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KNOWLEDGE, ATTITUDE AND PRACTICE REGARDING ORAL CANCER AND SCREENING PROCEDURES AMONG DENTAL POSTGRADUATES & PRACTISIONERS IN TAMIL NADU

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ABSTRACT

Objective:

Early diagnosis of oral cancer can increase the probability of cure and survival rates in human. Ensuring that knowledge to dentists about oral cancer will improve the efficacy of

prevention, screening and management of these lesions. This paper is aimed at determining the knowledge and practices of dental professionals and practitioners regarding oral cancer.

Materials and Methods:

This cross-sectional study was conducted among the dental professionals & practitioners in south of Tamil Nadu

Results:

The response rate to the survey was 100%. About two third (72%) of the respondents exhibited good knowledge and 76.2% average knowledge about the risk factors of oral cancers. At least, over 85% of the dentists replied that tobacco and betel nut chewing were risk factors for oral cancers. Over 90.0% of the respondents cited the buccal mucosa (96.7%) as the most common sites of oral cancers. A total of 96.7% of the dentists routinely ask patients on the use of alcohol and tobacco and about 83.6% of the respondents routinely provide oral examination to elderly patients.

Conclusion:

Although, the dental professionals in south of Tamil Nadu easily identified betel nut and tobacco as risk factors for oral cancers, knowledge about commonest form, commonest lesion, frequent site was all above average. After the survey all participants accepted that Training Programmes can emphasis on diagnostic and prognostic factors of oral cancer.

Keywords: Oral cancer, Screening, Dental Postgraduates, Practisioners, Tamil Nadu

INTRODUCTION

Oral cancer is a major health problem especially in developing countries **[1]**, and a serious cause of morbidity and mortality worldwide. **[2]** Its incidence and site distribution within the oral cavity varies widely according to geographical location, **[2]** and among groups within one geographical location **[3]**. High rate of incidence for oral cancer as the most common type of cancer, accounting for about 60% are found particularly in India and Sri Lanka **[4]**. It accounts for about 3.6% of all malignant tumours in Nairobi, Kenya **[5]** while in Nigeria, it accounts for 36.8% of head and neck malignancies **[6]**. In recent years, there have been indications that the incidence and mortality rates of oral cancer has started to increase **[7]**. Identification of the problem necessitates addressing the problem and strengthening preventive interventions in health care globally as well as at the oral health level. Oral cancer in India has been recognized as a grave problem. Public health officials, health providers, and academic medical centres are redeemed in motivating the

community, and in the interim, redefining the major shortcomings is necessary.

It is said that the etiology of oral cancer can be multifactorial and the process is a multiple, stepwise **[8]**. Many risk factors have been recognized. Tobacco **[8, 9]** and betel chewing, alcohol consumption **[9]** are the major risk factors.

Other risk factors included but not limited to viruses such as

- Human papilloma virus,
- Herpes simplex type I and Epstein Barrvirus, **[8, 10-14]**
- Dietary deficiency, **[15, 16]**
- Previous history of oral cancer, **[8]**
- Shammah,
- Marijuana, **[17]**
- UV light, **[10]**
- Irradiation, **[8, 18]**
- Dental plaque, **[19]**
- Mouth rinses containing alcohol, **[20]**
- Candidiasis, **[21]** and Diabetes, **[22]**
- Free radicals, **[23, 24]**
- HIV infection, **[8]**
- Positive family history, **[25]**
- Poor oral hygiene, **[26]**
- Age **[8]**

Early diagnosis of oral cancer greatly increases the probability of cure and survival rates with minimal impairment and deformity **[8, 27]** . Most oral cancers are not detected until they are in advanced stages **[25]**. Mortality resulting from oral cancer is strongly correlated with the stage of diagnosis, as detection of earlier lower staged lesions is associated with significantly improved survival with lower morbidity **[28, 29]**.

Ensuring that dentists having knowledge about oral cancer will improve the efficacy of prevention, screening and management of oral cancer in the future **[1]**.

Aim :

To assess the knowledge, attitude and practice regarding oral cancer and screening procedures among Dental postgraduates & Practisioners.

MATERIALS AND METHODOLOGY

A cross-sectional study was conducted using a self-administered questionnaire with 17 structured questions. 352 Dental professionals and practitioners were included. The data so obtained was analysed.

