



DENTAL MYTHS AMONG POPULATION OF LATUR

Dr. Ashwini Biradar 1, Saima Siddiqui 2, Shivani Sonawane 3, Swapnil Khetre 4, Nikita Kolamkar 5,

CONTRIBUTORS. 1Head of Department, Reader, Department of Public Health Dentistry, Maharashtra Institute of Dental Science and Research, Latur, Maharashtra, India; 2Intern, Maharashtra Institute of Dental Science and Research, Latur, Maharashtra, India; 3Intern, Maharashtra Institute of Dental Science and Research, Latur, Maharashtra, India; 4Intern, Maharashtra Institute of Dental Science and Research, Latur, Maharashtra, India; 5Intern, Maharashtra Institute of Dental Science and Research, Latur, Maharashtra, India.

ABSTRACT

BACKGROUND: As there is increase in the false belief regarding dental oral hygiene and the treatment regarding dental problems, the target population is from age 18-70 years of age , additionally aged people may have face dental problems. So this study attempted to evaluate dental myth, oral hygiene, methods and belief. **AIM:** The aim of this study is to adopt a qualitative research methods approach to understand the Dental Myths Among population of Latur. **OBJECTIVES** :1)To determine the extent of dental myths 2)To examine the impact of dental myths among the population of the city.3)To examine the oral health awareness of this problem.4) To access the prevalence of dental myth among young population.5) To interpret level of knowledge and Perception of population. **MATERIAL AND METHODOLOGY:** A cross-sectional Study was conducted in the city of Latur, where 15 self constructed questionnaire was developed for the present study ,to assess the prevalence of dental myths among population of Latur. In the study 509 Willing subject were taken from the city and formed the study sample. **RESULTS:** The study shows that 42.2% Agrees to statement "if the extraction of upper teeth cause loss of vision", 65% does not Agree with the statement " Scaling causes the loosening of the teeth ,51.7% does not Agree on asking that chewing tobacco in decayed tooth relief pain where as 27.9% Agrees on the same statement where 20.4% can't predict the Answer. **CONCLUSION:** We came to conclusion that the population of the district Latur believes in various myths in dentistry which result in poor oral health . The use of household ingredients can influence oral health status. This study also revealed that the dental myths are still prevalent in aged people and younger population are more aware and didn't believe much regarding various dental myths.

KEYWORDS: Dental Myths , False beliefs , Oral Health , Dentistry , Taboos.

INTRODUCTION: The word myth is derived from the Greek word “MYTHOS.” As a part of cultural identity, the stories shared by a group of people are identified as myths, which has a strong influence in seeking treatment during illness. Myths are used to convey religious experience and to establish behavioral models. Due to false traditional beliefs and non-scientific knowledge, people have myths about dentistry. This creates hindrance in the recognition of scientific and contemporary dental treatment-seeking behavior .

Myths are false beliefs they maybe a misconception, or a fictitious imaginary understanding that has no relevance with reality. Ignorance among humans, Myths differ from country to country and society to society . Myths usually arises from past events or rituals which is embedded into future generations. This study stated that majority of misconception were inherited from parents and grandparents.several dental myths were made to help or alleviate dental issues as much unnecessary anxiety and stress had developed around dentists and dental health care.they are handed down one generation to another . These belief show the acceptance among people without any proof regarding it. These myths have a strong influence on the individuals and there may also include seeking treatment during illness.

World health has defined health under three dimensions that is physical , mental,and social dimensions.this social dimension has deep roots from the society and has a role in influencing the health. From the time immemorial the early man correlated diseases to the wrath of God and invasion of the human body by evil spirits.

Synonymous with other health-care fields, there are many myths in dentistry too. Although many myths are harmless, while some have consequences such as inadequate care of their oral health and treatment-seeking behavior. Oral health problems such as dental caries, periodontal disease, and oral cancer are more prevalent globally affecting a significant population. The burden of oral disease falls on people who are more disadvantaged and poor. Majority of this population are illiterate and lack awareness about importance of oral health.

India is a developing country, and it has many challenges in delivering health services to its people. Majority of Indian population lives in rural areas and health inequalities exist between rural and urban areas in India. The population of India has diverse cultural and religious background. Sociocultural factors and traditional beliefs are considered important in the development of false perceptions and myths.

