

Inside the Mind of an Anxious Patient

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The causes and consequences of dental anxiety

Agonising, stressful, embarrassing and expensive are just some of the terms that come to most patients' minds when they contemplate dental treatment. Severe dental anxiety affects up to 20 percent of the U.K. population, whilst a significantly greater proportion experience 'nerves of some kind', not deemed severe enough to be classified as dental anxiety (Milgrom et al., 2011). Despite shifts in modern dentistry toward pain-free methods of treatment, dentists around the world continue to puzzle over the seemingly irrational anxiety their patients experience.

The fear of dentists not only constitutes a significant cause for stress among dental professionals but is also often associated with avoidance of regular dental check-ups—which comes with further dental complications. A deeper understanding of the causes and consequences of this anxiety is the first step toward successful management.

What causes dental fear? Several theories have been developed by clinical psychologists to explain dental anxiety and phobias; presented below are some key highlights.

THEORY 1: Fear of injections

A high co-occurrence is observed between blood, injury and injections phobia (BII) and dental fear. This may be due to the extensive use of local anaesthetic in dental procedures, which has created an association of dentistry and uncomfortable injections. Practitioners must acknowledge that even a relatively painless injection could be perceived as painful by some patients because of psychological expectations (Van Wijk & Makkes, 2008). There are differences in how patients may prefer to cope with this anxiety, distraction being one of the more popular techniques (Hainsworth & Buchanan, 2009).

THEORY 2: Fear of choking

With procedures such as the rubber dam or impressions, it's easy to understand why some patients may find dental treatment somewhat suffocating. However, severe anxiety with regard to choking is usually an irrational phobia that extends beyond dentistry alone.

THEORY 3: Invasion of personal space

The role of a dentist requires close contact with sensitive areas, which can be difficult for patients who feel disconnected to their dentist. Creating a friendly environment and establishing a trusting dentist/patient relationship is a small step which can significantly improve a patient's dental experience.

THEORY 4: Lack of control

The wide range of materials and instruments used in dentistry can be daunting to patients—even more so when they have limited dental knowledge. Their inability to understand exactly what's happening in their mouth can create a feeling of loss of control. As described by a patient, when 'laid back horizontal' with 'things in your mouth,' you can feel 'totally helpless' (Cohen et al., 2000). Mitigating strategies such as explaining dental procedures in simpler terms or agreeing on signals to pause treatment have been proven to restore a degree of patient control.

THEORY 5: Fear of judgment

Many people are embarrassed about their oral health and dread receiving a 'lecture' from their dentist. Social pressures to have the perfect white smile can lead to under-confidence regarding oral health, making it a sensitive issue for many individuals.

THEORY 6: Financial problems

Despite considerable NHS subsidisation of dental treatment in the U.K., dentistry continues to be relatively expensive. A large proportion of patients are acutely aware of the costs involved in dental care and are nervous about being misguided into undertaking unnecessary treatment; this often leads to them avoiding regular preventative check-ups and delaying necessary treatment, such as whilst experiencing toothache. Often this means more complex and expensive treatment is required. So whilst avoidance may seem cheaper in the short term, in the long run it can prove much more expensive.



