ORIGINAL ARTICLE

A cross-sectional hospital-based study on how patients perceive the dental care provided by male or female dentists

R. Prenetha, Jayashri Prabakar

Departments of Public Health Dentistry Saveetha Dental College and Hospitals, Saveetha Institute of Medical and Technical Sciences, Saveetha University, Chennai, Tamil Nadu, India

J. Adv. Pharm. Technol. Res.

ABSTRACT

Awareness and knowledge of patient choice were important for developing the standard of dental health. It is important to maintain the patient–dentist relationship, which must be done with sincerity. For patients, the quality of social care is crucial. Therefore, the study's goal is to determine whether patients perceive dental treatment provided by male or female dentists differently. A descriptive cross-sectional hospital-based study (Saveetha University) was conducted using a structured questionnaire which consisted of questions which assessed the patient opinion about dental care provided by male or female dental practitioners. To evaluate statistical significance, we shall utilize (P = 0.05). The Chi-square test was performed to evaluate patient perception toward gender preference in providing dental care. Male and female participants appear to have the same degree of knowledge when compared, according to a statistically significant connection (P = 0.05) that was discovered. The study demonstrated that patients' perceptions of the expertise levels of male and female dentists were the same.

Key words: Dental care, dental practitioners, dental treatment, innovative analysis, patient perception

INTRODUCTION

Throughout the expanse of years, a belief made among dentists and dental students. Awareness and knowledge of patient choice were important for developing the standard of dental health. It is important to maintain the patient–dentist relationship, which must be done with sincerity. The standard of social care is essential for patients.[1,2] Like other medical field of study interaction between patient and doctor is an essential phenomenon. Over the 30 years, the number of females registered for dental professional has grown up.[3,4] A profit-driven scheme will come from the examination of oral hygiene concepts and that are represented with a gender differences.[3,5,6] As inaccurate for other careers, an enlarged number of females are set foot in the dental profession.[7] In 1990, females composed around 12% were practicing dentistry and it has been predicted for 2010 that females will report 22% among whole dental practitioners.[8] Similarly, the percentage of female degree holders of dental schools in the USA was 44% in 2008, offering that there could be more amount of female dental practitioners in upcoming years.[9,10]

Address for correspondence:
Dr. Jayashri Prabakar,
Department of Public Health Dentistry, Saveetha Dental College and Hospitals, Saveetha Institute of Medical and Technical Sciences, Saveetha University, Chennai, Tamil Nadu, India.
E-mail: jayashri.sdc@saveetha.com

Submitted: 22-Apr-2022 **Revised:** 16-Aug-2022
Accepted: 16-Aug-2022 **Published:** 30-Nov-2022

Access this article online	
Quick Response Code:	Website: www.japtr.org
	DOI: 10.4103/japtr.japtr_198_22

How to cite this article: Prenetha R, Prabakar J. A cross-sectional hospital-based study on how patients perceive the dental care provided by male or female dentists. J Adv Pharm Technol Res 2022;13:S254-8.

Each doctor has a different personality depending on where they were born, their cultural standing, their living situation, and their financial situation. Consequently, it appears to be a fantastic challenge to provide an effective and patient-centered health care.[11] These kinds of variables have an impact on patients' needs, and consequently, the treatment that medical personnel offer.,[12] Consequently, it appears to be a fantastic challenge to provide an effective and patient-centered health care.[13,14] In common women have been distinguished as more kind, comfortable, and articulate than men.[15] They also considered protruding further feminine features such as humankind, sympathy, and shortage of capability in contrast to men and conveying through nonverbal hints.[10] In comparison men have been distinguished as confidential, hostile, ruthless, less probably to be guided by others judgment, more probably to convey anger, and more proficient than females.[16] Assessing patients' opinions and views toward dentists might yield pertinent data that can be used to make suggestions for how to best satisfy patients' needs.[17] In addition, when evaluating the outcomes of a particular treatment, this kind of assessment is frequently helpful.[18] When evaluating health-care services, processes, and outcomes, satisfaction is taken into consideration as an additional factor.[19]

