

Considering Patient Preferences During Operative Visits to Optimize Comfort Levels

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Introduction

Dental anxiety is a well-documented phenomenon that affects a significant portion of the population, with NIH estimates as high as 36%.¹ It has been proposed that a traumatic dental episode during childhood can manifest into long lasting dental fear through adulthood. It has been estimated that about one half of adults with dental fear or anxiety developed such in childhood.³ The adverse effects of dental anxiety are wide-reaching, as they often lead to avoidance of routine dental visits, delaying treatment, and resulting in poorer oral health outcomes.

Previous research on dental fear and anxiety has primarily focused on behavioral and psychological interventions once the fear has been established. A growing body of research has focused on strategies to reduce anxiety in the dental environment, with particular attention on how the dental operatory is organized and staged.

The “staging” of a dental operatory reverse to the physical and psychological arrangement of the treatment space, including elements such as lighting, smell, and sound. These environmental factors have been shown to influence patient perceptions of comfort and control during treatment.⁴

Objectives

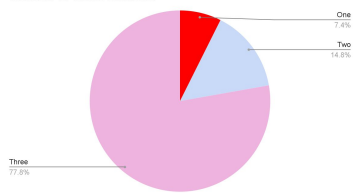
The purpose of this study is to understand patient preferences for dental operative room staging during a dental treatment visit. The results of this study may better inform providers how to adjust the set-up of a dental operative room to improve comfort levels during treatment.

Methods

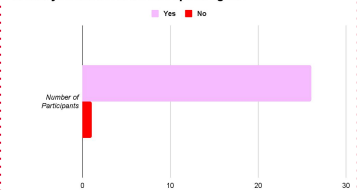
In this cross-sectional study, eligible participants were asked to complete a two-part survey. Inclusion criteria consisted of English-speaking patients between 7 and 17 years of age who presented to the dental office for an operative appointment. The pre-treatment survey collected the patient’s age and prompted the patient to select one to three items from a predetermined list of staging options to be implemented during the procedure. These selected interventions were subsequently incorporated into the treatment visit. Upon completion of the appointment, the post-treatment survey was administered to assess the patient’s perceptions, thoughts, and emotional responses regarding the visit.

Results

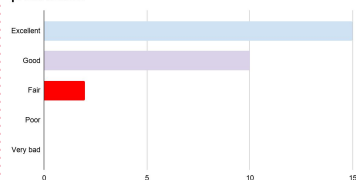
Number of Items Selected



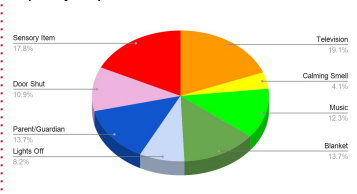
Would you want to have this option again?



How did it make you feel to be able to tell the dentist your preferences?



Popularity of Options Chosen



Patient Demographics

27 participants were included in this study. There were 18 participants were in the 7-10 years age range, 6 participants in the 11-13 years age range, and 3 participants in the 14-17 years age range. Gender was not included as a part of this study.

Conclusions

- Most participants picked the maximum number of staging options allowed, while very few participants did not select the maximum number of options
- Unable to draw conclusions about relationship between age and staging preferences chosen
- The vast majority of participants had positive reviews about this project
- Television and sensory items were the most selected staging interventions, while calming smell was the least selected
- Many children still want their parent/guardian in the room, while many children do not

References

