

Awareness about the specialty branch of dentistry - Oral Medicine and Radiology among Medical Practitioners, Dental Surgeons and general population

¹Dr. Vikas Batra, ²Dr. Nisheeth Saawarn, ³Dr. Siddharth Saurabh, ¹Dr. Shubham Jain

¹Post graduate student, Department of Oral Medicine and Radiology, Bhabha College of Dental Sciences, Bhopal.

²Professor and Head of the Department, Department of Oral Medicine and Radiology, Bhabha College of Dental Sciences, Bhopal.

³Reader, Department of Oral Medicine and Radiology, Bhabha College of Dental Sciences, Bhopal

Corresponding Author: Dr. Vikas Batra, Post graduate student, Department of Oral Medicine and Radiology, Bhabha College of Dental Sciences, Bhopal.

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Abstract

Introduction: The slit between the amalgamation of medical and dental treatment providers in our country is reasonably palpable, and necessitates the devotion of both the faculties. Post-Graduation in Oral Medicine and Radiology is existing in our country since decades. Nevertheless, contrasting to the other specialists in dentistry, it is not mundane for a medical practitioner to refer patients to a specialist in Oral Medicine and Radiology. A contemplation concerning the present situation is indispensable to advance the accessibility and obtainability of all-inclusive oral care.

Objective: This survey was carried out to assess the apparent need and accessibility of dentists and specialists in Oral Medicine and Radiology by medical practitioners, dental practitioners and general population.

Materials and Methods: A questionnaire was sent through digital forms to 100 randomly selected medical practitioners, 100 dental practitioners and 100 patients who visited the outpatient department of medical practitioners. Subjective interviews were conducted among 45 medical practitioners in private practice and 55 working at a local government hospital. Hence, a total of 200 medical and dental practitioners as well as 100 layman were approached for partaking in the survey.

Results: Results of the medical field and layman were far worse than expected. Results of dental field were almost up-to the expected standards which are discussed later in the research article.

Conclusion: Medical practitioners do distinguish a need of dental practitioners for discussing various dental lesions. On the other hand, there seems to be little

attentiveness among the medical practitioners regarding the proficiency and availability of specialists in Oral Medicine and Radiology. Very insufficient referrals of oral mucosal lesions are done to the dentists, as a mainstream of them are sent to general dental practitioners rather than to an Oral Medicine and Radiology specialist.

Keywords: OMR, ENT, TMJ.

Introduction

Oral medicine and radiology (OMR) is a branch of dentistry dealing primarily with medical management of oral mucosal lesions and an OMR specialist is the best person to diagnose and manage them. It is noted that for most diseases falling in the purview of this specialty, it is a medical practitioner or a general dentist, who is the first point of contact.¹ In most of such instances, the cases are usually mismanaged due to lack of proper expertise. Post graduation in OMR is available in our country since many years. To ascertain the reason behind the existing scenario, a survey among medical practitioners, layman and dental surgeons was carried out to analyze the perceived need and availability of OMR specialist among the medical and dental practitioner as well as general population.

Materials & Method

A questionnaire was prepared and circulated among 100 medical practitioners, 100 dental practitioners and 100 general people or layman. Questionnaire to general practitioners consisted of the frequency with which they get oral lesion patients and whether they check mouth in all patients including young and old. Also an attempt was made to get information about what knowledge they had about OMR specialist and their interactions with same. A questionnaire based survey among dental surgeons was carried out to check for the cases they encounter in practice and the frequency with which they are referred to OMR specialists. A questionnaire was prepared for

general public and randomly 100 people were asked to provide response to the questions in the questionnaire.

Results

Medical Practitioner Questionnaire: On analyzing the responses obtained from Medical practitioners, it was revealed that almost all practitioners were seeing patients with oral lesions. Only 24% of the medical practitioners were aware of the presence of OMR specialist. The reason for the knowledge of about the field of oral and maxillofacial radiology was not because of the referral or professional prospective, but because of their personal terms with OMR specialist (17% out of 25%). In almost half of the cases (49%) examined by medical practitioners, the oral lesions / conditions were reported by the patients as a part of chief complaint, whereas others (51%) were discovered by the medical practitioner during routine history and examination. As far as referral was concerned, only 23% of the medical practitioners referred patients with oral lesion directly to the dentist, whereas others (77%) treated patients on their own. Most common cause of referral was for toothache (81%). The major reason for lower percentage of referral was not only due to lack of availability of OMR specialist in close vicinity of medical practitioner but also due to lack of knowledge of the medical practitioner about oral medicine radiology specialist. Ear-Nose-Throat (ENT) specialists referred patients more frequently (38%) even without primary dental symptoms, although referral was to general dental surgeons, and when referral was based on tooth symptoms, these ENT specialists were more focused on bilateral chewing as unilateral may have ill-effect on TMJ and it may cause many ear problems.²

Dental Practitioner Questionnaire: Dental questionnaire consisted about the frequency with which these practitioners encountered oral lesion, type of lesions and their approach for treating those lesions. It was found that

almost all dental surgeons dealt with oral lesions themselves, although during survey it was found that many of them (68%) are not able to distinguish between many red and white lesions. It was also revealed on analysis that referral to specialist dentist was made in cases in which dental surgeons were not able to diagnose and in case of malignant lesions. 64% of the referral was to oral and maxillofacial surgeons and 16% to an oncologist or cancer hospitals. Referral rate to OMR specialist for diagnosing of malignant lesion was less than 7%. 18% of the dental surgeons performed biopsies or/and exfoliative cytology and send it to oral pathologists for histopathological examination. Only 5% patients were referred to OMR specialists or consulted by OMR specialists. Similarly to medical practitioners, dental practitioner also felt an uneven distribution of OMR specialist in their surrounding areas. Many stated as not having an OMR specialist in nearby area or even in town as the main reason for not referring patients to OMR specialist.

Questionnaire answered by layman (general people)

Questionnaire for layman consisted of the frequency of their oral lesion and their approach regarding the same as well as about their knowledge regarding OMR specialists and how frequently they were referred by dental and medical practitioners. Also their knowledge regarding other specialties of dentistry was ascertained. Results were far worse than expected. Almost everyone failed to have any knowledge regarding OMDR specialist. Only 4% had idea about the branch as they had close relatives in dental fields. Most of the people did not consult any practitioner (medical or dental) for oral ulcers. 16% consulted dental surgeons and 7% medical practitioners for recurrent ulcers. 50% of the patients with oral submucous fibrosis (OSMF) consulted dental practitioners. Most cases of OSMF were in advanced stage of disease when they

consulted dental practitioners. Only one patient was referred to oral surgeon and had undergone surgical intervention for OSMF. **Surprisingly** people were aware of various medical specialties like Cardiologist, Gastroenterologist, ENT, Ophthalmologist, Dermatologist (although unaware of exact meaning of these medical terms). Moreover many people (68%) wanted to seek specialist for systemic disorders of concerned branch rather than a general practitioner.^{3,4}

Conclusion

There is definitive need to improve co-ordination between dental, medical practitioner and an OMR specialist. Some of the strategies that can be employed to improve the current situation are to make effective efforts for campaigns to educate the health care consumer and providers.⁵ There is also a need to publicize the specialty of dentistry in general and OMR in particular. This can undoubtedly be done by organizing supplementary interdisciplinary sessions and interdepartmental discussions, to increase the sentience of our medical contemporaries. Even dental colleagues should create awareness in their patients of private clinic for specialties in dentistry as that can create a win-win situation for both patient as well as dental practitioner.

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