There are very few studies done on myths among population of India . Hence, this study was done with the aim to assess the myths prevalent among the population in the

city of Latur. majority of the misconceptions were inherited from parents and grandparents, many myths thrive around the population regarding various procedures and outcomes. Factors that may lead to dental myths maybe socio-cultural factors, false traditional beliefs, lack of proper education or non-scientific knowledge. Several dental myths were made to help or alleviate dental issues as much unnecessary anxiety and stress had developed around dentists and dental health care. They are handed down one generation to another, these beliefs show the acceptance among people without any proof regarding it. These myths have a strong influence on the individuals and there is a need to educate individuals to change the mind set and behavior in order to eliminate these myths. hence the study was designed to assess dental myths and evaluate its association among the population of Latur.

According to census 2011, the city has a population of 3,84,940 with 1,97,737 being males and 1,85,203 are females. among which 1,53,207 male literates and 1,29,030 female literates. average literacy rate is 88.96% with males and 79.20% with females respectively.

Oral health means much more than healthy teeth, good oral health is a major resource for social, economic, and personal development of individuals. Poor oral health may inflict demoralisation, dampen social relations, lead to chronic stress and depression plus bring upon oneself great financial cost. Hence it is justifiable to say that oral health status reflects general health and quality of life.

For any country to advance, health care should always be among top-priorities. India is now among the top three countries in the production of scientific manpower. For a population of over 1.2 billion Dentist to population ratio in India as mentioned in report by central bureau of health intelligence was 1:10271 in 2011. While the WHO recommend a dentist to population ratio of 1:7500.

Taboos or myth have got a connection from the history where there was no scientific understanding about concept of health. Similarly during the development of dentistry myths also developed which became imprinted in minds of people, Hence present study was conducted on the Dental myths Among population of Latur.

METHODOLOGY:

The present cross-sectional questionnaire survey was conducted after obtaining ethical approval from institutional review board of M.I.D.S.R Dental College Latur. The study was conducted in the district of Latur, Maharashtra, India .

In the study 509 willing subject were taken from city, from age group of 18-70 years and above formed the study sample, prior to it consent was taken from the concerned participants and every individuals informed consent was compulsorily taken.

The study subjects were selected based on convenience sampling. A 15 self constructed questionnaire was developed for the study.

There was no skip pattern ,and all the questions were compulsory to answer. All the questions were based on myths regarding Dental Caries , Tobacco, related to dental problem and treatment related dental myths the date was collected for a period of 4 months .

Ethics: The Institutional Ethics Committee of the Maharashtra Institute of Dental Science and Research Latur under registration No. MIDSR/STU/IEC-124/837/2022 approved the study.

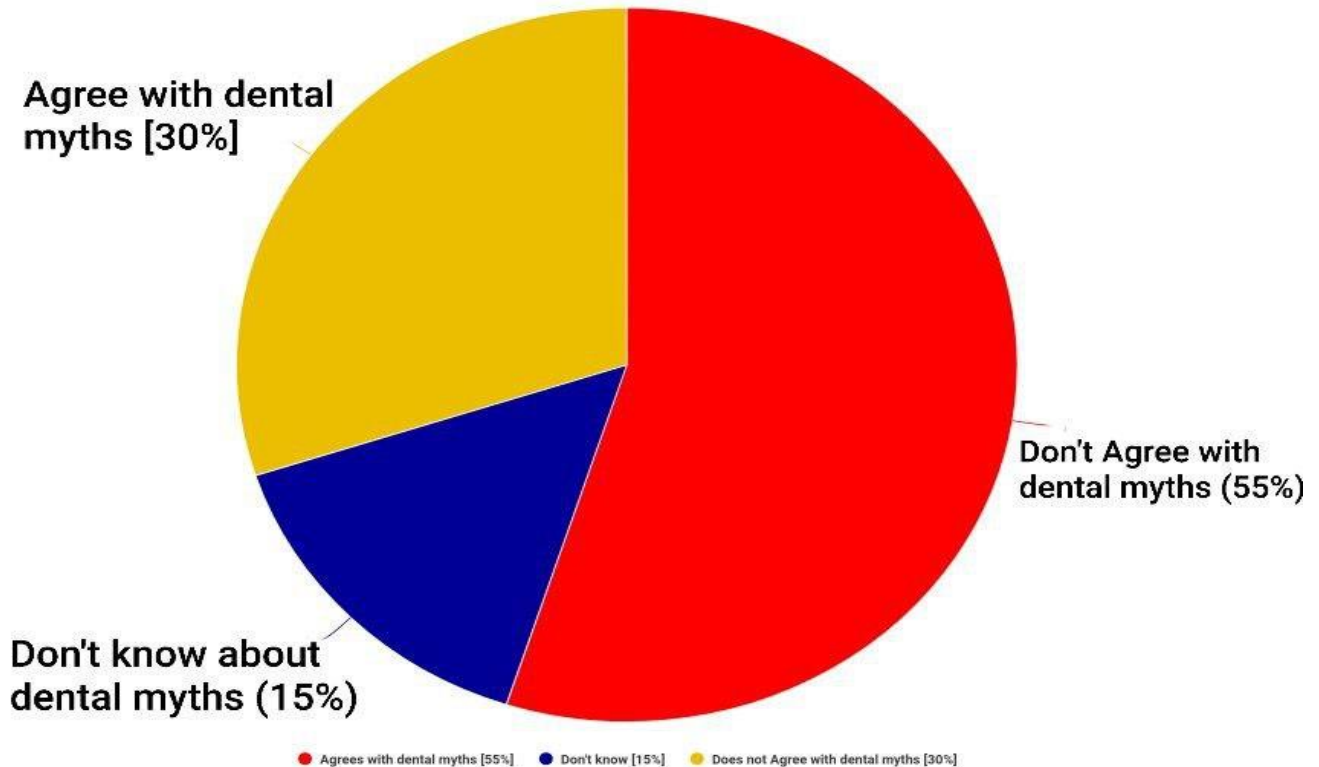
RESULTS:

