



Need for Specialist Prosthodontic Services as seen by Private Dental Practitioners in Chennai City: A Survey

Dental Science

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ABSTRACT

To identify the Need for Specialist Prosthodontic Services as seen by Private Dental Practitioners (PDP) in Chennai City. A panel of Prosthodontists set up a postal questionnaire. After piloting the questionnaire on 15 PDPs, it was sent across to 300 private dental practitioners, randomly selected in Chennai city. A descriptive analysis was done on the collected data. 84% of private dental practitioners who took up the survey felt no influence provided by prosthodontists to be very effective, but only 54% utilised their services. The number of years a dentist had experience had no impact on utilisation of a Specialist Prosthodontist's service. Amongst the surveyed dentists, only 17.2% had a Specialty Prosthodontic Clinic in their region, a majority of 68.4% did not have one and 31.2% weren't aware of such a specialty clinic. While Private Dental Practitioners do have a very high regard for the Prosthodontic specialty, the report shows that the demand for Prosthodontists is less in comparison to other specialties. This strongly indicates that Prosthodontists do need to put in efforts and bring awareness to the PDP's of their services.

KEYWORDS

Prosthodontic speciality service. Private Dental Practitioner. Consultant. Survey. Chennai

Introduction

Dentistry is essentially a primary care discipline insofar as the vast majority of patient care takes place in the community settings, is restricted to simple procedures and is provided by "generalists" who in the main hold, or aspire to hold, a long-term relationship with their patients [1]. Primary care service providers act as gatekeepers to secondary care service providers [2]. Specialist services are available in abundance, but so far there hasn't been any information on what proportion of PDPs avail services of these PDP's or feel the need to utilise their services.

The success of a specialist relies greatly on their colleagues to provide a continual flow of referrals. To be used fully, a specialist needs PDPs to have good referral awareness [3]. (That is, knowing which patients to refer, when to refer and where to refer) [4].

In recent times, we see that the trend has changed from referring to a specialist to having a specialist as a consultant. We also see that single dental specialty clinics have decreased in number. The Prosthodontics umbrella covers a wide range of treatment options and a majority of patients who seek dental treatment require Prosthodontic Specialty services.

The aim of this survey was to:

- 1) Examine the demand for Prosthodontic specialty services.
- 2) Explore PDPs' view of Prosthodontist's expertise.
- 3) Understand the recent changing trends in private dental practice.

Table 1: Questionnaire

1) Gender	
Male 1	Female 1
2) Qualification	
BDS1	MDS1 <input type="checkbox"/>
Orthodontics	<input type="checkbox"/>
Oral Surgery	<input type="checkbox"/>
Periodontics	<input type="checkbox"/>
Pedodontics	<input type="checkbox"/>
Endodontics	<input type="checkbox"/>
Oral Pathology	<input type="checkbox"/>
Oral Diagnosis and Radiology	<input type="checkbox"/>
3) How many years since passing graduation / post-graduation?	
2013 to 2017	<input type="checkbox"/> (0-4 years)
2007 to 2012	<input type="checkbox"/> (5-10 years)
2001 to 2006	<input type="checkbox"/> (11-16 years)

1995 to 2000	<input type="checkbox"/>	(17-22 years)
1989 to 1994	<input type="checkbox"/>	(23-28 years)
1983 to 1988	<input type="checkbox"/>	(29-34 years)
1977 to 1982	<input type="checkbox"/>	(35-40 years)
1971 to 1976	<input type="checkbox"/>	(41-46 years)
1965 to 1970	<input type="checkbox"/>	(47- 52 years)
1959 to 1964	<input type="checkbox"/>	(53- 58 years)
4) Location of private practice in Chennai city		
North Chennai	<input type="checkbox"/>	
West Chennai	<input type="checkbox"/>	
South & East Chennai	<input type="checkbox"/>	
Suburb Chennai	<input type="checkbox"/>	
5) How do you manage special / difficult cases in your private practice?		
Call specialist consultants 1	Refer patients to specialists 1	Do all cases yourself 1
Specialist consultant visiting your clinic	Specialists to whom you refer your patients	
Orthodontist <input type="checkbox"/>	Orthodontist <input type="checkbox"/>	
Prosthodontist <input type="checkbox"/>	Prosthodontist <input type="checkbox"/>	
Oral Surgeon <input type="checkbox"/>	Oral Surgeon <input type="checkbox"/>	
Periodontist <input type="checkbox"/>	Periodontist <input type="checkbox"/>	
Pedodontist <input type="checkbox"/>	Pedodontist <input type="checkbox"/>	
Endodontist <input type="checkbox"/>	Endodontist <input type="checkbox"/>	
Oral Pathology <input type="checkbox"/>	Oral Pathology <input type="checkbox"/>	
Oral diagnosis and radiology <input type="checkbox"/>	Oral diagnosis and radiology <input type="checkbox"/>	
6) If you call a prosthodontist / refer patient to a prosthodontist, what do you think is the effectiveness of the treatment provided by the prosthodontist		
Very effective <input type="checkbox"/>	Somewhat effective <input type="checkbox"/>	Not at all effective <input type="checkbox"/>
Why?	Why?	
Prosthodontists have more education and knowledge <input type="checkbox"/>		
Prosthodontists have more experience and skill <input type="checkbox"/>		
Prosthodontists do more advanced work <input type="checkbox"/>		
7) Are there any exclusive specialty Prosthodontic clinics in your city?		
Yes <input type="checkbox"/>	No <input type="checkbox"/>	Don't Know <input type="checkbox"/>

