ASSOCIATION OF PATIENT'S EDUCATIONAL STATUS AND SUCCESS RATE OF COMPLETE DENTURES AMONG FEMALES

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ABSTRACT

Complete denture helps in replacement of missing dentures. The success and satisfaction of the complete denture is based on numerous factors like speech, fit, aesthetics, psychological factors and also educational status of the patient. The aim of the study was to determine association of patients educational status and the success rate of complete dentures delivered in Saveetha dental college among females. A retrospective study was done using the 86,000 case records of patients visiting University hospital from June 2019 - December 2019. Out of the total data 60 case sheets of female patients who have received complete denture were retrieved and analysed. The patients were then called by phone and asked to fill the questionnaire. Outcomes from the survey were correlated with the educational status of the patients using pearson's chi square test. Out of the 60 patients, 56% of the patients were satisfied with the fit of the denture, 61% satisfied with the facial appearance and 90% were satisfied with the size and shape of teeth and gums and 49% were not satisfied with chewing capabilities. Patients who were more educated were very particular about aesthetics and mostly not satisfied. However generally satisfaction increased with literacy rates and educated patients were more satisfied with the speech factor. Patients who were educated had better satisfaction with speech with their dentures as compared to uneducated patients. Patients who were educated were found to be less satisfied with the aesthetics of the denture than uneducated patients.

Keywords: Aesthetics; fit; literacy rates; mastication; phonetics

INTRODUCTION

In the current era, even with the various advances in dentistry (Venugopalan et al., 2014) and in the era of dental implants (Ashok et al., 2014; Selvan and Ganapathy, 2016; Ajay et al., 2017; Duraisamy et al., 2019), complete denture has its own significance in geriatric dentistry. (Subasree, Murthykumar and Others, 2016; Ahmed et al., 2019) The success of complete denture is dependent on multiple factors. (van Waas, 1990) Numerous previous studies have reported that successful rehabilitation with complete dentures does not only depend on factors modulated by dentist and lab fabrication (Ganapathy et al., 2016; Ganapathy, Kannan and Venugopalan, 2017; Kannan and Venugopalan, 2018) but also patient dependent factors are also a major concern. (Raza et al., 2016) Consistency of the saliva, anatomical stability of

alveolar ridge and overlying soft tissue, depth of sulci and limitations of the neutral zone are some of the important factors that determine the stability of dentures. (Ali *et al.*, 2019)

Apart from these physical factors, several other factors like psychosocial (Basha, Ganapathy and Venugopalan, 2018), psychological and socio-cultural factors also play a significant role in the assessment of the success of complete

denture treatment.(Ahmed *et al.*, 2019) As De van correctly stated "Meet the mind of the patient before meeting the mouth of the patient". Thus it is equally important to understand the mental attitude of the patient to help us to anticipate the patient's response during and after the treatment. (Choudhary, Kumar and Arora, 2016; Jain, Ranganathan and Ganapathy, 2017)

Although the prevalence of edentulism falling in all age groups (Steele *et al.*, 2000), the number of old people is still increasing and in a country, like India which is having a huge population, there is still lack of awareness and management of edentulous state.(Shigli, Hebbal and Angadi, 2007)(Singh *et al.*, 2012)According to Berg (Berg, 1993) construction of a good complete denture depends on technical,biological, and physiological interactions Between the patient and the dentist. Evaluation of the patient acceptance and satisfaction (Jain *et al.*, 2018)of their complete dentures depends on various factors such as age, gender, and socio economic factors, level of education apart from the physical factors.

The ultimate goal of any treatment to maximise the benefits from the treatment. (Ashok and Suvitha, 2016; Vijayalakshmi and Ganapathy, 2016) There are few previous studies done to improve the quality of complete denture by investigating the patient's feedback. (Ahmed *et al.*, 2019) Similarly, the present study hypothesized that apart from the biological and technical considerations (Jyothi *et al.*, 2017), the literacy rate of patients also influences the patient satisfaction of their complete dentures. Thus the aim of the study was to evaluate the association between the patient's educational level and satisfaction of complete denture in terms of fit, speech, mastication, facial appearance and colour and shape of teeth and gums.