The main purpose of the study was to determine the existence of false belief and superstition around our surroundings. The total number of 509 participants from the district of Latur, Indian state of Maharashtra, has participated in the study. Table no.1: The age group of the study population was 18-70 and above years old, out of total sample, the age varies in three groups i.e young age group sample varies from 18-30 years with (150)29% participants , middle age group sample varies from 30-55 years with (239)46% participants, and old age group sample varies from 55-70 years and above with (120) 23% participants, it also consist of (300)59% males and (209)41% females.

TableNo.1 Demographic details of study participants.

	Frequency	Percentage
Males	300	59%
Females	209	41%
	Frequency	Percentage
Young(18-30)	150	29%
Middle (30-55)	239	46%
Old(55-70 and above)	120	23%

graph .1 Showing people agreed with the dental myths vs does not Agree with dental myths

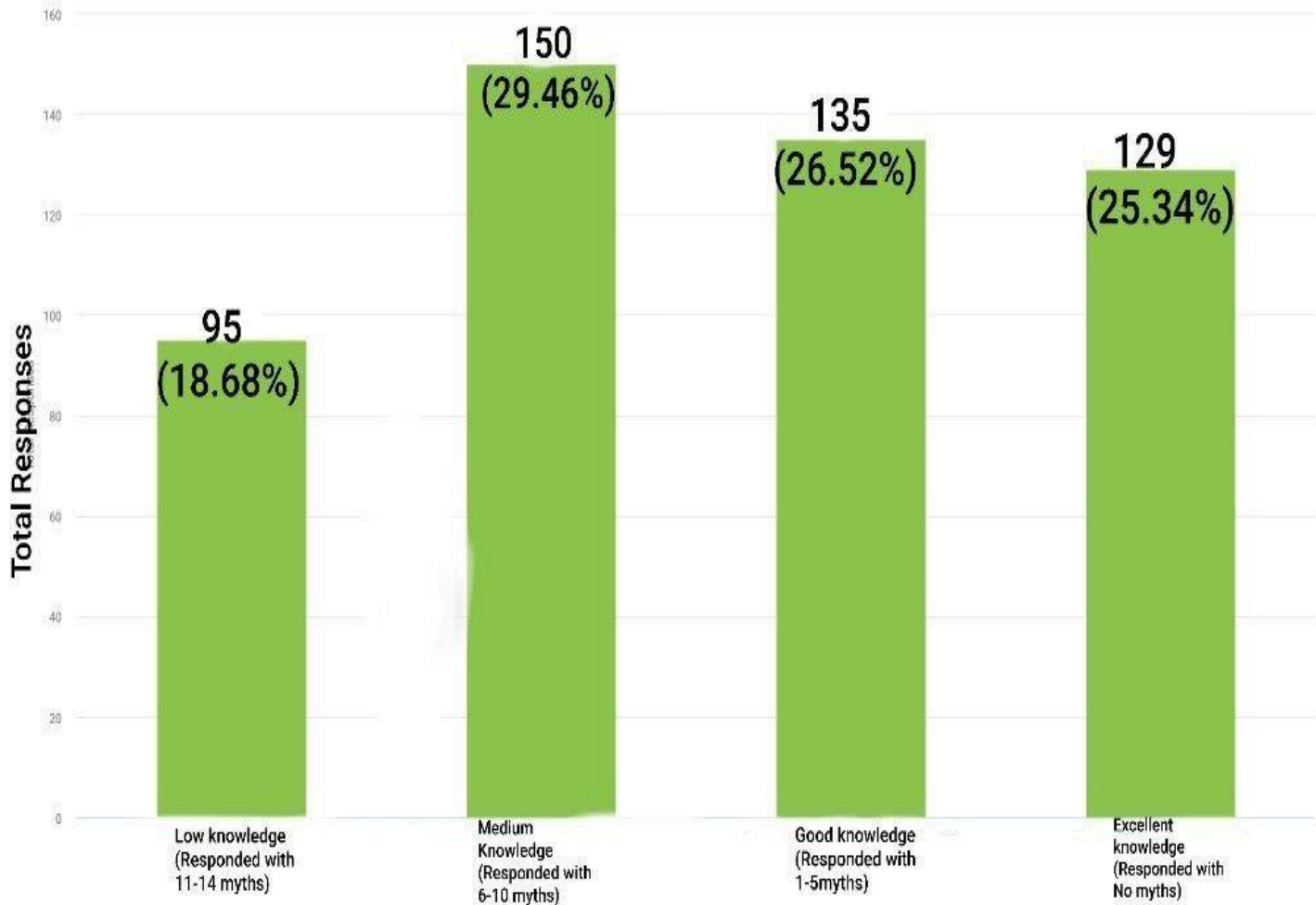


Pie chart 1: Showing people agreed with the dental myths v/s does not agree with dental myths

The main purpose of the study was to determine the existence of false belief and superstition around our surroundings. The total number of 509 participants from the

district of Latur, Indian state of Maharashtra, has participated in the study. Out of 509 participants, 30% of the participants Agree with the dental myths, where as 55% participants don't agree with the dental myths and 15% participants can't recognise that it is dental myths or reality in (Pie chart no.1).

Bar chart . Showing Responses on level of knowledge



Bar Chart no.1 :Showing Response on Level of knowledge Regarding Myths

According to the present study we have also concluded on how many responses we get from one individual participant to know the level of knowledge they had Regarding the Dental myths v/s real fact, which people falsely believed till now, so we collected the data to clear their doubt regarding the myths and to promote the oral health education.

