

# Attitudes and communicative factors related to oral health and periodontal treatment

Akademisk avhandling

som för avläggande av odontologie doktorsexamen vid Sahlgrenska akademien vid Göteborgs universitet kommer att offentlig försvaras i föreläsningssal 3, institutionen för odontologi, Medicinaregatan 12 E, Göteborg fredagen den 21 september 2012, kl. 9.00

av

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Avhandlingen baseras på följande delarbeten:

- I. Stenman J, Hallberg U, Wennström JL & Abrahamsson KH (2009). Patients' attitudes towards oral health and experiences of periodontal treatment: A qualitative interview study. *Oral Health & Preventive Dentistry* 7, 393-401.
- II. Abrahamsson KH, Stenman J, Öhrn K & Hakeberg M (2007). Attitudes to dental hygienists: evaluation of the Dental Hygienist Beliefs Survey in a Swedish population of patients and students. *International Journal of Dental Hygiene* 5, 95-102.
- III. Stenman J, Wennström JL & Abrahamsson KH (2010). Dental hygienists' views on communicative factors and interpersonal processes in prevention and treatment of periodontal disease. *International Journal of Dental Hygiene* 8, 213-218.
- IV. Stenman J, Lundgren J, Wennström JL, Ericsson JS & Abrahamsson KH (2012). A single session of motivational interviewing as an additive means to improve adherence in periodontal infection control: A randomized controlled trial. *Journal of Clinical Periodontology*; doi: 10.1111/j.1600-051X.2012.01926.x



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## **Abstract**

### **Attitudes and communicative factors related to oral health and periodontal treatment**

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The most important factor in the prevention and treatment of periodontal disease is the individual's standard of daily self-performed oral hygiene. Consequently, a major task in periodontal treatment is to motivate the patient to efficient oral hygiene behaviour. Attitudes towards oral health issues, communicative factors and interpersonal relationships are suggested as important factors in this respect. The overall aim of this thesis was to study the significance of such factors in the prevention and treatment of periodontal disease.

In Study I, attitudes towards oral health and experiences of periodontal treatment were explored through individual in-depth interviews with patients referred to a specialist clinic for periodontal treatment. In Study II, a partly new questionnaire, The Dental Hygienist Beliefs Survey (DHBS), was evaluated and tested among different patient groups and students. The questionnaire assesses patient confidence in the interaction with the dental hygienist. In Study III, dental hygienists' views on communicative issues and interpersonal processes of importance in the prevention and treatment of periodontal disease were explored through individual in-depth interviews. The study sample consisted of dental hygienists working at general and specialist dental clinics. The constant comparative method for Grounded Theory was the qualitative method chosen for the data collection and analysis in Study I and III. Motivational Interviewing (MI) is a client-centred communicative method that can initiate beneficial behavioural change and improve the outcome when added to conventional treatment methods. Hence, Study IV was designed as a randomised controlled trial in order to evaluate the potential additive effect of a single session of MI on self-performed periodontal infection control. The study sample consisted of patients referred to a specialist clinic for periodontal treatment. The primary outcome variable was reduction in gingival bleeding.

The results showed that patients in treatment for chronic periodontitis experienced feelings of vulnerability. The communication with the specialist team was of the utmost importance to gain insight into and an understanding of the severity of the disease condition. This understanding and the knowledge gained about the ways to achieve oral health and prevent further disease progression increased the patients' feeling of control of the situation (Study I). The DHBS was found to be a valid and reliable scale to assess patient-specific attitudes to dental hygienists. Moreover, negative dental hygienist beliefs were associated with dental anxiety (Study II). In-depth interviews with dental hygienists (DH) highlighted the importance of building a trustful relationship with the patient, feeling secure in one's professional role as a DH and, last but not least, receiving support from colleagues and the clinical manager was essential in order to be successful in the prevention and treatment of periodontal diseases (Study III). A single freestanding MI session as a prelude to conventional educational intervention and non-surgical periodontal treatment had no significant additive effect on the individual's standard of self-performed periodontal infection control in a short-term perspective (Study IV).

In conclusion, the results emphasise that communicative factors and interpersonal processes are important issues in dental treatment in order to get the patient to understand the disease condition, acquire knowledge about ways to achieve oral health, prevent disease progression, decrease anxiety and increase the patient's feelings of control of the oral health situation.

**Key words:** Chronic periodontitis, communication, dental hygienist, dental hygienist beliefs survey, dental hygienist-patient relationship, dental anxiety, grounded theory, interviews, motivational interview, oral health, oral hygiene behaviour, periodontal infection control.

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