Knowledge and Attitude of Parents Regarding their Children’s Oral Health in Buraydah City of Kingdom of Saudi Arabia

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ABSTRACT

Background: Parents can help their children to sustain health oral habits, provided they themselves have good knowledge about oral disease and methods of its prevention.

Aim: To assess parent’s knowledge and attitude regarding oral health of their children in Buraydah City.

Method: Across-sectional study was conducted through self-administered questionnaire which was distributed to around 500 parents in Buraydah city. Information regarding, mother education, children oral habits, feeding practices and dental preventive measures, was obtained from caregivers by self-administered questionnaire.

Results: Our result showed that most parents reported that their children did not brush their teeth and they also believed that primary teeth are not as important as permanent teeth and the main reason for the child’s visit to dentist was toothache.

Conclusion: This study revealed significant association between child dental visit and family preventive measure knowledge with level of education and family monthly income.

Key Words: Knowledge & attitude, Parents, Children oral health

INTRODUCTION

Dental caries is a worldwide pandemic[1]. It affects about 60-90% of school children, and almost 100% of adults throughout the world[2]. In Saudi Arabia, significantly high prevalence of dental caries has been reported in children, adults and older individuals[3]. Children, adults, and elderly populations demonstrate a higher prevalence and greater severity of caries rates over the past few decades in Saudi Arabia[3]. Evidence shows that most carious lesions remain untreated, and caries is the most common cause of primary tooth extraction in the Kingdom of Saudi Arabia[4]. The main risk factors of dental caries in children are sugar-rich diet, incorrect feeding practices and abundant dental plaque. Parents are directly responsible for the dental health of their offspring and can play an important role in preventing oral diseases for their children, as they can help their children to sustain healthy oral habits[5]. Increasing parental knowledge and utilizing preventive methods, as practiced in developed countries, may lead to decreased dental caries and improved health of their children[6].

In 2012, a study was conducted to assess knowledge attitudes and beliefs of parents towards oral health and dental care of their children, the study included 620 parents of one to four years old preschool aged children, The result revealed that the lack of knowledge and awareness of importance of the primary teeth, dental fear of the parents and the myths associated with dental treatment, created barriers to early preventive dental care of preschool children[7].
Another study aimed to assess the knowledge and practices of mother on prevention of dental caries of young children aged 3 to 4 years old from Bialystok, Poland the study included 140 mothers, The result show that most of mothers (95.7%) knew about the importance of regular removal of dental plaque by brushing teeth, 85.7% knew of the role of fluoride-containing tooth paste and 82.8% indicated avoiding the consumption of sweets. They were also aware that oral health required regular dental visits (89.2%). Most of them (87%) knew that deciduous teeth should be treated as permanent ones, but only 65.7% were convinced that a direct relationship of the condition of deciduous and permanent dentition exists. The survey revealed a discrepancy between the knowledge of principles of dental caries prevention and their implementation in everyday life among mothers of young children from Bialystok, Poland [9].

In India Suresh et al, conducted a study to assess mother’s knowledge about the oral health in preschool aged children, the study included 406 mothers with mean age children 3.8 years, the result shows that 73.8% of mothers have a good knowledge about dietary practices, while only 27% and 25% of mother were found to have good knowledge about oral hygiene practices and the primary teeth importance respectively. The study found that mothers with high education knowledge had a better knowledge about their children’s oral health[8].

Other study assessed the relationship between parental education and socioeconomic status in prevention of dental caries among Lithuanian children, the study include 1248 parents of 7, 9, and 12 year-old children from 5 largest Lithuanian cities. The result showed that the parents with a high educational level and those receiving sufficient income cared about education on oral hygiene and regular preventive dental check-ups more than those with a low educational level and insufficient income[10]. In the light of above mentioned facts, this study was planned to assess parent’s knowledge and attitude regarding oral health of their children in Buraydah city in Kingdom of Saudi Arabia. Specific Objective of the study include:

1. To assess children’s oral health habits.
2. To assess parents knowledge about feeding habits
3. To assess parents knowledge about dental preventive measures.

**MATERIALS & METHODS**

A Cross sectional study was conducted in Buraydah city, which is the largest Governorate in Al-Qassim area. According to the general census conducted in 2010, it has an estimated population of 614,093 [9].500 Parent’s Knowledge & attitude regarding their children’s oral health was assessed by self-administered questionnaire living in Al-Qassim region.

