# AWARENESS OF VARIOUS DIETS FOR DETOXIFICATION AND MAINTENANCE OF ORAL HEALTH AMONG DENTAL STUDENTS

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#### **ABSTRACT**

Eating a variety of foods rich in nutrients from all the food groups promotes healthy teeth and gums. This means eating a balanced diet of fruits, vegetables, protein drinks, drinks high in calcium and whole grains for a healthy smile and a healthy body. The aim of the present study is to find out whether the dental students are aware about the various diets for detoxifications and maintenance of oral health. A cross-sectional survey based study was conducted among the dental students on the various diets for detoxification and maintenance of oral health. The questionnaire was distributed through the "Google forms" website to around 100 Dental students. 79% were aware of the various diets taken for detoxification and maintenance of oral health. 83% thought that there is a link between oral health and oral health conditions. This study concludes that the dental students were aware about the various diets for detoxification and maintenance of oral health.

**Key words**: awareness;dental students; detoxification; knowledge;oral health

# **INTRODUCTION**

Mouth which is the part of the body does not come to mind when we talk about purification, detoxification. Health is connected with the lips, gums, teeth and overall well-being. Mouth home of the host organisms cannot see the taste. Bacteria present in the mouth are both good and bad kinds. Poor bacteria contributes to a variety of oral health problems. Oral health is a condition free of chronic orofacial pain, oral cancer, oral infection and periodontal disease (gum) disease, tooth decay, tooth loss and other diseases which restrict the ability of an individual to bite, chew, smile and talk as well as psychosocial well-being. When oral health is maintained the general health is also maintained (Al-Qahtani, Razak and Khan, 2020). Diet has a considerable influence on the etiology and control of dental and oral disorders (Anekar, 2011). The detox diets are common dietary strategies which claim to promote the elimination of toxins and weight loss, thereby promoting health and wellness (Klein and Kiat, 2015). There is a biunique relationship between the diet and oral health. The balanced diet correlated with the oral Health, periodontal disease and dental

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elements quality or quantity of saliva. The incorrect nutritional intake correlates the Oral diseases ( Scardina and Messina, 2012) .

The previous article reports emphasised the synergistic relationship between malnutrition infectious diseases immune system. For example infections promote malnutrition which elicits the dysfunction of the Immune system. The impaired immunity intensifies the infectious diseases (Ehizele, Ojehanon and Akhionbare, 2009). People find oral health improves when adapting to Ayurvedic oral hygiene practices. Oral health knowledge, access and practice on preventive measures maintains oral health care among intermediate school children. (Al-Qahtani, Razak and Khan, 2020)

Oral health education promoted alongside the other forms of health education, the dietary nutrition advice and oral health integrated advice promote general health. Health education campaigns and health promotion websites are encouraged (Moynihan and Petersen, 2004).

The aim of the present study is to find out whether the dental students are aware of the various diets for detoxification and maintenance of oral health.

#### MATERIALS AND METHODS

A cross-sectional study was conducted from April to May 2020 through an online survey among the dental students. Convenient sample of 100 dental students was done. Among 100 participants, 58 Participants belong to the first year, 22 participants belong to the second year, 13% participants belong to the third year and 7% participants belong to the fourth year. The pros of the present study is that it is a quick study and quick interpretation. The cons of the study are that severe fatigue, homogeneous population and response bias. All Dental students who were willing to participate were included. All students who were not willing to participate were excluded.

**Internal validity:** using a pre tested questionnaire,

**External validity:** homogenization and replication of experiment.

Self administered questionnaires of 15 close ended questions were prepared and it was distributed among dental students through an online survey form "Google form". Demographic details were also included in the questionnaire. The data from the Google forms is analysed and then put into the excel sheet and then tabulation of the data finally the question comparison. The representation of the data is through a bar graph. Data was analysed with SPSS version (22.0). (Duraisamy *e t al.*, 2019) (Ganapathy *e t al.*, 2016) (Jain, Ranganathan and Ganapathy, 2017) (Ashok and Suvitha, 2016) (Ajay *e t al.*, 2017). Descriptive analyses as number and percent were calculated to summarise qualitative data. Chi square test was used to analyse and compare the year of study of the dental students and their knowledge and awareness of various diets for detoxification and maintenance of oral health. The independent variable of the present study is the age and gender.