MATERIALS AND METHODS

A retrospective study was done using the 86,000 case records of patients visiting University hospital from June 2019 - December 2019. Out of the total data, 60 case sheets of female patients who have received complete denture were retrieved and analysed. Prior permission to use the data for the study was obtained from the Institutional Review Board of the University (SDC/SIHEC/2020/DIASDATA/0619-0320). Patients were recruited through non probability sampling technique and after getting proper consent. The contact details of the patients were obtained from the case records.

A questionnaire was framed with 7 questions (Figure 1) which considered questions regarding the fit (retention), speech, masticational capabilities, facial appearance and colour and size of the teeth and gums along with the educational level of the paint. (Questionnaire is attached at the end of the article) The rating was based on Likert scale (Likert, 1932) ranging from 1-5 where 1 meant Very dissatisfied, 2 meant dissatisfied 3- neither satisfied nor dissatisfied, 4 meant satisfied and 5 meant very satisfied.

The population was then divided into subgroups based on age such as Group I - 40-50 years; Group II - 51-60 years; Group III - 61-70 years; Group IV - 71-80 years and based on educational status such as Group I - Graduates; Group II - Primary education; Group III - Uneducated.

Patients who received a complete denture within a year ageing from 40-80 years were included in the study. The patients who were mentally incapacitated and did not provide consent were excluded from the study.

The subsequent data collected was analysed using SPSS Version 20.0. Mean and standard deviation were calculated for quantitative variables like age whereas frequencies and percentage were calculated for

values like education level. Descriptive analysis was done. Chi-square test was used to compare denture fit, aesthetics, phonetics, mastication with educational status. A p value of less than 0.05 was considered to be statistically significant.

RESULTS AND DISCUSSION

A total of 60 female patients were included in the study. Out of which 10 (16.7%) patients belonged to group I, 21 patients (35%) belonged to group II, 17 (28.3%) patients to group III and 12 (20%) patients belonged to group IV as shown in Figure 2. 18.3% of the women were graduates, whereas 48.3% of the women we had done till primary education and 33.3% of the women were uneducated as shown in Figure 3. Majority (56.6%) of the patients were satisfied with the fit of their denture whereas only 1.6 % were very dissatisfied as shown in Figure 4. A 95/of the patients reported no sores or lesions associated with the denture. (Figure 5) Majority (61.6%) of the patients were satisfied and 26.6% were very satisfied with the facial appearance as shown in Figure 6. When it comes to the colour and shape of teeth and gums, almost 90% of the patients were very satisfied and satisfied. (Figure 7)

58% of the patients were satisfied with speech and 20% were neither satisfied nor dissatisfied as shown in Figure 8. Almost 54% of the patients were either dissatisfied or neither dissatisfied nor satisfied about the masticational capabilities of the denture as shown in Figure 9. There was no statistically significant (p>0.05) association between educational status and fit, educational status and appearance of sore spots, educational Status and mastication, however there was statistically significant (p <0.05) association between educational status and aesthetics and speech. Patients who were educated had better satisfaction with speech with their dentures as compared to uneducated patients.(Figure 10) Patients who were educated were found to be less satisfied with the aesthetics of the denture than less educated patients as shown in Figure 11 and Figure 12.

The current study was conducted to analyse the association between educational Status of the patient and denture satisfaction factors like fit, aesthetics, phonetics and mastication. Edentulism has become an integral part of old age with prosthetic rehabilitation always in demand. Thus, it is extremely important that the dentists give importance to the patients needs when doing denture fabrication.