Dental professionals can improve their interpersonal ties with patients by having a greater awareness of how the general public views the field of dentistry.[20] It is advised that dental health-care professionals postpone all elective doctor visits and stop regular dental checkups.[21] It is advised that dental health-care professionals postpone all elective doctor visits and stop regular dental checkups. Although normal dental checkups have resumed in the US as of this writing, it is unclear when or how much clinic operations will revert to the standard before COVID-19.[22] It has been discovered that public preference for a dentist's gender varies by country.[23,24]

Participants in a research in England favored female dentists.[25] Since a few decades ago, women have increasingly entered professions like dentistry that were thought to be primarily male-dominated.[26] By accounting for gender differences in dentist views, strategies for lowering dental fear in young adults may be more effective.[27] It is difficult to explain these gender differences; some researchers believe that rather than disease incidence, the differences reflect dentist–patient relationships.[28,29] Females have traditionally been seen as being more likely than males to be nurturing, obedient, and expressive. High-quality articles from our team are the product of our research and knowledge.[30-34] With the help of all these criteria, we were able to determine whether patients in Chennai would have preferred a male or female dental practitioner for their oral treatment.

METHODOLOGY

Study design

This study was a hospital-based questionnaire study.

Ethical approval

The Institutional Review Board of Saveetha University granted ethical approval. The Institutional Clearance Certificate No. IHEC/SDC/FACULTY/22/PHD/512.

Informed consent

Informed consent was acquired from all unquestionable participants.

Data collection

The demographic information in the first section of the survey, which covers age and gender, is followed by questions about how patients feel about dental care provided by male or female dentists. The appropriate response should be either masculine or female, or both. Where the knowledge, attitude, and practice about male or female dentists are found in the second section of the questionnaire. Google survey forms are available online for data collecting.

Statistical analysis

Data were exported into an Excel spreadsheet and analyzed with SPSS software (IBM SPSS Statistics, Version 20.0, Armonk, NY: IBM Corp). The Chi-square test was used. $P < 0.05$ is used in the analysis.

RESULTS

According to Figure 1, the majority of them (38.26%) were between 20 and 30 age groups. 24.16% of them were 31–40 age groups. 15.44% of them were 41.50 age group. 22.15% of them were >50 age group. 50.67% were female and 49.33% of them were male participants [Figure 2].

A statistically significant association was found ($\chi^2 = 20.51$ and $P = 0.00$) which implies male and female participants exhibit no difference with respect to patients' predilection for dental treatment [Figure 3]. Figure 4 implies male and female participants do not report any difference toward which dentists are highly reliance in providing dental services. Participants felt relaxed irrespective of gender and exhibited no difference [Figure 5]. In Figures 6-8, participants reported no difference for which dentist asked more personal questions, the age and gender of the dentist expecting them to withstand pain without complaint were assessed.

DISCUSSION

The outcome met the requirement that patients' sexual identity would not be an issue when they sought therapy.

