PERCEPTION OF RUBBER DAM - A QUALITATIVE VIEW

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ABSTRACT

Background: Rubber dam is a mandatory tool for endodontic and operative procedures as per guidelines. However, its usage is not common in Pakistan. Dentists do not also prefer its usage supposing that it would stress the patients. Aim: this study aimed to get perception of patients on the first time experience of rubber dam. Method: A qualitative study was conducted on a private dental hospital. Adult patients (N=28) [male =22, female =6] gave their perception on two open ended theme ‘first experience of dental procedure with rubber dam’ and frightening while being locked with rubber dam’. Results: The subjects (N=28) found rubber dam was comfortable and pleasant experience. It was safe tool for their treatment. However, the way doctor introduced rubber dam information could demotivate the patient. Conclusion: Rubber dam was accepted as protective method of infections. However, its usage in children requires further study.

KEY WORDS: Dental procedure, Endodontic treatment, Rubber dam.

INTRODUCTION

Rubber dam is recommended in endodontic and restorative procedures. Many studies have shown that majority of dentists do not apply it during endodontic procedures.1-6 Keeping in view, restorative procedures, its substantial use is higher for composite restoration as compared to amalgam restoration.7,17

The concept of isolating teeth undergoing root canal treatment had long been introduced.8 Rubber dam is a tool which is used for isolating teeth during endodontic procedures. A major advantage of rubber dam is that it prevents salivary contamination and provides a septic field for dental procedure. In addition, it helps to protect the patients from inhalation or ingestion of endodontic instruments.9 That’s why more than 70 % of dental practitioners recommend its use during endodontic treatment.10 However, still it is not being used in several countries including Pakistan. The time consumption, patients’ rejection, lack or insufficient training and high cost of product are its major factors which limit its usage.11-13

This study aimed to explore the experiences of patients who were novice for undergoing operative or endodontic procedures with rubber dam. The study was approved by ethics committee of Frontier medical college, Abbottabad.

METHODOLOGY

The design of this study was qualitative involving patients (N=28) who experienced first time in a restorative or endodontic procedure with rubber dam. This study was conducted in a dental department of a private hospital located in Abbottabad. Having been done one filling or root canal treatment with rubber dam was the inclusion criteria. Those patients who had already undergone either a restorative or endodontic procedure with rubber dam were excluded. The verbal consent of study participants was taken. They were assured of confidentiality of their identification. In addition they were explained the advantages of rubber dam before the start of procedure.

Having been gone through rubber dam first time, participants were asked to give their perception on two theme based open ended questionnaire. ‘How did they find their first experience of dental procedure with rubber dam’? Did they frighten while locked with rubber dam? NVivo was used to analyse the thematic data.

RESULTS

Participants (N=28, male =22, female =6) gave their perceptions. The distribution of thematic analysis of patients ’ open comments and feelings on the rubber dam in terms of theme: use of rubber dam first time and ‘fear of rubber dam’ is presented in Table I.
<table>
<thead>
<tr>
<th>Theme: Rubber dam first time</th>
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<td>It is safe from the dental instruments. It protects the patients. Exposure to rubber dam as a long run would enhance the confidence level in patients.</td>
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The dental procedure is more pleasant and effective if I think; the doctor explains in friendly way the use of rubber dam.

I think this is the item I have seen first time. I think it would be better if the doctor can demonstrate to me.

I don’t like the rubber dam, since I don’t believe the benefits what doctors told me. Plus, I also didn’t like when I was screwed with rubber dam. I think, since they have their own way for everything. I can't follow each specialist way since I only need dental treatment.

Theme: Fear of rubber dam

The doctors at the hospital rarely show to us the good doctor-patient relationship. They also do not show sympathy when there is some wrong procedure is done.

I'm happy to say this was a pleasant experience to be treated with rubber dam. It protected me and I was safe while a dental drill was moving inside my mouth.

Doctor should be more sensitive about the use of rubber dam, whether their approach way is suitable for that particular patient. It can either make the patient motivated or demotivate.

Please don't use words such as 'don't worry', when telling about it.

DISCUSSION

The unpublished data has shown that the use of rubber dam is uncommon in various parts of Pakistan. Studies have shown that the patients preferred the use of rubber dam. Rubber dam is recommended for isolation of working field during endodontic and other restorative procedures. Our results showed that usage of rubber dam was a good tool to be used in dentistry. However, dentists omit the use of rubber dam particularly in pediatric dentistry. They argue that it would stress the child patient.

Our participants gave their feedback on rubber dam as pleasant experience. Researchers reported that experienced dentists gave less stress to patients while using rubber dam as isolating tool. Our study also reported that patients had less fear when they were explained the benefits of rubber dam.

Rubber dam is more common for endodontic procedures as compared to restorative procedures as indicated by a British study. In our study, we used rubber dam more for endodontic procedures. But our concern was to introduce it as a protocol procedure and get the perception of patients. Lack of sufficient knowledge and training had been suggested for less usage of rubber dam in many parts of world. This fact gave indication to us when many participants refused for rubber dam.

In Pakistan, many dental colleges teach rubber dam as theory topic but they do not bring rubber dam in practice. Clark et al. demonstrated this key aspect in their study what is taught in dental schools and what is implemented in private practice. The use of rubber dam is mostly taught as lecture rather than hands on training. That’s why most of clinicians do not use it. Patients are also unaware of it. To improve the quality of dental treatment especially endodontic, its use may be encouraged.

CONCLUSION

The usage of rubber dam should be promoted because patients obtained safe and pleasant experience. This tool is a preventive measure for inhaling any dental instrument and provides isolation. However, the small data used in this study requires to be reaffirmed the need for dental educators to continually look for opportunities to improve and enhance the use of rubber dam for the safety of patients.

CONFLICT OF INTEREST

Authors declare no conflict of interest.

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