The current study reported that patient's satisfaction level was increased with better literacy rates and this was in compliance with previous studies done by Singh BP(Singh et al., 2012) who reported that level of satisfaction was high with increased literacy rates and Celebic et al (Čelebić et al., 2003) who stated increased literacy rates will lead to increase in treatment motivation thus creating more awareness about denture treatment.

The results of the current study revealed that majority of the respondents (57%) were satisfied with the fit of the dentures, which is similar to the results reported by Jayaprakash et al(Jayaprakash, Basavaraj and Cl, 2011) and Raghoebar et al (Raghoebar et al., 2003) where 65 % of the participants were satisfied with the fit and retention of their dentures. Our study revealed that only 1.6 % were dissatisfied with the fit of their dentures and this is comparable to Celebic et al (Čelebić et al., 2003) who also reported low levels (7.2%) of the people were dissatisfied with their dentures.

The results of the current Study, reported that patients who were educated had a higher level of satisfaction with their phonetics and this could be due to the ability to appreciate the words and phonetics better than uneducated patients. This is in agreement with the results given by Abdul et al (Ahmed *et al.*, 2019) who reported educated patients had better phonetic satisfaction. Moreover, participants as a whole had moderate satisfaction with phonetics which is similar to the results reported by Jayaprakash (Jayaprakash, Basavaraj and Cl, 2011) et al who said that patients were moderately satisfied in relation to ability to speak.

According to the current study, majority of the patients were not satisfied with mastication similar to the results of the study by P Malli et al (Bhat, Malli and Others, 2014), this in most cases is a herculean task as the new denture comes in contact with the unstable mucosa which makes it difficult to come to a equilibrium to perform most masticatory movements. However fewer other studies like the one by Jayaprakash et al (Jayaprakash, Basavaraj and Cl, 2011) and Lucas et al (Lucas and Luke, 1983) stated that 78% were satisfied with the chewing capabilities which is quite contrary to the result of the current study.

Numerous previous studies (Raza *et al.*, 2016) have reported that generally women are more concerned about aesthetics and are usually not satisfied with their dentures. However, this concept is old fashioned. According to our Study, which included females, most of them were very satisfied with their appearance, however their education status seems to have an impact on their satisfaction levels. People who were more educated tend to be unsatisfied with their appearance than the uneducated people, this can be due to peer pressure and social life. This seems to be in compliance with the study by Celebic et al (Čelebić *et al.*, 2003) who reported that patients with a low level of education were more satisfied in general with their aesthetic appearance. This in general may be due to the lower levels of expectation among less educated people.

The current study had few limitations. The study included a small sample size and shorter follow up period. Moreover the denture satisfaction also depends on the quality of denture, behaviour of the dentist and the patient and instructions provided by the dentist. These facts were not included In the study.

CONCLUSION

The success of a complete denture depends on the quality of the denture, however patients satisfaction is also equally important. Thus it is very important to tend to the patients needs and understand how it affects the satisfaction level of the patients. This study is one such effort to understand how the educational status of the patient influences satisfaction.

Within the limits of the study, it can be concluded patients who were educated were more satisfied with the phonetics however were less satisfied with the aesthetics of the complete denture. However, further studies which overcome the limitations of this study which will include a larger sample size, Longer follow up period, dentist's point of view are required to generalise the results of this study.

AUTHOR CONTRIBUTION

Ilankizhai performed the data analysis, interpretation and wrote the manuscript which was commented on by all authors. Dr. Revathi Duraisamy and Dr. Madhu laxmi provided conceptual and technical guidance for all aspects of the research. All authors discussed the results and contributed to the final manuscript