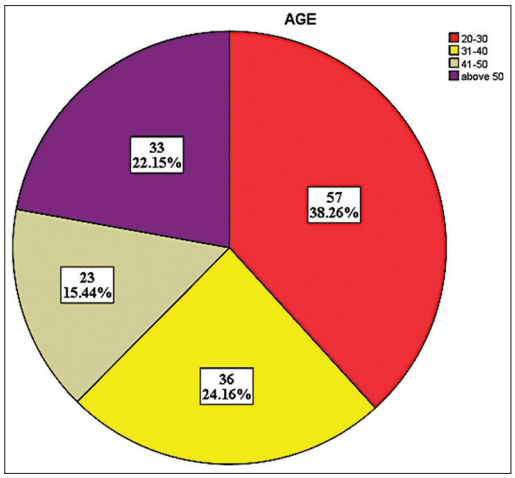

Figure 1: Respondents' age

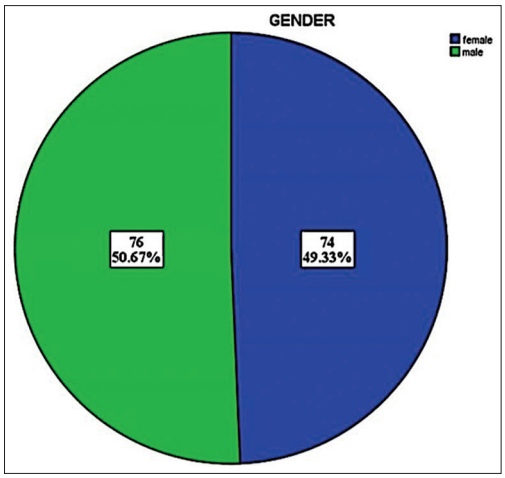

Figure 2: Gender distribution

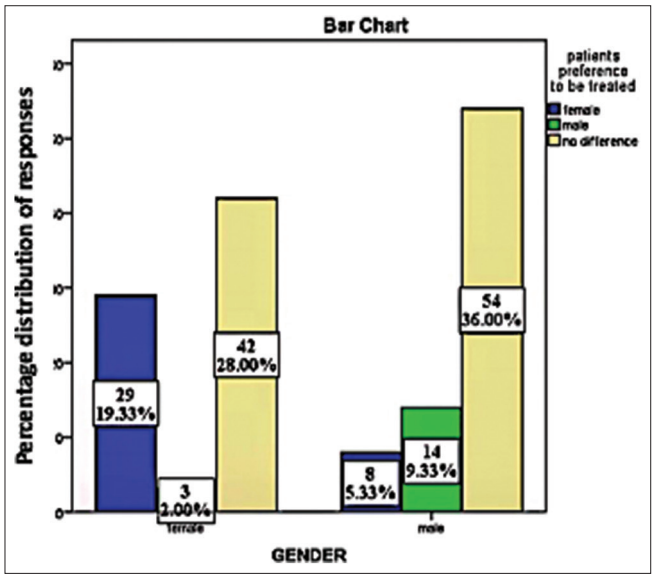

Figure 3: Association of gender and patients' preference to be treated

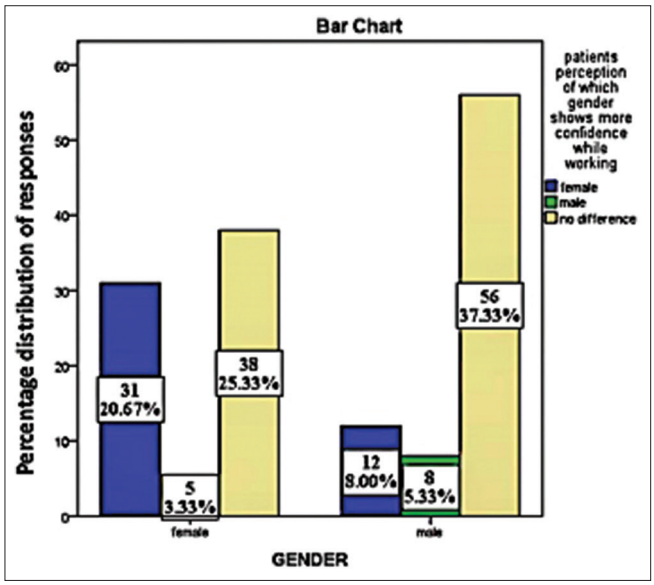

Figure 4: Association of gender and the patients' perception of male or female dental practitioners show good confidence while treating