The result from the Data collected for study was analysed on the basis of the level of knowledge of participants Regarding Dental myths in which 95(18.68%)

participants were of Low knowledge which responded with 11-14 Myths ,150(29.46%) participants were of Medium knowledge which Responded with 6-10 Myths,135(26.52%) Participants were of Good Knowledge which Responded with 1-5 Myths, and 129(25.34%) participants were of Excellent Knowledge which doesn't Agree to any of the Dental myths. (Shown in Table no.2,Bar chart no.1).

Based On level Of Knowledge	Low knowledge (Responded with 11-14 myths)	Medium Knowledge (Responded with 6-10 myths)	Good knowledge (Responded with 1-5 myths)	Excellent knowledge (with no myths)
Total Responses	95 (18.68%)	150 (29.46%)	135 (26.52%)	129 (25.34%)

Table No.2 Showing Responses Based on level of knowledge regarding dental myths

Questions

Responses

	Correct	Incorrect
1) Do you think extraction of upper teeth cause loss of vision ?	294	215
2) Does periodontal scaling cause the loosening of the teeth ?	321	178
3) Do you think chewing tobacco in decayed tooth releif pain?	367	142
4) Do you think that you can only go to dentist ,if your teeth hurts?	210	299
5)Does flossing create spacing between teeth?	192	317
6) Do you think your teeth are unhealthy because of increasing Age ?	234	275
7) Do you think whiter teeth are more healthy teeth ?	227	282
8)Do you think that bleeding gums are normal?	313	196
9) Do you think that brushing harder for more time cleans teeth better ?	293	216
10) Could oral swelling be reduced by application of hot fermentation?	180	283
11) Do you think ,poor brushing is the only cause for bad breath?	208	301
12)Is chocolate the only cause of cavities ?	288	221
13)Is there a worm inside decayed tooth ?	251	258
14)Do you think wisdom tooth are related to human intelligence?	261	248
15)Do you think if tooth pains due to decay , then is it better to extract than saving it by alternative method?	203	268

Table No.3:Showing Correct and Incorrect number of response out of total participants.