CONFLICT OF INTEREST

Nil

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S.NO	QUESTIONS	OPTIONS	RESPONSES
1.	What is your educational status?	UneducatedPrimaryGraduate	• 33.3% • 48.33% • 18.33%
2.	How satisfied are you with the fit of dentures (Retention)	Very satisfied Satisfied Neither satisfied nor dissatisfied Dissatisfied Very dissatisfied	• 5% • 56.6% • 0% • 36.6% • 1.6%
3.	Have you had sore spots during using your denture	• Yes • No	• 5% • 95%
4.	How satisfied are you with your facial appearance with denture ?	Very satisfied Satisfied Neither satisfied nor dissatisfied Dissatisfied Very dissatisfied	• 26.6% • 61.67% • 8.3% • 3.33% • 0%
5.	How satisfied are you with the size and colour of your teeth and gums?	Very satisfied Satisfied Neither satisfied nor dissatisfied Dissatisfied Very dissatisfied	• 40% • 50% • 6.6% • 3.33% • 0%
6.	How satisfied are you with your speech with denture?	Very satisfied Satisfied Neither satisfied nor dissatisfied Dissatisfied Very dissatisfied	• 3.3% • 58.3% • 20% • 18.3% • 0%
7.	How satisfied are you with chewing capability?	Very satisfied Satisfied Neither satisfied nor dissatisfied Dissatisfied Very dissatisfied	• 1.6% • 46.6% • 3.3% • 40% • 8.3%

Figure 1 shows the questionnaire which was used for data collection which consisted of 7 questions and the percentages of responses obtained from the patient

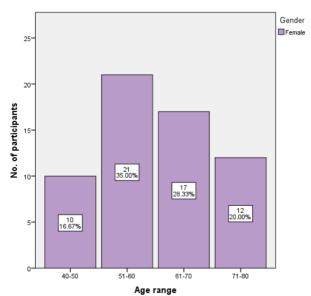


Figure 2: Bar graph showing the percentage distribution of different age groups who visited the institution in need of a complete denture. X axis shows age groups and y axis shows the total percentage of people in each age group. A total of 60 patients were included. Out Of which 10(16.7%) patients belonged to group I, 21 patients (35%) belonged to group II, 17(28.3%) patients to group III and 12(20%) patients belonged to group IV.

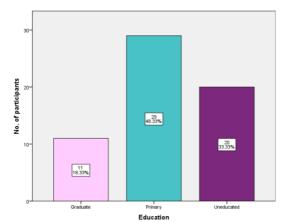


Figure 3: The bar chart represents the percentage distribution of women in each educational level category. X axis shows the educational levels and y axis shows the total percentage of women in each category. 18.3% of the women were graduates, whereas 48.3% of the women we had done till primary education and 33.3% of the women were uneducated

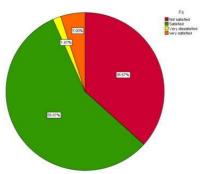


Figure 4: The pie chart represents the satisfaction of the fit of the denture. Majority (56.6%) of the patients were satisfied (green) with the fit of their denture whereas only 1.6% were very dissatisfied (yellow).

Question 3: Have you had sore spots during usage of your denture?

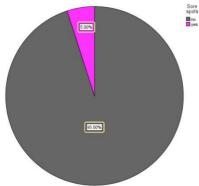


Figure 5: The pie chart represents the percentage of patients who reported with sores after wearing the denture. A 95 % of the patients reported with no (grey) sores or lesions associated with the denture

Question 4: How satisfied are you with your facial appearance after wearing the denture?

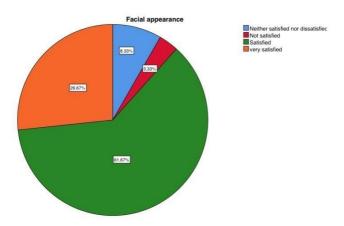


Figure 6: The pie chart represents the percentage of patients satisfied with the facial appearance after wearing the denture. Majority (61.6%) of the patients were satisfied (green) and 26.6% were very satisfied (orange) with their facial appearance.

Question 5: How satisfied are you with the colour and size of your teeth?