**RESULTS**

The statistical analysis was performed using the Statistical Package for Social Sciences (SPSS) version 17. Anova test were performed, The P-value will be determined as ≤0.05 as a criterion of statistical significance with 95% confidence interval. This study included 500 parents, around 35 questionnaire was excluded due to incomplete answers. Most of participants were mothers 92% fig(1), with bachelor degree 56% fig(2), most of families with high monthly income 47% fig(3). When asking the parents about their believe if they have the most important role to guide their children in oral health care, most of parents answered yes 96% fig(19), regarding their knowledge about fluoride effect in prevention of dental caries most of parents answered yes 65%, while 29% don’t know fig(16), significant association where found between family education level and their believe that fluoride application can protect their child teeth from dental caries 65% answered yes it protect while 29% they don’t know. When asking about fissure sealant 54% of parents reported that they don’t know about it fig(17), Regarding teeth brushing 40% answer and that their child didn’t brush their teeth and only 18% brush twice daily fig(10), Furthermore when answering the questions if they know that oral health can affect their child general health most of parent answering with yes 92% fig(4), and 47% of parent don’t believe that the bacteria which cause the dental caries transmitted from mother to child fig(7).

Regarding the ideal age for the first dental visit most parent answered when the permanent teeth erupt 53% while only 17% reported when the first primary teeth erupt 16% fig(13), 18% of parent answered the reasons behind their child don’t visit dental clinic, While 10% answered due to dental treatment high cost fig(15), significant association found between child dental visit and family monthly income (0.03), When asking parent if they believe that primary teeth important in their child development 80% agree with this Fig(5), Regarding if the problem or dental caries in primary dentition may affect the permanent teeth 63% agree with this fig(6), no significant association where found between education level and the awareness of the importance of primary teeth and their effect. When asking parents about frequent sugar consumption may cause dental caries 99% agreed with this, fig(9), and most parent reported that bed time bottle affect their child teeth 69% while 20% answered with no fig (8).

**DISCUSSION**

To our knowledge there is lack in studies in Saudi Arabia presenting parental knowledge and attitudes regarding the oral health. Increasing parental knowledge and utilizing preventive methods, as practiced in developed countries, may lead to decrease dental caries and improved health of their
Our study revealed significant association between child dental visit and family monthly income, which is in agreement with previous study conducted by Kristina Saldūnaitė et al, reported that The parents who reported sufficient-family income scored their child’s and their own health significantly better than those reporting insufficient-family income. This may be explained that children with high family income have the chance to better access to dental care, furthermore this study reported that parents with a high educational level cared more about dental preventive measure[9]. This is in agreement with our study that showed significant association with knowledge about fluoride importance as preventive measure. Our result showed that most parents reported that their children did not brush their teeth and they didn’t believe that primary teeth importance as permanent teeth and the main reason to visit dentist is toothache.

**CONCLUSION**

This study revealed significant association between child dental visit and family preventive measure knowledge with level of education and family monthly income. There was significant lack of knowledge about the importance of dental care of primary teeth. Programs for Family education on proper oral health should be available for parents’. Dental health insurance would definitely encourage the parents for their child’s dental treatments.

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Al-Shetaiwi et al.: Knowledge and attitude of parents regarding their children’s oral health in Buraydah city of Kingdom of Saudi Arabia

Figure 5: Can problems of primary teeth affect the permanent teeth?

Figure 6: Do bacteria causing decay get transmitted from parents to children?

Figure 7: Is it fine to put baby to bed with a sweetened milk bottle?

Figure 8: Does frequent exposure to sweet and sticky foods affect dental health?

Figure 9: Frequency of tooth brushing.

Figure 10: How frequently do you visit the dentist?

Figure 11: Are frequent visits to the dentist important?

Figure 12: At what age should the first dental visit of the child be scheduled?

Figure 13: Reason for the last dental visit of your child.

Figure 14: Reasons behind not visiting the dentist.
Figure 15: Does fluoride prevent tooth decay?

Figure 16: Do you know about fissure sealant?

Figure 17: Do you think that your fear factor affects the dental treatment of your child?

Figure 18: Do parents role in monitoring the children and directing them to preserve their teeth.

Figure 19: Role of parents in supervision and guidance of oral hygiene.