Based on the analysis of dental myths conducted with 509 participants, here is a consolidated summary of the data:

321(65%) people were correct when asked (Q.2) periodontal scaling cause loosening of the teeth whereas 178(35%) participants were incorrect about the myth,

Then on asking (Q.3) 367(48.30%) participants says chewing tobacco in decayed teeth relieves pain and 142(51.70%) participants denies it .

(Q 4)Then there were 234(37.70%) participants who beliefs that you should go to dentist only when it pains or hurt ,where 275(41.30%)participants denies that and was sharing there experience for how to maintain good oral hygiene by going for routine checkups

(Q.5) 192(37.70%) participants says flossing create spacing and 317(36.30%)participants denies it ,



Sr.no Questions**Total Responses**

		Total Responses		
		Agreed/yes [%]	Don't Agree/No [%]	Sometime/maybe [%]
1)	Do you think extraction of upper teeth cause loss of vision?	42.20%	57.80%	0%
2)	Does periodontal scaling cause the loosening of the teeth?	35%	65%	0%
3)	Do you think chewing tobacco in decayed tooth relief pain ?	27.90%	51.70%	20.40%
4)	Do you think that you can only go to dentist ,if your teeth hurts ?	37.10%	41.30%	21.60%
5)	Does flossing create spacing between teeth ?	37.70%	36.30%	25.90%
6)	Do you think your teeth are unhealthy because of increasing Age?	34%	46%	20%
7)	Do you think whiter teeth are more healthy teeth?	36.50%	44.60%	18.90%
8)	Do you think that bleeding gums are normal?	22.40%	61.50%	16.10%
9)	Do you think that brushing harder for more time cleans teeth better?	25.70%	57.60%	26.70%
10)	Could oral swelling be reduced by application of hot fermentation?	21.60%	35.40%	43%
11)	Do you think, poor brushing is the only cause of bad breath	38.50%	40.90%	20.60%
12)	Is chocolate the only cause of cavities?	22.80%	56.60%	20.60%
13)	Is there a worm inside decayed tooth?	27.70%	49.30%	23%
14)	Do you think wisdom tooth are related to human intelligence?	25.50%	51.30%	23.20%
15)	Do you think if tooth pains due to decay, then is it better to extract than saving it by alternative method?	26.70%	47.40%	25.90%

Table No.4 Showing Responses of participants in percentage.

(Q.8) 313(22.40%) participants says bleeding gums are normal where 196(61.50%) denies as bleeding gums can cause bad odour spread of infection in the oral cavity.

(Q.11) 208(38.50%) Participants says poor brushing is only cause for bad breath and 301(40.90%)denies it as before brushing the unhealthy diet , junk food ,gargle over having food, sleeping at night without brushing and sweet sticky substance and many more were the thought of the other participants,

Correct Answers: 42% (215Participants)

Incorrect Answers: 57% (294Participants)

From the data, it can be concluded that there is a moderate level of knowledge regarding dental myths among the participants. However, there is still room for improvement as almost half of the respondents provided incorrect answers.

Discussion:

For a good health we need to maintain good hygiene, and for good hygiene we should start with maintaining good oral hygiene. As nowadays awareness towards maintaining oral hygiene is increasing in people around us and are getting motivated to maintain a better hygiene by oral health practicing, but in old age people there is still existence of false belief to oral hygiene practice, Taboos and superstitious thought in their mind toward the dental myths, so according to the percent study we analysed there is still Dental Myths exist in some peoples and they have faiths on the false belief and Myths.

As the result of this study show that, there has been increasing awarness about myths related to dentistry among people of Latur district. The percentile of people has decreased who believed in various myth related to oral hygiene, tobacco use dental problem and it's treatment. All these finding were in contrast to the results of the research done by H Mythri and R santosh's letter to editor too highlighted the prevalence of myths in Indians, like removal of upper tooth affect loss of vision,

it was found that 55.5%. of participant in present study mostly do treatment by home remedies rather than consulting a dental professional. In the present Study 49.5% of individuals believed that extraction of teeth is better than Saving it, which was lower than conducted by mythri & RS[9].