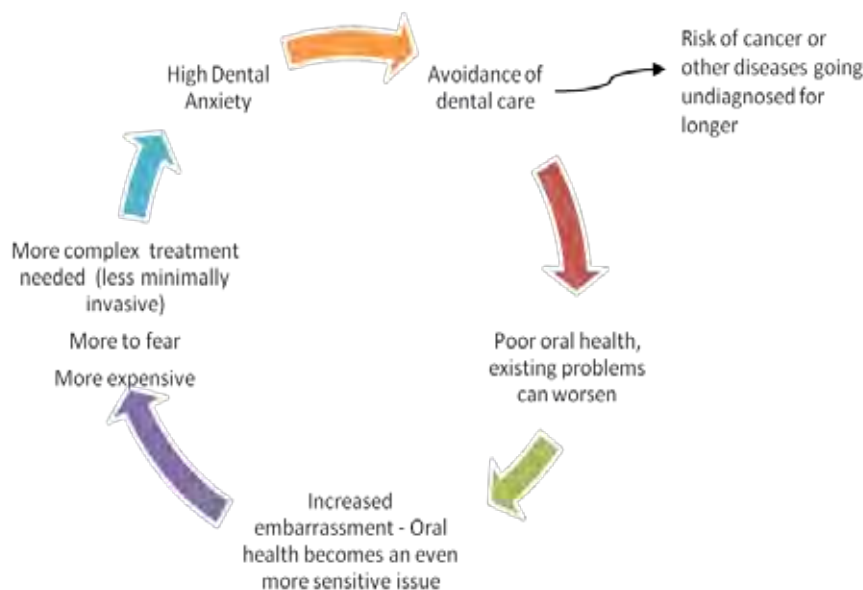
Dental anxiety on daily living

Other research explores the effect of dental anxiety on daily living. Health impacts of anxiety-led sleep disturbance or social impacts, such as lowered self-esteem due to poor oral health, are just a few examples of a range of issues. The impact that a dentist can have extends beyond the confines of a short dental appointment, making it ever more important to ensure a positive and strong dentist/patient relationship.

It's important to bear in mind, however, that dental anxiety not only affects a patient but also has consequences for a dentist. An anxious patient can be difficult to treat, require a longer appointment and act as a source of significant stress. Hill et al. (2008) report that 91 percent of dentists felt stressed when treating anxious patients, 65 percent felt teaching in this area is inadequate and 44 percent showed interest in further training in psychological methods.

A topic as complex as dental anxiety cannot be summarised in one article, but a review of the various causes and consequences is the first step toward understanding patients' mindsets and addressing their concerns.

Vincent van Gogh once advised that, 'Little emotions are the great captains of our lives and we often obey them without realising.' As the young generation of dentists cultivates its dexterity and knowledge base, it's important to remember that the role of a dentist is not only to execute dental procedures immaculately, but also to develop a firm understanding of patients' needs and emotions. ■



Cyclical effects of dental anxiety. Some patients find their dental anxiety intensified by the anticipation of treatment when sitting in a waiting room. A quote by a patient in a study by Cohen et al. (2000) describes this feeling: 'I think the trouble is, in waiting rooms, you have too much time to ponder about what's going to happen to you. ... To sit in that waiting room, it's like torture to me.'

THEORY 7: **Association from early childhood**

From the sound of the drill to the smell of disinfectant, every sensory aspect of a dental visit is automatically associated with negative emotions and pain. This is further accentuated if an individual has had a difficult childhood dental experience, resulting in following visits acting as triggers which cause past negative emotions to resurface.

THEORY 8: Dentistry's historic association with pain

The preconceived notion that dentistry is painful is based on historic forms of dental treatment before the use of local anaesthetic. Despite significant progress toward pain-free treatment, the stigma associated to dentistry has not faded. Strong communication between the dentist and patient can help clear any irrational thoughts and improve the predictability of any discomfort in the treatment. In turn, this helps fearful patients feel more at ease.

The consequences

It's vital that dentists not only explore the causes of dental anxiety but also develop a firm understanding of the consequences it can have on both patient and dentist.

Research suggests that approximately 15 percent of adults avoid routine check-ups because of dental anxiety (Milgrom et al., 2011). Early signs take the form of frequent appointment cancellations or failure to attend scheduled meetings. If prolonged, this avoidance of dental care can result in further complications and create the need for more intrusive dental treatment. It can also lead to significantly deteriorated oral hygiene.

Dental anxiety shifts dental care towards symptom driven treatment; a sub-optimal approach. Whilst preventive and minimally invasive dentistry is preferable, it can be facilitated only by regular check-ups and early diagnosis. Furthermore, because dentists are often the first line of defence against various broader health issues like oral cancers, irregular check-ups can increase the risk of undiagnosed conditions. ■

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