Materials and Methods

The prepared Postal questionnaires were sent to 300 private dental

practitioners in Chennai. The recipients were randomly selected from Tamil Nadu State IDA Directory. These PDPs were from four regions of the city: North Chennai, WestChennai, South & East Chennai and Suburb Chennai.

The prepared questionnaire was of closed response format. It was piloted on 15 PDPs (Table 1). After the piloting a few modifications were made in the style of questions to ensure that the questionnaire was simple and clear to understand and complete. It was then sent across along with a consent letter to be signed to 300 PDPs. The respondent's anonymity was assured. An option was included for the subjects not wishing to fill the questionnaire. Prosthodontists were not included in this survey.

Questions in the survey covered general information of the subject such as gender, qualification and year of graduation. It later went on to elicit how PDPs' preferred to manage difficult cases, whether by calling in specialists consultants or by referring patients to specialists clinics or doing all specialty work themselves. Questions further investigated if they utilised the services of consultant Prosthodontist or referred patients to a Prosthodontist.

The PDP's were further assessed on their perception of how effective they felt the treatment rendered by a Prosthodontist was. The questionnaire also assessed the reasons for the same. The final question was on awareness of any exclusive Prosthodontic clinic that the PDP knew of in their region.

After all valid questionnaires were entered in Statistical Package for the Social Sciences (SPSS) version 12, a descriptive analysis was made.

Results

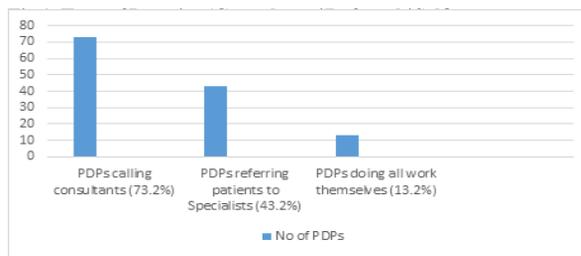
An overall response rate of 83.33% (n=250) was achieved. A total of 300 questionnaires were sent, 50 were not returned, and 250 were used for the analysis.

Table 2: Demographic Data

Gender	
Male	171
Female	79
Years since graduation / post-graduation	
0 - 4 years	72
5 - 10 years	105
11 - 16 years	41
17 - 22 years	22
23 - 28 years	7
29 - 34 years	2
35 - 40 years	1
41 - 46 years	0
47 - 58 years	0
Qualification of private dental practitioners	
BDS	182
MDS	68
Location of private dental clinics	
North Chennai	59
West Chennai	64
South & East Chennai	65
Suburb Chennai	62

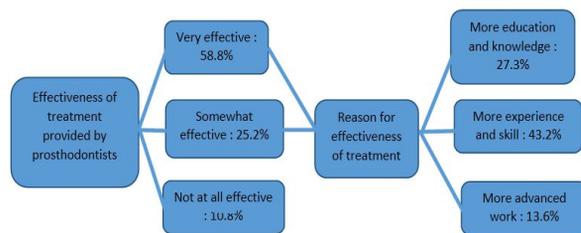
The final sample that considered for analysis comprised of replies from 68 (68.4%) males and 32 (31.6%) females. The respondents had a very wide range of work experience. There were 73 (72.8%) of graduate PDPs and 27 (27.2%) post graduate PDPs (Table 2)

The respondents were asked as to how they managed difficult cases to get an insight of how (i.e. consultants or referrals) and which are the speciality services that were utilised. When analysed, the results showed that 73.2% PDPs preferred to call consultants to their clinics and 43.2% PDPs referred patients to specialists. 13.2% did all work themselves and availed no speciality services (Fig. 1). The most frequently called consultants were Orthodontists with 71.2% PDPs availing their services. Only 31.2% PDPs called in Prosthodontist. 68.4% PDPs referred patients to Oral Surgeons and 22.8% PDPs referred patients to Prosthodontists.