We discovered from previous research conducted in Khartoum, Sudan, that patients' perceptions of male and female dentists' expertise levels were equal, regardless of their gender, when they sought treatment.[1] By the other article done in Baghdad city, we came to know that majority of the patients selected male dentists for patients' preference to be treated.[35] Patients selected female dentists majorly for feeling relaxed to be treated in the previous article done in Khartoum.[1] Patients selected male dentists majorly for feeling more confidence while working.[1] In an article published in Khartoum, Sudan, patients chose mostly male dentists because they believed that men would be better able to tolerate pain without discomfort.[1] Due to the lack of time, only a small number of samples were taken for analysis.[36]

The results show that 14.1% of respondents preferred to have a dentist from their tribe or family treat them, whereas 66.6% of respondents did not believe that a dentist's tribe or family had a role in their decision to choose them. However, 19.3% of respondents stated that they would prefer not to get dental care from someone who belongs to their tribe. It should be emphasized that receiving care from a dentist of the same nationality is different from receiving care from a dentist of the same tribe or family. The disparities between participant replies from men and women were statistically significant ($P = 0.001$), according to Chi-square analysis. Compared to men, female participants (23.8%) were less likely to prefer getting their dental care from a member of their tribe (14.8%). Other aspects that might be crucial when selecting a dentist were also brought up with the participants, and a few of these characteristics were listed along with the percentage of participants who thought they were crucial.[25] Research conducted by

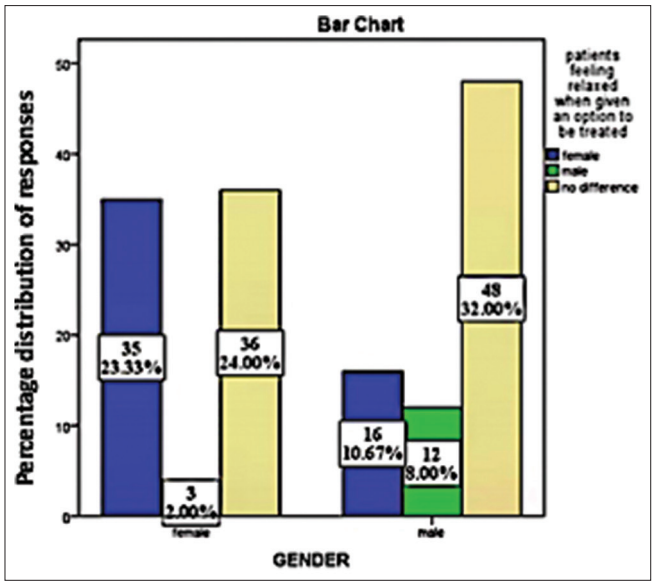

Figure 5: Association between gender and patients' comfort zone

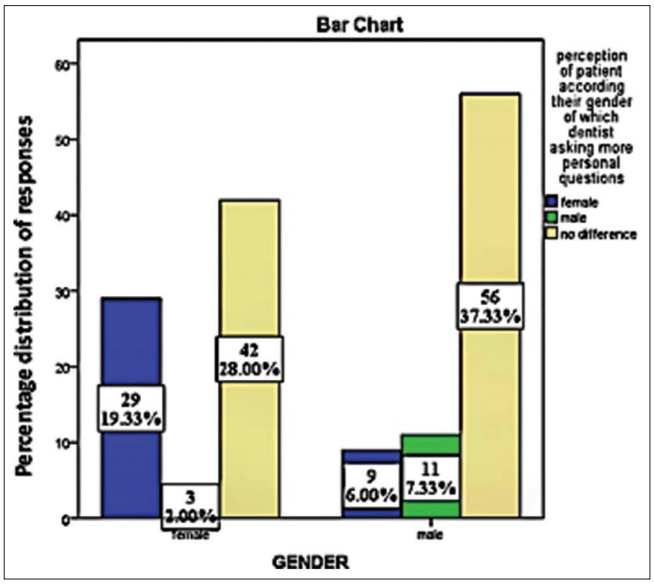

Figure 6: Association between gender of patients and which dental practitioners asked more personal information