In the Current study 42.51% of study participant believed that bleeding gum was normal during brushing, which is lower than the study Conducted by Raina et al.

In the present study 57.60% of the study participants disagree that brushing harder whitens the teeth, which was much lower than the study conducted by Sharma et al

According to different study presented by different region of India and other countries[1] [2][3][5][6][7], the present study shows out of 509 participants, 30% of the participants Agree with the dental myths, where as 55% participants don't agree with the dental myths and 15% participants can't recognise that it is dental myths or reality. 321(65%) participants says periodontal scaling does not cause loosening of the teeth, 215(40.20%) participants said extraction of maxillary tooth can cause the loss of vision, 216(57.60%) Participants says brushing harder can cause the periodontal problem, 248(51.30%) says wisdom tooth doesn't affect the intelligence of human brain, as teeth erupts according to there eruption periods, 203(26.70%) Participants says it is better to extract the tooth then saving it by alternative method, where 268(47.40%) participants denies and says that if possible they will choose other alternative methods to save the tooth, which is lower than other studies respectively.

According to the data collected for the present study, the Result of the study confirmed that awareness regarding the Dental Myths is increasing in youth and young Adults, so they are adapting the new way of education towards the dental hygiene and practicing it, where there are old age participants still believes on their old false belief and superstitions regarding the Dental Myths.

CONCLUSION:

We came to conclusion that the population of the district Latur believes in various myths in dentistry which result in poor oral health. The use of household ingredients can influence oral health status. This study also revealed that the dental myths are still prevalent in aged people and younger population are more aware and didn't believe much regarding various dental myths.

Table No.5 Questionnaire

Questionnaire

1) Do you think extraction of upper teeth cause loss of vision?

a) Yes

b) No

2) Does periodontal scaling cause the loosening of the teeth?

a) Yes

b) No

- 3) Do you think chewing tobacco in decayed tooth relief pain?
a) Yes
b) No
c) Maybe
- 4) Do you think that you can only go to dentist, if your teeth hurts?
a) Yes
b) No
c) Sometimes
- 5) Does flossing create spacing between teeth?
a) Yes
b) No
c) Maybe
- 6) Do u think your teeth are unhealthy because of increasing Age?
a) Yes
b) No
c) Maybe
- 7) Do you think whiter are more healthy teeth ?
a) Yes
b) No
c) Maybe
- 8) Do you think that bleeding gums are normal ?
a) Yes
b) No
c) Sometimes
- 9) Do you think that brushing harder for more time cleans teeth better ?
a) Yes
b) No
c) Maybe
- 10) Could oral swelling be reduced by application of hot fermentation ?
a) Yes
b) No
c) Sometimes
d) None of the above

11) Do you think, poor brushing is the only cause for bad breath?

- a)Yes
- b)No
- c) Maybe

12) Is chocolate the only cause of cavities?

- a)Yes
- b)No
- c)Maybe

13) Is there a worm inside decayed tooth?