The PDPs were asked about effectiveness of treatment provided by Prosthodontists. Out of 250 respondents, 58.8% PDPs found treatment provided by Prosthodontists to be very effective and 25.2% found it somewhat effective and 10.8% considered it totally ineffective. When asked about the reason for the effectiveness of the treatment provided by Prosthodontists, 43.2% felt it was their experience and skill, 27.3% believed the reason to be the prosthodontist's higher education and knowledge and 13.6% considered it to be because of the advanced work done by the Prosthodontist (Fig. 2).

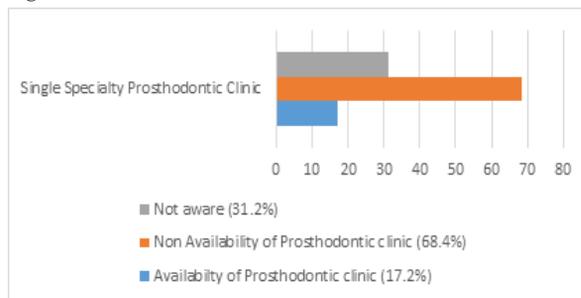
Fig 2 : Effectiveness of treatment provided by Prosthodontists



The data was analysed to bring out the relation between years of practice and utilization of Prosthodontic speciality service (consultant and reference). It was found that the experience in practice did not significantly influence utilization of these services.

When asked about the availability of a single Prosthodontic speciality clinic in their region, 17.2% PDPs said they have an exclusive Prosthodontic clinic in their region, 68.4% did not have such clinic in their region whereas 31.2% were not aware of such a clinic. (Fig 3)

Fig 3: Availability of Single Speciality Prosthodontic Clinic in the region



Discussion

In a study of variety of questionnaires sent to PDPs, Tan and Burke found that if the overall return rate was 61.7% then the study addressed key issues [5]. In this study of PDPs of Chennai city the response rate achieved was 83.33%.

The subjects were spread across four regions of Chennai city. They were all private dental practitioners. The survey shows that even post graduate dental practitioners practiced general practise along with speciality practise. These post graduate dental practitioners must have preferred general practice probably because referring patients to speciality clinics was seen decreasing.

When the current trend was analysed, the survey showed that, a majority of PDPs (73.2%) preferred specialty consultants visiting their clinics rather than referring patients to specialists (43.2%). This is possibly due to the decreasing number of speciality clinics and also the fear that patients sent to a specialist would never return to the referring dentist [6]. Specialist practitioners should take the

responsibility of sending patients back to the referring PDPs once the speciality treatment is completed.

Orthodontics seems to be the most common speciality services utilised by PDPs. The second is Oral Surgery followed by Periodontics. Prosthodontic services were sought by only 34.95 % PDPs. Similar observation, of less demand for Prosthodontic service, was noted in the survey of demand for specialist restorative dental services by Nixon and Benson [7]. In another survey of self-perceived educational needs of general dental practitioner in the Merseyside region, it was concluded that the respondents had a high self-perceived knowledge of Prosthodontics [8]. A Lesser demand for Prosthodontic speciality shows PDPs are pretty comfortable carrying out Prosthetic Dentistry which also reflects their skill base. The same might also be an indicator of the lack of awareness of Prosthodontic work, other than the basic that is usually carried out at the private practice.

The study revealed that years of experience had no significant relation with utilization of Prosthodontic speciality service. Various factors such as basic prosthodontic practice by the PDPs themselves, prosthodontic skills acquired by PDPs through various CDE programmes, economic factors and so on can be the reasons for the same.

When asked how effective is the treatment provided by a Prosthodontist and the reasons for the same, most PDPs felt the treatment to be effective. The main reason suggested by the respondents was the Prosthodontist's higher experience and skill. This clearly denotes very high regard for the Prosthodontist's focussed skill. At the same time less utilisation of their services clearly shows a prevalence of gap that Prosthodontists needs to address by keeping PDPs informed of services provided by them.

When PDPs were enquired about presence of any single speciality Prosthodontic clinic in their region, 68.4 % PDPs replied that there were no such clinics. This needs investigation to know whether such speciality clinics do not really exist or PDPs are not aware of them. It has also been suggested that distance from the specialist may be a factor [9], which means dentists practicing close to a specialist centre are likely to refer more often. It is still unclear as to whether this is completely a practitioner related factor or if it is modified by a patient factor.

Conclusion

The study is proof that there is a very strong need for dental speciality services. This is likely to increase in the future as PDPs are expected to seek a specialist's opinion. The analysis also revealed that Prosthodontists are seen with a very high regard and that they are respected well within the profession, but their services are underutilised. The results show that Prosthodontists need to put in efforts to reach out to PDPs to create awareness about their speciality services. A change in trend from referring to specialists to bringing in a specialist consultant is noted. This survey has been conducted on a very limited scale, with limited amount of information extracted from the survey. Further surveys must be conducted to understand the level of Prosthodontic work done by PDPs, the influence of economic factors, why there is a change in trend from referrals to consultants and so on.

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