# RESULTS AND DISCUSSION

The survey was conducted among dental students age group of 18 to 23 years. The survey was responded by 52% female and 48% of male among them 58% is first year, 22% second year, 13% at third year and the remaining 7% at fourth year. Both the male and female gender have almost equal awareness on various diets for detoxification and maintenance of oral health.

When the students were asked about whether they were aware of the various diets taken for detoxification and maintenance of oral health 79% were aware. When they were asked what are the foods recommended for good oral health 9% responded as calcium rich food, 31% responded fortified soy drinks, 26% responded fatfree milk and 34% respondent all of the above. 76% were knowledgeable on how to assist a patient to select an adequate non-cariogenic diet. 73% Were aware that dietary fats help prevent caries in humans. 84% responded that waterborne Fluoride is essential to maintain oral health when ingested at optimum level. 63% were aware that vitamin D enhances enamel remineralisation. 64% felt that oil pulling helps to detox your over cavity. 78% think toothpaste with neem, eucalyptus, peppermint, licorice helps to detoxify the teeth. When the people were asked about the duration of oil pulling 69% responded as 10 to 20 minutes and 31% responded as 30 to 40 minutes, when the people were asked whether tongue scraping is an effective way to remove toxins from your mouth 66% responded yes. 65% prefer dental flossing to maintain good oral health. 66% thought charcoal toothpaste helps to detoxify and maintain overall health. When the people were asked whether mouth rinses are helpful for maintaining oral health 69% answered yes. 76% responded that poor oral health is linked to many serious diseases and conditions. 83% thought that there is a link between oral health and oral health conditions. [Table 1]

From the present study it is evident that 79% of the students were aware of the various diets for detoxification. Where 43% responded from the first year. The P value 0.402>0.05 and it is statistically insignificant. A similar finding was found in the previous article by Saad Masood A. Qahtani et al.( Al-Qahtani, Razak and Khan, 2020). There is no previous article with opposing findings. [Figure 3]

From the present study 9% responded to calcium rich food, 31% to fortified salt drinks, 26% to fat-free milk and 34% all of the above when they were asked about the foods recommended for good oral health. Where 26% responded from the first year. P value 0.01<0.05 and it is statistically significant. [Figure 4] From the present study 76% were aware about how to assist a patient to select an adequate non cariogenic diet. Where 44% responded were from first year. P Value 0.846 > 0.05 and it is statistically insignificant. [Figure 5] From the present study it is evident that 73% responded that dietary fats help prevent caries in humans. Where 38% responded from the 1st year. The P value 0.061 > 0.05 and it is statistically insignificant. Figure 6] From the present study 84% responded that waterborne Fluoride is essential to maintain oral health when ingested at optimum level. Where 49% were from the first year. The P value 0.592 > 0.05 and it is statistically insignificant. [Figure 7] From the present study 63% were aware that vitamin D enhances enamel remineralisation. Where 37% responded were from the first year. The P value 0.943 > 0.05 and it is statistically insignificant. [Figure 8] From the present study 64% felt that oil pulling helps to detox your over cavity. Where 38% responded from the first year. The P value 0.460>0.05 and it is statistically insignificant. [Figure 9] From the present study 78% think toothpaste with neem, eucalyptus, peppermint, licorice helps to detoxify the teeth. Where 46% responded were from the first year. The P value 0.351>0.05 and it is statistically insignificant. [Figure 10] From the present study when the people were asked about the duration of oil pulling 69% responded as 10 to 20 minutes and 31% responded as 30 to 40 minutes. Where 43% responded were from the first year. The P value 0.271>0.05 and it is statistically insignificant. [Figure 11] From the present study when the people were asked whether tongue scraping is an effective way to remove toxins from your mouth 66% responded yes. Where 39% responded from the first year. The P value 0.930>0.05 and it is statistically insignificant.[Figure 12] From the present study 65% prefer dental flossing to maintain good oral health where 42% responded from the first year. The P value 0.60>0.05 and it is statistically insignificant. The article by Saad Masood A. Oahtani et al (Al-Oahtani, Razak and Khan, 2020) shows similar findings as the present study. No previous opposing article was found.[Figure 13] From the

