Introduction: The aim of this study is to determine the prevalence of oral health satisfaction among students of the university of Khartoum in 2018.

Methods: A cross-sectional study was conducted on 378 students from the university of Khartoum. A structured close ended questionnaire was used to identify the students’ score about the level of satisfaction, cause of this dissatisfaction and the student’s response toward it. The questionnaire contained questions about age, gender, faculty, self-reported tooth appearance, effect of the appearance of the different aspects of life and seeking treatment.

Results: The age of the students varies from 17 to 30 years old. Of the students who answered the questionnaire 31.7% were males and 68.1% were females. 30% of the participants felt embarrassed by the appearance of their teeth while 67.5% did not feel embarrassed by the appearance of their teeth. The most prevalent cause of dissatisfaction was found to be due to discoloration of the teeth/dental caries. Half of the participants did not seek treatment while 44% had previously sought treatment. The result of this study showed that the satisfaction with the dental appearance has no association with the gender.

Conclusion: Through this cross-sectional study conducted on 378 students, we concluded that more than half of the students were satisfied with their dental appearance. However, the rest of them were not satisfied mostly due to dental caries or discoloration; which are considered an aesthetic cause that affects the appearance. More than half of them did not seek treatment for various causes.

Recommendations: Strategies should be formulated based on evidences, to improve the seeking of treatment and the awareness of oral health; by providing campaigns for simple dental knowledge in university of Khartoum.

Keywords: Satisfaction, health, oral.
Introduction

Beauty, especially in this century, is an important issue among many societies. [1,2] and usually what remains constant is the general appearance of a smile. [3] A good image of the teeth does not only extend towards the appearance but also includes the health of the teeth and the manner one preserves them. [4] The appearance of one's teeth has invariably been considered vital in shaping one's temperament and the way one acts. [5,7] The dental appearance, especially in regards to the color of the teeth, influences one's first impression of another person as well as the relationship between them. [12] Unhealthy dental appearance, like having broken teeth, irregular tooth alignments, or apparent caries, has a powerful impact on social judgment as it has an effect on the facial attractiveness. [13,14] The aim of this study is to assess the prevalence of dental oral health satisfaction among students of University of Khartoum, determine the causes of dissatisfaction, explore patient's responses towards it and to determine the difference across genders.

Material and Methods

This study is a cross-sectional university-based research, conducted in the University of Khartoum which has 23,400 students, in Khartoum state (Capital of Sudan) Of the existing 4 campuses and 19 Faculties we chose 4 Faculties: Faculty of biology sciences, Faculty of public and environmental health, from Faculty of forestry and Faculty of education and 7 batches by simple randomization. Written consent was obtained from each participating person. A close-ended questionnaire was developed and tested in University of Khartoum before data collection. The data was presented in numbers and percentages. The results were analyzed by differences between percentages and simple correlation taking P<0.05 as the limit of significance, using the SPSS (Statistical Package for the Social Sciences) program version 23.

Result

The study was conducted on 378 students from university of Khartoum by means of a questionnaire. The students' average age was 20.71±2.405 (SD=2.405). 31.7% of the participants were males and 68.1% were females. Twenty-nine percent of the participants were from the faculty of public and environmental health, 22.75% from the faculty education, 22.22% from the faculty of science of biology, 14.81% from faculty of forestry and the rest of them from faculty of science biology – chemistry department. More than half of the participants were from the first class, 19.58% of the participants were from the third class, 14.55% of the participants from the fifth class and the rest of them from the fourth class.

Most of the participants who answered Yes, said this feeling started at school, while 31.15% said that the feeling started at university and 19.67% of the participants said it started at childhood.
This study has investigated the level of satisfaction of the student's oral health. The percentage of students who were satisfied with their dental appearance found in this study was 67.5% while in a previous study conducted in Saudi Arabia, 50% of the population was satisfied with the appearance of their teeth [16].

Other studies showed that 57.3% of the population was satisfied in Turkey, 47.2% in Malaysia, 65.5% in Jordan, 65% in Palestine and 76% in the United Kingdom [2,7,8,16].

The high percentage in this study may be related to the individual perception of the oral health in Sudan, also affected by the low knowledge of dental information and the hard circumstances, which make the appearance and health of their oral the least important thing to care about.

This could be attributed to the use of different measures to evaluate satisfaction, cultural factors, religion, and racial factors as well as to the fact that dental appearance is affected by individual characteristics, compliance, or unrealistic expectations [17].

The result of this study showed that the satisfaction with the dental appearance has no association with the gender. In contrast to Turkey, where the gender and satisfaction with dental appearance showed significant relation [2]. This may reflect that the demand of satisfaction increases with the increment of life conditions.

The most frequent cause of dissatisfaction in this study is discoloration of the tooth/dental caries (22.97%). This may be due to students' high consumption of soft drinks, coffee and tea with low awareness regarding the importance of brushing the teeth at night. It may also be due to fluorosis which is considered a significant problem in Sudan due to inadequate fluoride content in drinking water or it could also be due to smoking.

This, followed by protrusion of the lower and upper jaw, spacing and crowding all of which need orthodontic treatment can be prevented by early dental office visit which is not prevalent in Sudan due to low income and poor economic status which makes dental care a sort of luxury. Finally, we found calculus build-up and consequently loss of teeth, probably due to periodontal disease; which may be prevented by oral hygiene instructions and regular periodontal scaling. This intervention is also not prevalent due high prices and low income.

While in a Turkish study (56.2%) were not happy with the color of their teeth, (32.3%), regarded their teeth as poorly aligned, (26.4%), as crowded and (23.4%) protruded. This is considered as an agreement between the two studies [2].

Half of the respondents said that the start of this embarrassment was during school, followed by university and this means that students cannot know the fault in their oral health by herself/himself unless someone points it out to them. This may be due to lack of dental knowledge and it could be considered as child neglect because of its bad influence on the child's self-esteem and how it limits his/her life and thus the productivity in his social and work life.

Moreover, the high percentage of respondents that said (the problem doesn't affect their life) may also indicate the society's poor knowledge of dental oral health for not pointing it out.
Some people said it affects their social life and their self-esteem which may decrease the productivity and quality of life of the person.

The percentage of respondents who we were not satisfied with their oral health and didn't seek treatment the percentage was very high while the percentage of those seeking treatment was relatively low.

Finally, as a consequent of the question about what they will do about their dental problem, twenty nine percent of the respondents answered that they are planning to have treatment followed by financial reasons that prevent them from having the proper treatment, including bad health insurance and bad economic conditions.

Another reason was lack of time which may be attributed to them being students not having time for check-up for “unnecessary situations” as the dental treatment is considered in Sudan. 15% said that they have no desire in receiving the treatment which maybe because of traditional reasons or maybe because of financial reasons that they are ashamed of.

Of the respondents that sought treatment about 89% of them went to the dentist while the rest of them tried other methods to treat their problem such as natural remedies and that is normal because Sudan is a developing country and people believe in natural remedies more than doctors, although that may worsen the situation instead of solving it.

In conclusion, we found that more than half of the students were satisfied with their dental appearance. However, the rest of them are not satisfied, mostly due to dental caries or discoloration which is considered an aesthetic cause and affects the appearance. More than half of them did not seek treatment for various causes.

Strategies should be formulated based on evidences to improve the seeking of treatment and awareness of oral health; by providing campaigns for simple dental knowledge in the university of Khartoum.

References


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