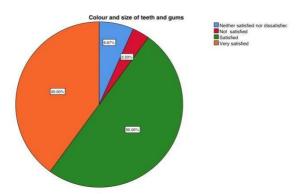


Figure 7: The pie chart represents the patient's satisfaction with colour and shape of teeth and gums. When it comes to the colour and shape of teeth and gums, 50% were satisfied (green) and 40 % were very satisfied (orange).

Question 6: How satisfied are you with the speech with your dentures?

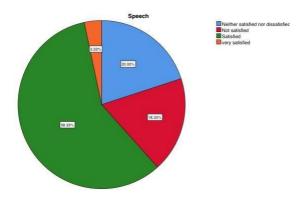


Figure 8: The pie chart represents the patient's satisfaction with phonetics. About 58% of the patients were satisfied (green) with speech and 20% were neither satisfied nor dissatisfied (blue).

Question 7: How satisfied are you with the chewing capabilities with the denture?

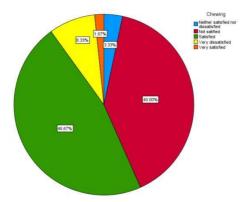


Figure 9: The pie chart represents the patients satisfaction of masticational capabilities with complete denture. Almost 54% of the patients were either not satisfied (red) or neither dissatisfied nor satisfied (blue) with the masticational capabilities of the denture.

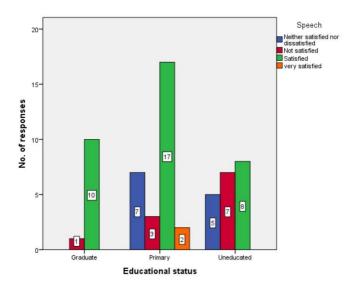


Figure 10: The bar chart represents the association between the satisfaction of phonetics among females and different educational groups of females. X axis represents the different educational status of females with complete dentures and Y axis represents the number of responses in each category. Majority of the respondents who were satisfied (green) with the phonetics of the dentures were educated. According to the pearson's chi-square test, there was a statistically significant association between educational status and patient's satisfaction with denture phonetics suggesting educated women were more satisfied with phonetics. (Pearson's chi-square value-12.54;p value-0.04 (<0.05)-statistically significant)

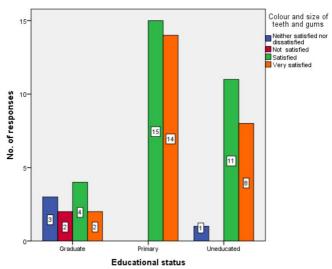


Figure 11: The bar graph represents the association between levels of satisfaction of colour and shape of teeth and gums and different educational groups of females. The x axis represents the educational level of females with complete dentures and the y axis represents the number of responses in each category. Majority of the respondents who were not satisfied (red) with the colour and size of the teeth and gums were educated. According to the pearson's chi-square test, there was a statistically significant association between the educational level and the satisfaction with colour and size of teeth and gums suggesting educated women were not satisfied with the aesthetics of the denture. (Pearson's chi-square value-20.26;p value-0.002 (<0.05)-statistically significant)

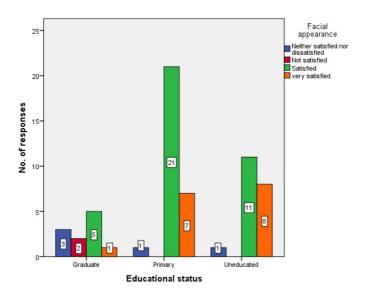


Figure 12: The bar graph represents the association between level of satisfaction of facial appearance and different educational groups of females. The x axis represents the educational level of females with complete dentures and the y axis represents the number of responses in each category. Majority of the respondents who were satisfied (green) with facial appearance had done till primary education. According to the pearson's chi-square test, there was a statistically significant association between educational level of women and their satisfaction with facial appearance with the dentures suggesting women who were less educated were more satisfied with their facial appearance. (Pearson's chi-square value-18.57;p value-0.005 (<0.05)-statistically significant)