present study it is evident that 69% were aware that mouth rinse is helpful for maintaining oral health where 37% responded from the first year. The P value 0.105>0.05 and is statistically insignificant. The similar finding for the present study was found in the article by

Saad Masood A. Qahtani et al (Al-Qahtani, Razak and Khan, 2020). There is no previous opposing article. [Figure 15] From the present study 76% responded that poor oral health is linked to many serious diseases and conditions. Where 46% responded were from the first year. The P value 0.196>0.05 and it is statistically insignificant. [Figure 16] From the present study 83% thought that there is a link between oral health and oral health conditions. Where 49% responded were from the first year. The P value 0.559>0.05 and it is statistically insignificant. [Figure 17]. The present research has origins from previous studies, where the investigators involved in studies which were done based on clinical reports, interventional studies (Ariga *et al.*, 2018) (Jyothi *et al.*, 2017) (Ashok *et al.*, 2014) (Venugopalan *et al.*, 2014), in vitro studies (Duraisamy *et al.*, 2019) (Ganapathy *et al.*, 2016) (Jain, et al, 2017) (Ajay *et al.*, 2017) and systematic reviews (Ariga *et al.*, 2018) (Selvan and Ganapathy, 2016) (Subasree, et al., 2016) (Vijayalakshmi and Ganapathy, 2016) (Ganapathy, et al 2017) (Kannan and Venugopalan, 2018) (Basha, Ganapathy et al 2018)

The present study included 100 Dental students and it is not done on a varied population, the less sample size chosen for this study is the major limitation. In future an extensive study with large sample size and varied population would analyse the awareness of dental students on various diets for detoxification and maintenance of oral health. In future the study can be expanded to more number of participants making them aware about the various diets for detoxification and maintenance of good oral health.

# **CONCLUSIONS**

The study concludes that most of the participants are aware of the various diets for detoxification and maintenance of oral health. Based on currently available research a good diet was recommended as an adjunct to maintain good oral hygiene and health along with the routine tooth brushing and flossing.

## **AUTHOR CONTRIBUTIONS**

Author 1 (Sarvasri T), carried out the study by collecting data and drafted the manuscript after performing the necessary statistical analysis. Author 2 (Dr. L. Keerthi Sasanka) aided in conception of the topic, has participated in the study design, statistical analysis and has supervised in preparation of the manuscript. Author 3 (Dr.Kavitha S) has participated in the study design and has coordinated in developing the manuscript. All the authors have discussed the results among themselves and contributed to the final manuscript.

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#### CONFLICTS OF INTEREST

None declared

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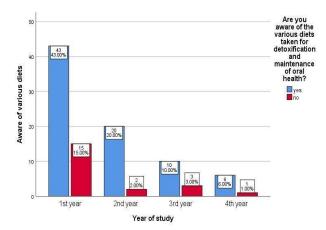


Figure 1: The bar graph represents the association between the awareness of dental students on various diets for detoxification and maintenance of oral health and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students were more aware when compared to other years regarding various diets for detoxification and maintenance of oral health. However, the difference was not statistically significant. (Chi square value: 2.931, df:3, p value = 0.402(>0.05), - statistically not significant)

