Knowledge And Experience of Management of Dental Trauma Among Clinical Dental Students and Interns in Benin City

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ABSTRACT

Citation: Ikhile FO, Enabulele JE (2023). Knowledge and experience of management of dental trauma among clinical dental students and interns in Benin City. Nig J Dent Maxillofac Traumatol; 6(1&2):c1-c2.

INTRODUCTION

Dental trauma is a common presentation in emergency clinics with a really huge gap in the management of traumatic dental injury in Nigeria. It is important for professionals at the frontline of management of traumatic dental injuries to undergo some sort of advanced training to gain adequate knowledge (Sood et al., 2017) Emergency intervention to traumatized teeth is important for good prognosis of teeth and oral tissues (Sari et al., 2014). The predominance of dental trauma is increasing in Nigeria and its treatment is occupying an increasing amount of dentists' time (Ligali et al., 2011). The objective of the study was to assess the knowledge and experience towards management of traumatic dental injuries among clinical dental students at the University of Benin and dental interns in Benin city.

METHODS

This was a descriptive analytical cross-sectional study of clinical dental students at the University of Benin and dental interns at the University of Benin Teaching Hospital and Central Hospital Benin City. Data was collected by means of a self-administered questionnaire. Information garnered were: Socio-demographic characteristics of the respondents, Knowledge and experience in management of traumatic dental injury. Data coding and cleaning was done and the data entered and analyzed with IBM SPSS version 26.0 software.

RESULTS

A total of 95 responses were used for the study with majority (81.1%) being students and a lower proportion 18 (18.9%) were dental interns. More than half of the respondents 60 (63.2%) were males. Majority (84.2%) of the respondents learnt about management of dental trauma from dental school. However, 61.1% of the respondents felt that they do not have adequate knowledge on management of dental trauma.

Less than half of the respondents 30 (31.6%) were aware of the IADT guidelines for management of dental trauma. Various clinical aspects of management of dental trauma were highlighted by the respondents (Table 1). Majority of the respondents 91 (95.8%) were aware of history taking and clinical examination as well as antibiotics use as component aspects in the management of dental trauma. The least reported

aspects were stabilization (66.3%) and creation of study models (75.8%). Although most of the participants had knowledge of some of the clinical aspects in management of dental trauma, majority of the respondents 77 (81.1%) had a poor overall knowledge.

Respondents at higher levels of dental training were found to have better knowledge of dental trauma management while those at lower levels had poor knowledge and this was statistically significant (P=.0.002).

More than half 50 (52.6%) of the respondents admitted to have received general first aid training however, emergency management of dental trauma was not included in the training for a higher proportion of these cases 57 (60%). A significant number of respondents 75 (78.9%) agreed that emergency management of dental trauma should be included as part of the general first aid training.

Less than half of the respondents 41 (43.2%) had seen cases of dental trauma. Cases of avulsion (Ellis Class V) were the commonest (8.4%) followed closely by Ellis Class I-IV and jaw fracture which accounted for 7.4% respectively. A significant number of respondents 64 (67.4%) have never assisted in the management of cases of dental trauma.

Table 1: Awareness of the clinical aspects in the management of dental trauma

Variable	**Aware n (%)**	**Not aware n (%)**
History taking and clinical examination	91 (95.8)	4 (4.2)
Investigation: percussion	83 (87.6)	17 (12.4)
Investigation: Radiographic examination	88 (92.6)	12 (12.4)
Investigation: Clinical photographic documentation	81 (85.3)	19 (14.7)
Investigation: pulp status evaluation	88 (92.6)	12 (12.4)
Creation of study models	72 (75.8)	28 (24.2)
Stabilization	63 (66.3)	37 (33.7)
Use of antibiotics	91 (95.8)	4 (4.2)
Patient's instructions	86 (90.5)	14 (9.5)
Restoration of lost tooth tissues	84 (88.4)	16 (11.6)
Follow – up and detection of post-traumatic complications and treatment	87 (91.6)	13 (8.4)

CONCLUSION

The knowledge and level of experience in the management of dental trauma among clinical dental students and interns was poor. The level of study and clinical exposure were factors that contributed to their knowledge and level of experience in the management of dental trauma

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