RESULTS

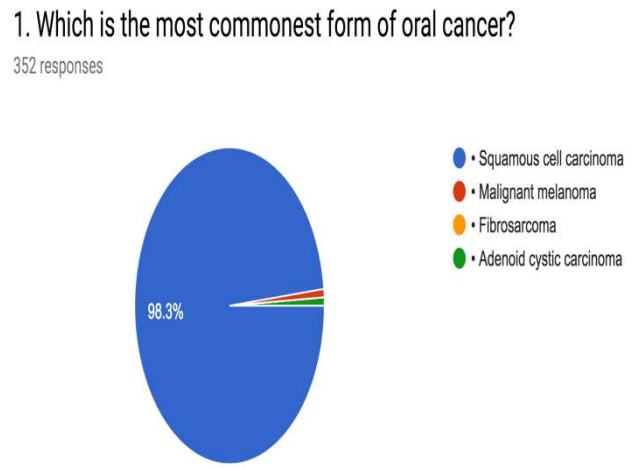

Figure 1: 98.3% of the participants accepted OSCC as the commonest oral cancer

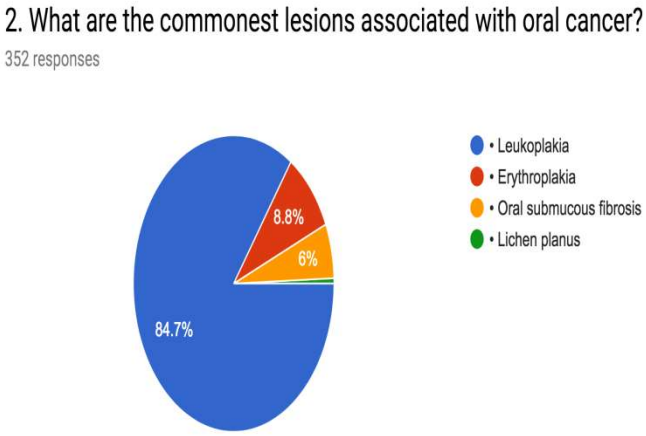

Figure 2: 84.7% accepted leukoplakia as the commonest lesion associated

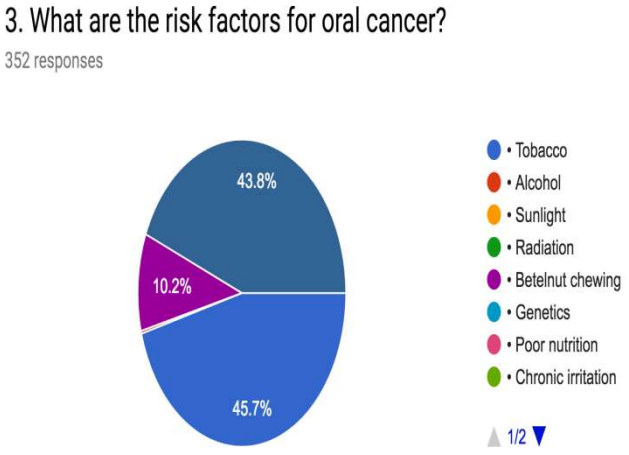

Figure 3: 45.7% showed tobacco as the risk factor

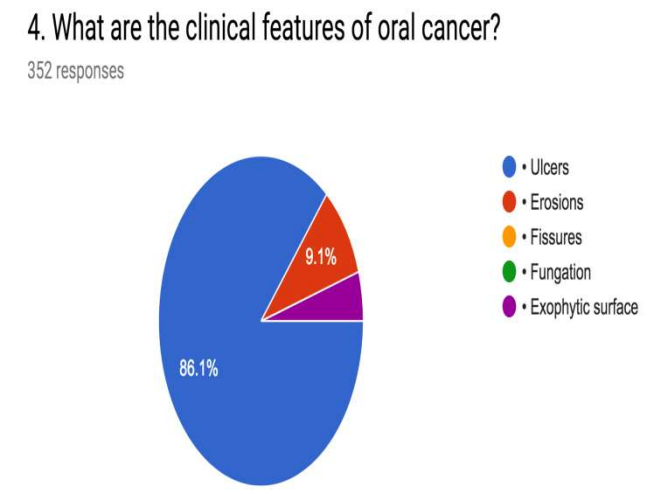

Figure 4: 86.1% the participants marked ulcer as the main clinical feature

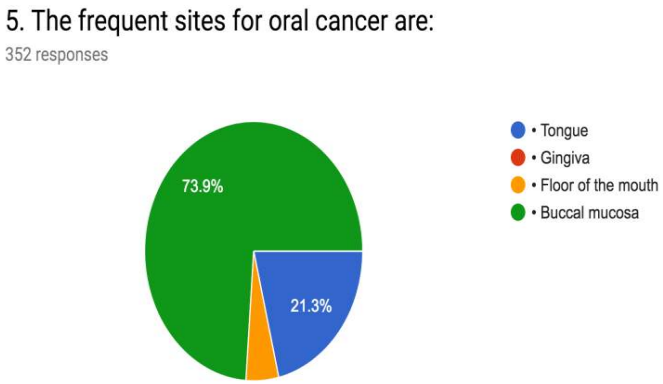