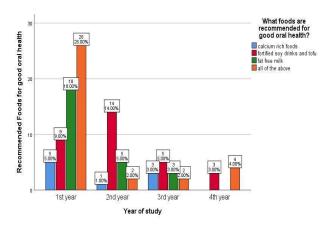


Figure 2: The bar graph represents the association between foods recommended for good oral health by the dental students and the year of study of the dental students. X axis represents the year of study of the dental students and the Y axis represents the number of responses obtained. Blue denotes calcium rich foods, red denotes fortified soy drinks, green, fat free milk, orange denotes all the above. The 1st year dental students were more aware when compared to other years regarding the foods recommended for good oral health. The statistical difference is significant. (Chi square value :27.543, df :3, p value =0.01(<0.05) - statistically significant)

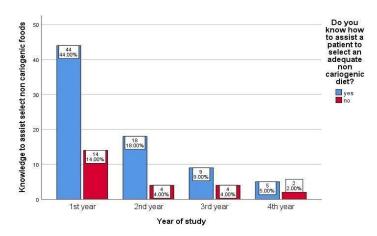


Figure 3: The bar graph represents the association between the awareness of dental students on how to assist a patient to select an adequate non cariogenic diet and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students were more aware when compared to other years regarding how to assist a patient to select an adequate non cariogenic diet. However, the difference was not statistically significant. (Chi square value: 0.816, df:3, p value = 0.846(>0.05) -statistically not significant)

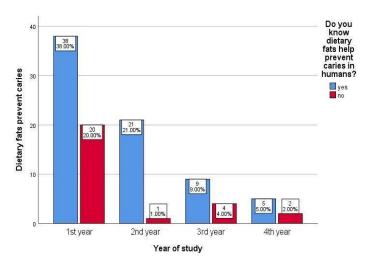


Figure 4: The bar graph represents the association between the knowledge of dental students on dietary fats which help prevent caries in humans and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students were more aware when compared to other years regarding the dietary fats which help prevent caries. However, the difference was not statistically significant. (Chi square test value: 7.378, df 3, p value = 0.061(>0.05)- statistically not significant)

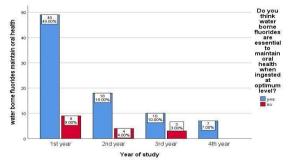


Figure 5: The bar graph represents the association between the knowledge of dental students about water borne fluorides that is essential to maintain oral health when ingested at optimum level and the year of study of the dental students. The X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students have better knowledge when compared to other years regarding water borne fluorides that is essential to maintain oral health. However, the difference was not statistically significant. (Chi square value:1.906, df:3, p value = 0.592(>0.05)-statistically not significant)

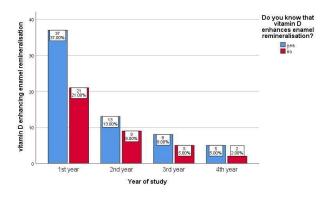


Figure 6: The bar graph represents the association between the awareness of dental students on vitamin D which enhances enamel remineralisation and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students were more aware when compared to other years regarding vitamin D which enhances enamel remineralisation. However, the difference was not statistically significant. (Chi square test value: 0.385, df:3, p value = 0.943(>0.05)statistically not significant)

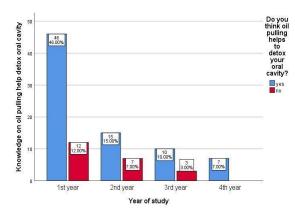


Figure 7: The bar graph represents the association between the knowledge of dental students about oil pulling which helps to detox the oral cavity and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students have better knowledge when compared to other years regarding oil pulling. However, the difference was not statistically significant. (Chi square value: 2.589, df: 3, p value= 0.460 (>0.05)-statistically not significant)

