobera et al stated in a study of patients views about preventive dental care and perceptions that patients reported a fear about their ignorance about overall charge and their anger of the final bill.^{21,22} Based on above findings, a dentist simply cannot let it go . It is an ethical and moral responsibility of a dentist to explain all the possible and available dental treatment, their cost and effectiveness to their patients. Fortunately in the present study the dentist attitude was reported to be excellent, however it cannot be generalize to whole Hail region as samples were gathered only from private sector where collection of study data was gathered based on our convenient. Further research on concerned issue with larger sample size and random sampling may provide us the better and detailed picture of our studied hypothesis.Besides, some studies reported that the dentist's explanation of dental issue and treatment options to the patient obtained a low score.¹⁸, ²³, ²⁴ These findings will probably be very astonishing for many but strange to us. To identify the reason for this inconsistency we recommend further research, specifically on patients attitudes, and behavior which might help unearthing relevant factors as why a cohort of patients were dissatisfied even if it's been explained to them, Further research is recommended, that must focus on determining the impact of dentist attitude, and its correlation on patients satisfaction and behavior.

CONCLUSION

The present study resulted in an overall satisfaction level of 88.9% and the dissatisfaction level was 11.1%. Since this study is the first of its kind in Saudi Arabia in general and specifically in Hail city, more demands to understand patients satisfaction not only in terms of desired services but also the minimum acceptance or adequate levels, we recommend further studies regarding this issue and expanding the study to reach public sector dental clinics and also emphasizing on the importance of patients' rights in community health programs.

References

- 1. Bogden JF. General school health policies. Fit, Healthy and Ready to Learn: A School Health Policy Guide. Alexandria, Va: National Association of State Boards of Education; 2000, accessed on 2.9.2017
- 2. Jackson SL, Vann WF Jr, Kotch JB, Pahel BT, Lee JY. Impact of poor oral health on children's school attendance and performance. *Am J Public Health*, 2011,101.10:1900-1906
- 3. Shaikh S, Siddiqui AA, Aljanakh M. School Absenteeism due to Toothache among Secondary School Students Aged 16-18 Years in the Ha'il Region of Saudi Arabia. *Pain Research and Treatment*, 2016,49:50-54
- 4. Miotto MH1, Silotti JC, Barcellos LA. Dental pain as the motive for absenteeism in a sample of workers. CienSaude Colet. 2012 May, 17.5:1357-1363.
- Nardi A, Michel-Crosato E, Biazevic MGH, Crosato E, Pizzatto E, D P Queluz. Relationship between orofacial pain and absenteeism among workers in Southern Brazil. *Braz J Oral Sci* January/March 2009 - Volume 8, 1:50-54

- 6. World health organization, oral health surveys: basic method, World health organization, Geneva,Switzerland, 4th edition,1997
- Kotler P. Marketing Management. 11th ed. Upper Saddle River, Nj: Prentice Hall; 2003. p. 61
- 8. Levin R. The correlation between dental practice management and clinical excellence. *Journal of the American Dental Association*. 2004, 135.3:345-346.
- 9. Newsome PR, Wright GH. A review of patient satisfaction; 2, Dental patient satisfaction; an appraisal of recent literature. *Br Dent J.* 1999,186:166-170.
- 10. Lahti S, Tuutti H, Hausen H, Kääriäinen R. Comparison of ideal and actual behavior of patients and dentists during dental treatment. *Community dentistry and oral epidemiology*. 1995 Dec 1, 23.6:374-378.
- 11. Hashim R. Patient satisfaction with dental services at Ajman University, United Arab Emirates. *East Mediterrarian Health Journ*. 2005, 11:913-921.
- 12. Raftopoulos V. A grounded theory for patients' satisfaction with quality of hospital care. *JournalwebICUSNurs.* 2005, 22:1-15.
- Bruscino T. Basic Ethics in Dentistry. The Academy of Dental Learning & OSHA Training. 2012,16-25
- Dhingra C, Anand R. Consent in Dental Practice: Patient's Right to Decide. Oral Hyg Health.2014, 2, 129-134
- Habib SR, Ramalingam S, Beladi A, Habib A. Patients' satisfaction with the dental care provided by dental students. J Ayub Med Coll Abbottabad. 2014, 26.3:353-356
- 16. Karpagam G N, Mahesh, Shanmugavel. Patients Needs and Expectations on Dental Treatment. *Research J. Pharm. and Tech.* 2016, 9.7:933-936.

- Hojat M. Empathy in health professions education and patient care. Dordrecht: Springer; 2016 Apr 21.Page 129-150
- Holt V, McHugh K. Factors influencing patient loyalty to dentist and dental practice. *Br Dent J* 1997, 183: 365-370.
- Shresta A, Doshi D, RaoA, Sequeria P. Patient satisfaction at rural outreach dental camps- a one year report. The International Electronic Journal of Rural and Remote Health research, Education practice and Policy. 2008, 1-6.
- 20. Hanoum S, Moses LS. Prioritizing healthcare service attributes; Comparing important performance analysis and KANO's Model. 2nd Asia pacifi c conference on Manufacturing System, Yogyakarta, Indonesia. 2009, 1-8.
- 21. Croucher R. The performance gap. Patients' views about dental care and the prevention of periodontal disease. London: Health Education Authority, 1991, Research Report No. 23.
- 22. Alhobeira HA, Mian RI, Siddiqui AA. Perceptions of Patients Seeking Consultations in Restorative Dental Clinics of Hail Region, Saudi Arabia. *Journal of International Oral Health*.2016, 8(1):1-4.
- 23. Karydis A, Komboli KM, Hatzigeorgiou D, Panis V. Expectations and perceptions of Greek patients regarding the quality of dental health care. *Int J Qual Health Care*. 2001, 13:409-416.
- 24. Al Mudaf BA, Moussa AA, Terky MA, Al-Dakhil GD, El-Farargy AE, Al-Quzairi SS. Patient satisfaction with three dental speciality services: A centre-based study. *Med PrincPract.* 2003,12:39-43.

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