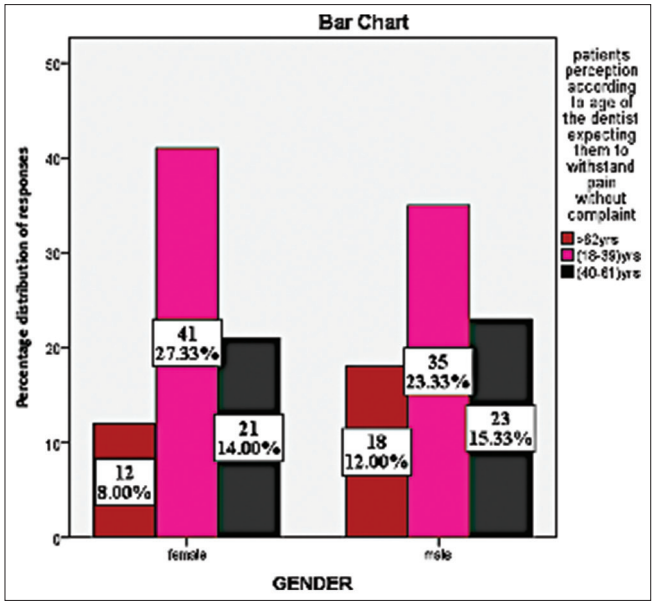

Figure 7: Association between gender and patients' perception of dentist age in withstanding pain without complaint

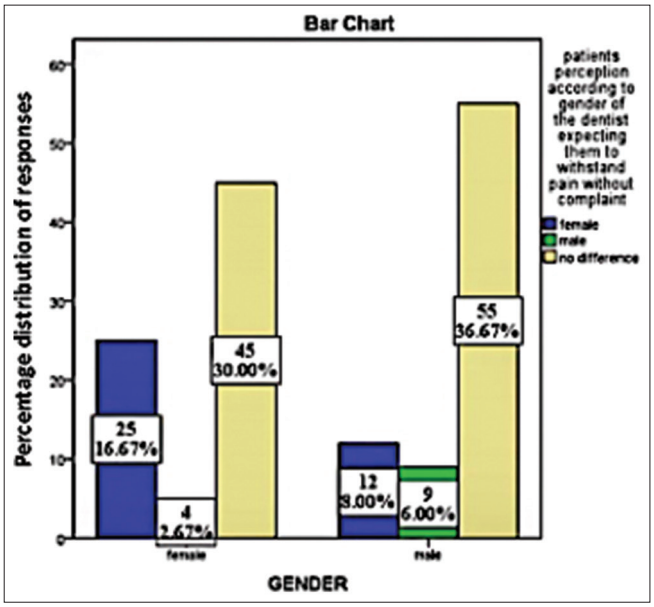

Figure 8: Association between gender and patients' perception of dentist gender in withstanding pain without complaint

Jebaraj *et al*.[37] has reported that there is healthy scenario in patient perception with respect to the opposite gender.

CONCLUSION

The outcome met the requirement that patients' gender was not an issue when they sought treatment.

Financial support and sponsorship

This study was financially supported by Saveetha Dental College.

Conflicts of interest

There are no conflicts of interest.

REFERENCES

1. Awooda E, Ibrahim H. Comparison of patients perception of dental care offered by male or female dentist: Cross-sectional hospital based study. Eur J General Dent 2015;4:117.
2. Mathew MG, Samuel SR, Soni AJ, Roopa KB. Evaluation of adhesion of *Streptococcus mutans*, plaque accumulation on zirconia and stainless steel crowns, and surrounding gingival inflammation in primary molars: Randomized controlled trial. Clin Oral Investig 2020;24:3275-80.
3. Kabak DS. Common perception about quality of life, quality of life in dentistry. Literature review. Clin Dent 2018;1:76-9.
4. Samuel SR. Can 5-year-olds sensibly self-report the impact of developmental enamel defects on their quality of life? Int J Paediatr

Dent 2021;31:285-6.