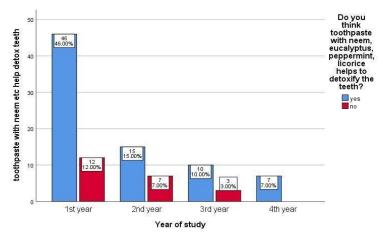


Figure 8: The bar graph represents the association between the knowledge of dental students on neem, eucalyptus, peppermint and licorice which helps to detoxify the teeth and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained yes(blue) and no(red). The 1st year dental students have better knowledge when compared to other years regarding neem, eucalyptus ,peppermint and licorice which helps to detoxify the teeth. However, the difference was not statistically significant. (Chi square test value:3.277, df:3, p value =0.351(>0.05) - statistically not significant)

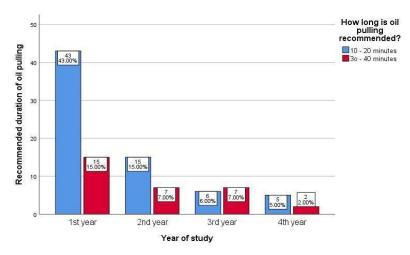


Figure 9: The bar graph represents the association between the recommended oil pulling duration by the dental students and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for 10-20 minutes(blue) and 30-40 minutes(red). The 1st year dental students were more aware when compared to other years regarding the duration of oil pulling.

However, the difference was not statistically

significant.(Chi square test value:3.914, df:3, p value =0.271(>0.05)- statistically not significant)

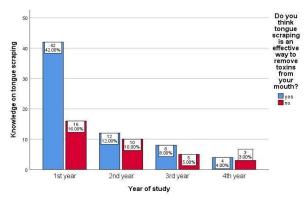


Figure 10: The bar graph represents the association between the knowledge of dental students on tongue scraping which is an effective way to remove toxins from your mouth and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students have better knowledge when compared to other years regarding tongue scraping. However, the difference was not statistically significant. (Chi square test value: 0.447, DF: 3,p value =0.930(>0.05) statistically not significant)

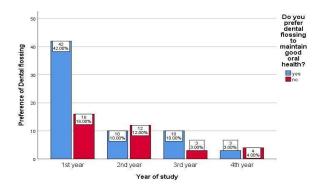


Figure 11: The bar graph represents the association between the preference of dental flossing to maintain good oral health and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students were more aware when compared to other years regarding dental flossing to maintain good oral health. However, the difference was not statistically significant. (Chi square test value: 7.417, DF:3, p value = 0.60(>0.05) - statistically not significant)

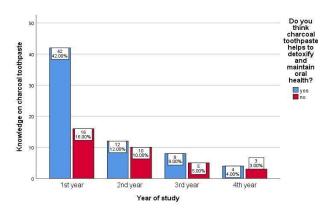


Figure 12: The bar graph represents the association between the knowledge of dental students on charcoal toothpaste which helps to detoxify and maintain oral health and the year of study of the dental students. The X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students have better knowledge when compared to other years regarding charcoal toothpaste. However, the difference was not statistically significant. (Chi square test:2.710, df:3, p value =0.439(>0.05)- statistically not significant)

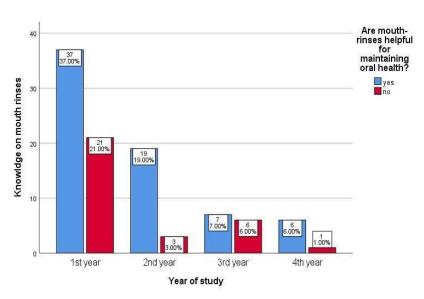


Figure 13: The bar graph represents the association between the awareness of dental students on mouth rinses which are helpful to maintain oral health and the year of study of the dental students. The X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students were more aware when compared to other years regarding mouth rinses. However, the difference was not statistically significant. (Chi square test value:6.146, df:3, p value =0.105(>0.05)- statistically not significant)