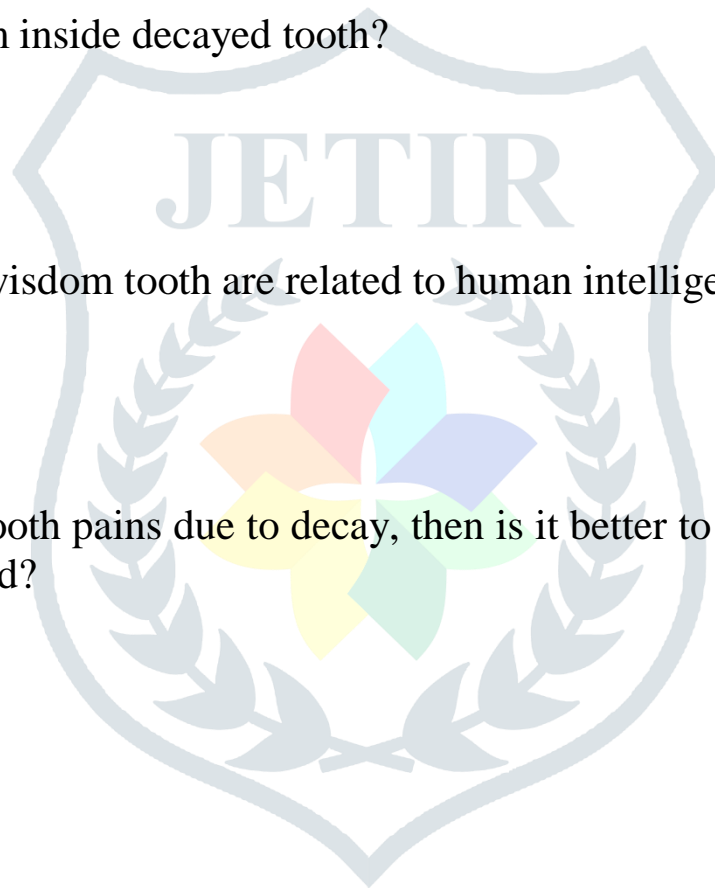
- a)Yes
- b)No
- c)Maybe

14) Do you think wisdom tooth are related to human intelligence?

- a) Yes
- b)No
- c)Maybe

15) Do u think if tooth pains due to decay, then is it better to extract than saving it by alternative method?

- a)Yes
- b)No
- c)Maybe
- d)None of the above



REFERENCES :

- 1) Myths related to dentistry in people of Lucknow : A cross sectional Study
- 2) Dental myths and misconception among rural population in Namakkal district, Tamilnadu:A cross sectional Study
- 3) Assessment of prevalence of myths regarding oral health among general population in maduravoyal, Chennai
- 4) Journal of education and ethics in dentistry
- 5) Gowdar IM, Alqahtani AM, Asiri AM, Aldossary SF, Alkhurayef IA, Alheneshi DI. Oral Health Myths among General Population at Riyadh Region, Saudi Arabia. J Pharm Bioallied Sci. 2021 Jun;13(Suppl 1):S241-S245. Doi: 10.4103/jpbs.JPBS_700_20. Epub 2021 Jun 5. PMID: 34447085; PMCID: PMC8375894.
- 6) Singh SV, Tripathi A, Akbar Z, Chandra S, Tripathi A. Prevalence of dental myths, oral hygiene methods and tobacco habits in an ageing North Indian rural population. Gerodontology. 2012 Jun;29(2):e53-6. Doi: 10.1111/j.1741-2358.2010.00395.x. Epub 2010 Aug 16. PMID: 20718870.
- 7) Singh SV, Akbar Z, Tripathi A, Chandra S, Tripathi A. Dental myths, oral hygiene methods and nicotine habits in an ageing rural population: an Indian study. Indian J Dent Res. 2013 Mar-Apr;24(2):242-4. doi: 10.4103/0970-9290.116697. PMID: 23965455.
- 8) Assiri KI, Ajmal M, Al-Ahmari BM, Abumelha HS, Almoby RA, Almoby RA, Arem S, Chalikkandy SN. Oral Hygiene Myths and its Association with Gingival Health Status among Patients in Aseer Region of Saudi Arabia: A Cross-sectional Study. J Contemp Dent Pract. 2021 May 1;22(5):506-510. PMID: 34318768.
- 9) Mythri H, Kumar RS. Perceived myths about oral health in India. Indian J Dent Res. 2015 May-Jun;26(3):333. doi: 10.4103/0970-9290.162882. PMID: 26275206.
- 10) <https://www.researchgate.net/publication/304815187> Evaluation of dent-o-myths among adult population living in a rural region of Andhra Pradesh India a A cross-sectional study

- 11) Jitender Dagar, Arun Rahar, Nivedita Gautam, Munish Dheeraj. Dental Myths and Taboos: Hurdles to Oral Health. IHRJ [Internet]. 2019Aug.25 [cited 2023Jun.12];3(5):176-8. Available from: <https://ihrjournal.com/ihrj/article/view/276>
- 12) Vaghela N, Lajpatrai A, Dixit A. A study to assess the prevalence of dental myths and misconceptions among the rural population of Daman. Int J Prev Clin Dent Res [serial online] 2022 [cited 2023 Jun 12];9:11-3. Available from: <https://www.ijpcdr.org/text.asp?2022/9/1/11/340846>
- 13) Raina SA, Jain PS, Warhadpande MM(2017) Myths and taboos in dentistry. Int J Res Med Sci 5; 1936-1942
- 14) Sharma R, Mallaiah P, Margabandhu S, Umashankar GK, Verma S (2015) Dental myth, fallacies and misconceptions and it's association with socio-dental impact locus of control scale. IJPPHS 1:5.