Figure 5: 73.9% of the dentists accepted the frequent site to be the buccal mucosa

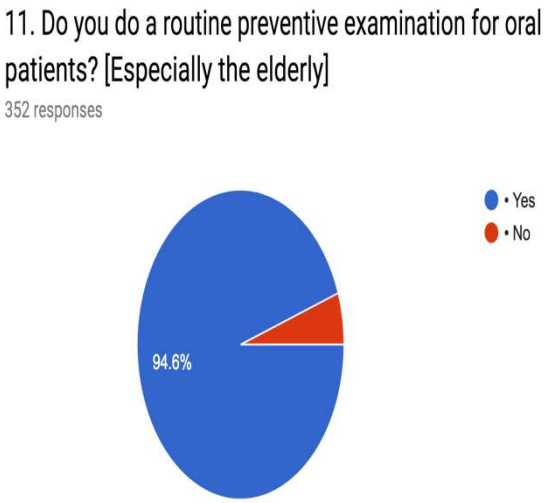

Figure 6: 94.6% participants do the routine examination for oral cancer

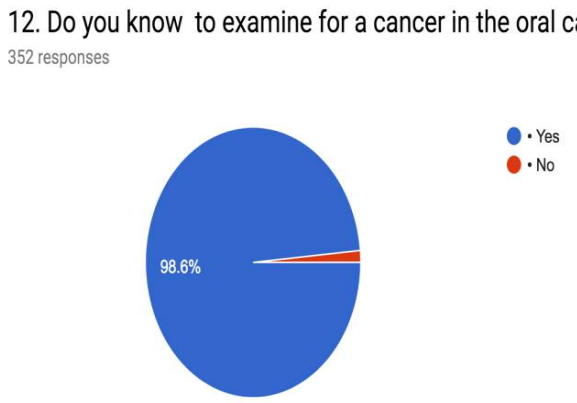

Figure 7: 98.6% of them had experience in examining for oral cancer

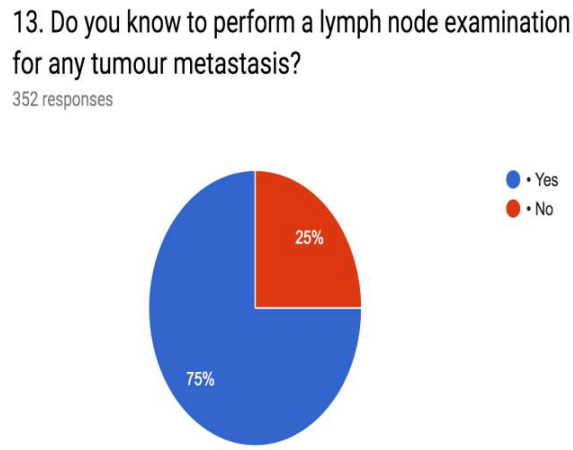

Figure 8: 75% of the participants had some knowledge on examining the lymphnode for metastasis whereas 25% didn't have any