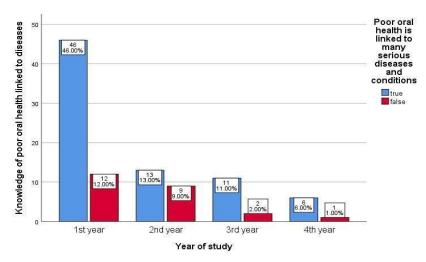


Figure 14: The bar graph represents the association between the depiction of dental students whether poor oral health is linked to many serious diseases and conditions and the year of study of the dental students. The X axis represents the year of study and the Y axis represents the number of responses obtained for true(blue) and false(red). The 1st year dental students were more aware when compared to other years regarding poor oral Health and many serious diseases are linked. However, the difference was not statistically significant. (Chi square test value:4.688, df:3, p value =0.196(>0.05), - statistically not significant)

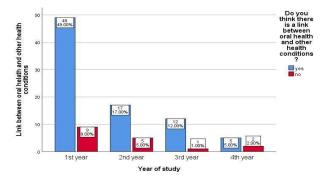


Figure 15: The bar graph represents the association between the knowledge of dental students on the link between oral health and other health conditions and the year of study of the dental students. X axis represents the year of study and the Y axis represents the number of responses obtained for yes(blue) and no(red). The 1st year dental students have better knowledge when compared to other years regarding the link between oral health and other health conditions. However, the difference was not statistically significant. (Chi square test value: 2.064, df: 3, p value = 0.559(>0.05), - statistically not significant)

**Table 1:** Awareness of various diets for detoxification and maintenance of oral health. and oral health conditions.

S no	Questions	Choices	Responses
1	Age	<ul><li>18 to 20 years</li><li>21 to 23 years</li></ul>	<ul><li>75%</li><li>25%</li></ul>

2	Gender	<ul><li>Male</li><li>Female</li></ul>	<ul><li>52%</li><li>48%</li></ul>
3	Are you aware of the various diets taken for detoxification and maintenance of oral health?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>79%</li><li>21%</li></ul>
4	What foods are recommended for good oral health?	<ul> <li>calcium rich foods</li> <li>Fortified soy drinks and tofu</li> <li>Fat free milk</li> <li>All of the above</li> </ul>	<ul><li>9%</li><li>31%</li><li>26%</li><li>34%</li></ul>
5	Do you know how to assist a patient to select an adequate non-cariogenic diet?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>76%</li><li>24%</li></ul>
6	Do you know dietary fats helps prevent caries in humans?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>73%</li><li>27%</li></ul>
7	Do you think water borne fluorides are essential to maintain oral health when ingested at optimum level?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>84%</li><li>16%</li></ul>
8	Do you know that vitamin D enhances enamel remineralisation?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>63%</li><li>37%</li></ul>
9	Do you think oil pulling helps to detox your oral cavity?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>64%</li><li>36%</li></ul>
10	Do you think toothpaste with Neem,eucalyptus, peppermint, licorice helps to detoxify the teeth?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>78%</li><li>22%</li></ul>
11	How long is oil pulling recommended?	<ul><li>10 to 20 minutes</li><li>30 to 40 minutes</li></ul>	• 69%
			• 31%

12	Do you think tongue scraping is an effective way to remove toxins from your mouth?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>66%</li><li>34%</li></ul>
13	Do you prefer Dental flossing to maintain good oral health?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>65%</li><li>35%</li></ul>
14	Do you think charcoal toothpaste helps to detoxify and maintain oral health?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>66%</li><li>34%</li></ul>
15	Are mouth rinses helpful for maintaining overall health?	<ul><li>Yes</li><li>No</li></ul>	<ul><li>69%</li><li>31%</li></ul>
16	Poor oral health is linked to many serious diseases and conditions?	<ul><li>True</li><li>False</li></ul>	<ul><li>76%</li><li>24%</li></ul>
17	Do you think there is a link between oral health and other health conditions?	<ul><li>Yes</li><li>No</li></ul>	• 83% • 17%