5. Azodo CC, Unamatokpa B. Gender difference in oral health perception and practices among Medical House Officers. Russian Open Med J 2012;1:0208.
6. Samuel SR, Kuduruthullah S, Khair AM, Al Shayeb M, Elkaseh A, Varma SR, *et al*. Impact of pain, psychological-distress, SARS-CoV2 fear on adults' OHRQOL during COVID-19 pandemic. Saudi J Biol Sci 2021;28:492-4.
7. Samuel SR, Kuduruthullah S, Khair AM, Shayeb MA, Elkaseh A, Varma SR. Dental pain, parental SARS-CoV-2 fear and distress on quality of life of 2 to 6 year-old children during COVID-19. Int J Paediatr Dent 2021;31:436-41.
8. Samuel SR, Acharya S, Rao JC. School interventions-based prevention of early-childhood caries among 3-5-year-old children from very low socioeconomic status: Two-year randomized trial. J Public Health Dent 2020;80:51-60.
9. Riley JL 3rd, Gordan VV, Rouisse KM, McClelland J, Gilbert GH, Dental Practice-Based Research Network Collaborative Group. Differences in male and female dentists' practice patterns regarding diagnosis and treatment of dental caries: Findings from The Dental Practice-Based Research Network. J Am Dent Assoc 2011;142:429-40.
10. Freeman R, Gorter R, Braam A. Dentists interacting and working with female dental nurses: A qualitative investigation of gender differences in primary dental care. Br Dent J 2004;196:161-5.
11. Chellapa LR, Shanmugam R, Indiran MA, Samuel SR. Biogenic nanoselenium synthesis, its antimicrobial, antioxidant activity and toxicity. Bioinspired Biomimetic Nanobiomaterials 2020;9:184-9.
12. Samuel SR, Mathew MG, Suresh SG, Varma SR, Elsubeihi ES, Arshad F, *et al*. Pediatric dental emergency management and parental treatment preferences during COVID-19 pandemic as compared to 2019. Saudi J Biol Sci 2021;28:2591-7.
13. Gürler G, Delilbaşı Ç, Kaçar İ. Patients' perceptions and preferences of oral and maxillofacial surgeons in a university dental hospital. European Oral Research 201;52:137-42.
14. Barma MD, Muthupandiyan I, Samuel SR, Amaechi BT. Inhibition of *Streptococcus mutans*, antioxidant property and cytotoxicity of novel nano-zinc oxide varnish. Arch Oral Biol 2021;126:105132.
15. Muthukrishnan L. Nanotechnology for cleaner leather production: A review. Environ Chem Lett 2021;19:2527-49.
16. Friedlander AH. Unique dental needs of gender-based populations. Spec Care Dent 2004;24:53-4.
17. Muthukrishnan L. Multidrug resistant tuberculosis – Diagnostic challenges and its conquering by nanotechnology approach – An overview. Chem Biol Interact 2021;337:109397.
18. Huang Z, Chu L, Liang J, Tan X, Wang Y, Wen J, *et al*. H19 promotes HCC bone metastasis through reducing osteoprotegerin expression in a protein phosphatase 1 catalytic subunit alpha/p38 mitogen-activated protein kinase–dependent manner and sponging microRNA 200b-3p. Hepatology 2021;74:214-32.
19. Gowhari Shabgah A, Amir A, Gardanova ZR, Olegovna Zekiy A, Thangavelu L, Ebrahimi Nik M, *et al*. Interleukin-25: New perspective and state-of-the-art in cancer prognosis and treatment approaches. Cancer Med 2021;10:5191-202.
20. Lahti S, Tuutti H. Comparisons of the statements of the patients about the ideal dentist and the actual dentist. Patient Educ Couns 1992;19:108-9.
21. Tamang JP. Ethnic Fermented Foods and Beverages of India: Science History and Culture. London, UK: Springer Nature; 2020.