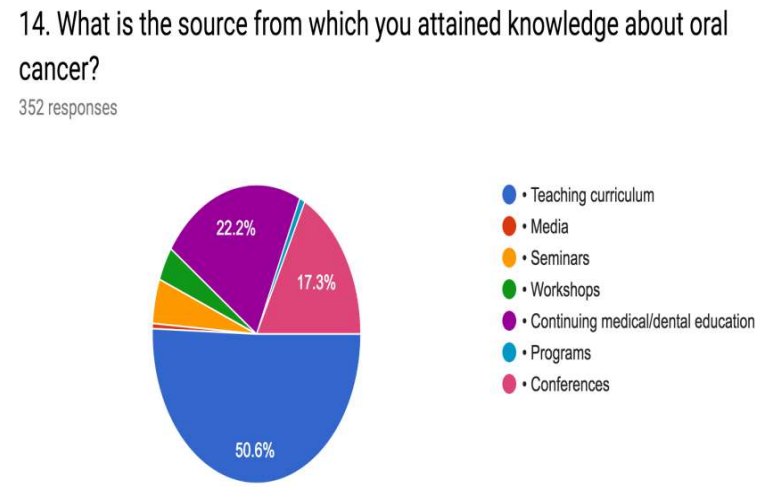

Figure 9: About 50.6% had gained knowledge from teaching curriculum and the rest from conferences, continued educations etc

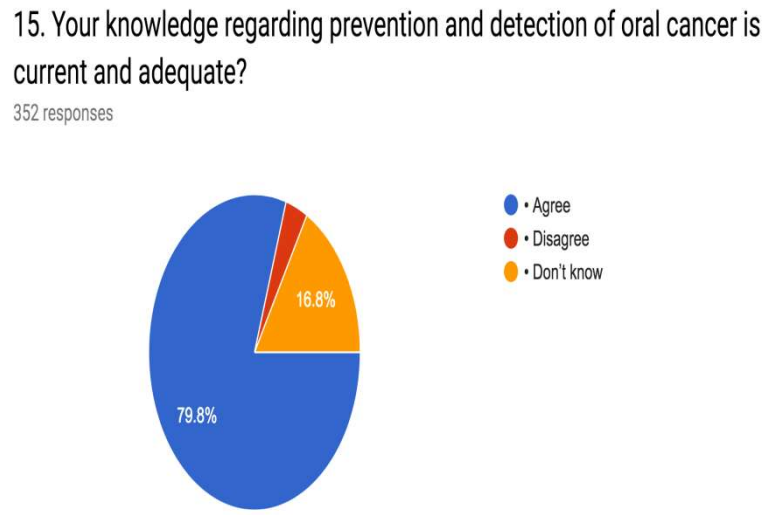

Figure 10: 70 % agreed that they had knowledge on prevention and detection of oral cancer

DISCUSSION

Oral cancer has the highest incidence rate having doubled over the last 15 years. Prevention of oral cancer, and reducing cancer-related burden and deaths could be achieved by an integrated program that involves health care providers, health care organizations, the government at various levels, and the public.

The present study was conducted to assess the knowledge of oral cancer, attitude towards it prevention and screening practice of oral cancer among dental postgraduates and practitioners

Out of 352 dental professionals, 346 (98.3 %) answered that oral cancer was commonly occurring which is consistent with oral cancer prevalence data provided by IDA (Indian Dental Association), suggestive of good awareness among the dental professionals.

The most common manifestation of oral cancer reported here was ulceration by 303 (86.1%) of the professionals and the common site was buccal mucosa by 260 (73.9%) and tongue by 75 (21.3%). A high percentage of the participants 298 (84.7 %) agreed to the statement that "oral cancer is a life threatening disease" which is mostly associated with leukoplakia and the risk factor is tobacco related 161 (45.7%). Almost 99.7% of participants used to take history regarding use of tobacco and 95.7% regarding alcohol from their patients and about 97.7% of the dentists educate the patients about adverse effects of tobacco and alcohol.

It clearly reflects that the students have knowledge of tobacco and alcohol in causing oral cancers. Thus, the role of tobacco and alcohol as a risk factor for oral

cancer has to be reinforced in future teaching also.

A Previous study by Applebaum E. *et al*. reported that 54% of physicians and 93% of dentists reported that they performed oral examination of patients older than 56 years, while for checking risk factors, although 96% of physicians asked their patients whether they smoked or drank alcohol, only 9% of physicians and 39% of dentists could correctly identify the two most common locations for the onset of oral cancer. According to Le Hew *et al*. the factors that influence the knowledge and practical components depend on the understanding of early detection of oral cancer in clinical practice.

CONCLUSION

Overall the mean knowledge of the population about oral cancers among dental professionals and the post graduates are good. A high percentage of participants had good knowledge related to oral cancer type and the cause, but a reasonable percentage were correct about oral cancer screening.

Though the participants has knowledge towards screening and examination they are ready to be a part in Continuing the Education programme.

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