22. Moffat RC, Yentes CT, Crookston BT, West JH. Patient perceptions about professional dental services during the COVID-19 pandemic. JDR Clin Trans Res 2021;6:15-23.
23. Ezhilarasan D, Lakshmi T, Subha M, Deepak Nallasamy V, Raghunandhakumar S. The ambiguous role of sirtuins in head and neck squamous cell carcinoma. Oral Dis 2022;28:559-67.
24. Pradeep Christopher J, Marimuthu T, Krithika C, Devadoss P, Kumar SM. Prevalence and measurement of anterior loop of the mandibular canal using CBCT: A cross sectional study. Clin Implant Dent Relat Res 2018;20:531-4.
25. Alzahrani S, Aboalshamat K, Bedaiwi S, Alnefaie S, Almutairi T, Asiri S, *et al*. Patients' preferences for dentist's nationality and gender among residents of Jeddah, Saudi Arabia. Open Dent J 2020;14:137-42.
26. Kfouri MD, Moysés ST, Gabardo MC, Nascimento AC, Rosa SV, Moysés SJ. The feminization of dentistry and the perceptions of public service users about gender issues in oral health. Cien Saude Colet 2019;24:4285-96.
27. Karibe H, Kato Y, Shimazu K, Okamoto A, Heima M. Gender differences in adolescents' perceptions toward dentists using the Japanese version of the dental beliefs survey: A cross-sectional survey. BMC Oral Health 2019;19:144.
28. Kawamura M, Wright FA, Sasahara H, Yamasaki Y, Suh S, Iwamoto Y. An analytical study on gender differences in self-reported oral health care and problems of Japanese employees. J Occup Health 1999;41:104-11.
29. Wahab PU, Madhulaxmi M, Senthilnathan P, Muthusekhar MR, Vohra Y, Abhinav RP. Scalpel versus diathermy in wound healing after mucosal incisions: A split-mouth study. J Oral Maxillofac Surg 2018;76:1160-4.
30. Rajagopal R, Padmanabhan S, Gnanamani J. A comparison of shear bond strength and debonding characteristics of conventional, moisture-insensitive, and self-etching primers *in vitro*. Angle Orthod 2004;74:264-8.
31. Murugan MA, Arul Murugan M, Jayaseelan V, Jayabalakrishnan D, Maridurai T, Selva Kumar S, *et al*. Low velocity impact and mechanical behaviour of shot blasted SiC Wire-Mesh and Silane-Treated Aloevera/Hemp/Flax-Reinforced SiC Whisker Modified Epoxy Resin Composites. Silicon 2020;12:1847-56.
32. Chen F, Tang Y, Sun Y, Veeraraghavan VP, Mohan SK, Cui C. 6-shogaol, a active constiuents of ginger prevents UVB radiation mediated inflammation and oxidative stress through modulating NrF2 signaling in human epidermal keratinocytes (HaCaT cells). J Photochem Photobiol B 2019;197:111518.
33. Rajeshkumar S, Menon S, Venkat Kumar S, Tambuwala MM, Bakshi HA, Mehta M, *et al*. Antibacterial and antioxidant potential of biosynthesized copper nanoparticles mediated through *Cissus arnotiana* plant extract. J Photochem Photobiol B 2019;197:111531.
34. Ezhilarasan D, Sokal E, Najimi M. Hepatic fibrosis: It is time to go with hepatic stellate cell-specific therapeutic targets. Hepatobiliary Pancreat Dis Int 2018;17:192-7.
35. Singh A. Predilections for attitude and gender of the dentist and the clinic environment by children. Mod Res Dent 2018;2:128-31.
36. Sridharan G, Ramani P, Patankar S, Vijayaraghavan R. Evaluation of salivary metabolomics in oral leukoplakia and oral squamous cell carcinoma. J Oral Pathol Med 2019;48:299-306.
37. Jebaraj JC, Bose BB, Natarajan PM, Gurusamy R, Subramanian A. Perception of dental interns on the impact of their gender during training period and future dental practice-cross sectional survey in dental colleges in Chennai, India. J Positive Sch Psychol 2022;28:1045-50.