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#### ORIGINAL ARTICLE

# **Expectations From Orthodontic Treatment Patient / Parent Perspective**

ROHIT DUGGAL\* AND SUMIT BANSAL\*\*

#### **ABSTRACT**

The purpose of this study was to investigate the expectations of children and their parents towards orthodontic treatment. A total of 200 subjects (100 patients and 100 parents) who were attending for their first visit, completed the questionnaire in the Department of Orthodontics at the Dasmesh Institute of Research and Dental Sciences, Faridkot. The children were aged between 10 to 15 years. The response of the children and one of the parents was examined by using parametric statistical methods. The patients and their parents had different expectations, as shown by the statistical analysis. Hence, effective communication between the orthodontist and the patients and their parents is considered to be essential.

\*MDS, Professor, Dept. of Orthodontics, Dasmesh Institute of Research & Dental Sciences, Faridkot, Punjab; \*\*MDS, Senior Lecturer, Dept. of Orthodontics, Dasmesh Institute of Research & Dental Sciences, Faridkot, Punjab Corresponding Author:

Corresponding Author: Rohit Duggal, MDS Professor,

Department Of Orthodontics
Dasmesh Institute Of Research And Dental Sciences
Faridkot-151203

Punjab

EMAIL: - rohitduggal4@hotmail.com

Mobile No: - 09876050321

#### Introduction

The primary goal for most of the patients who seek orthodontic treatment is a discernible improvement in some aspect of his / her dentofacial appearance. Orthodontic therapy, to their way of thinking, is something that makes people look better and feel better about themselves and perhaps, something that enhances their ability to socially interact with others. The dental profession has fostered the notion that enhanced occlusion improves the health and longevity of the dentition, and so, in effect, many patients who seek orthodontic care state that their secondary goal of treatment is an oral health benefit [1].

Thus, orthodontic treatment aims at getting results which gel with the patients' personality and makes him / her to look more aesthetic.

Renske Hiemstra [2] found that the expectations of the patients and their parents differed on several aspects. Effective communication between the orthodontist and the patients and their parents is considered to be essential.

Phillips et al. [3] found that the patients' main reason for seeking orthodontics is to correct dentofacial disharmony. Males have different expectations of orthodontic treatment than females. Males have a strong motivation for social well-being, while females focus on improved appearance as its own reward. Satisfaction with facial body image decreases with age and adults are more dissatisfied with their dentofacial appearance than children [4],[5],[6],[7]. Patients who are satisfied with the appearance of their teeth, have different expectations of orthodontic treatment than patients who are dissatisfied and older patients

expect more improvement in their self image than the younger patients. Bernabe' et al. [8] reported that it is widely known that orthodontic treatment occasionally causes pain, discomfort and functional limitations. The patients' self confidence during treatment might be affected by speech impairment and the visibility of the appliance. [9] Also, the discomfort caused by orthodontic treatment may affect the patients' compliance and satisfaction with treatment and it might lead to stress between the patient and the practitioner. [10],[11]

Previous studies have measured the subjects' expectations of orthodontic treatment after their initial consultation or during treatment, [12],[13] or have measured only the expectations of the orthodontic treatment of the parents their children [14]. Few studies have measured both the patients' and parents' expectations prior to their first consultation [7],[15],[16]. In a recent study, the expectations of orthodontic treatment of the patients and their parents were measured by using a validated questionnaire, prior to their initial appointment [15]. The patients and their parents showed similar expectations of treatment, except for having an orthodontic appliance fitted at their first visit, the expectations of the duration of orthodontic treatment and dietary and drinking restrictions as a result of orthodontic treatment. [15]

The aim of this study was to examine expectations of the patients and their parents from orthodontic treatment on their first visit to their visit to the Department of Orthodontics at the Dasmesh Institue of Research and Dental Sciences, Faridkot. We used a questionnaire which was originally developed by Sayers and Newton. [15],[16].

#### Materials and Method

A total of 200 subjects (100 patients and 100 parents) who were attending for their first visit, completed the questionnaire at the Department of Orthodontics at the Dasmesh Institue of Research and Dental Sciences, Faridkot. The children were aged between 10 to 15 years.

As used by Sayers and Newton,[15],[16] a visual analogue scale marked at 10-mm intervals, was used as the response scale for all questions, except questions 8 and 9. Scores on the visual analogue scale were calculated by measuring the distance to the mark in mm from the left hand side of the VAS. '0' represented 'extremely unlikely' and '100' represented 'extremely likely'. Question 8 and 9 had different response options.

A questionnaire was used to measure the patients' and their parent's expectations about the orthodontic treatment.

#### Questionnaire

**1.** At your initial appointment do you expect to:

A. Have a check-up and diagnosis?

Extremely Unlikely	Extremely Likely
B. Have a discussion about treatment?	_
externely Unlikely C. Have X-rays?	Extremely Likely
D. Have photographs taken?	Extremely Likely
Extremely Unlikely E. Have impressions?	Extremely Likely
Have oral hygiene checked?	Extremely F.
Extremely Unlikely Have restorations?	Extremely G.
Extremely Unlikely H. Have a brace fitted?	Extremely Likely
<b>2.</b> What type of orthodontic treatment expect?	Extremely Likely do you
A. Fixed braces?	
	ctremely kely
B. Removable braces?	_
Extremely	Extremely

C. Teeth extracted?		G. Improve my chances of a good career?  Extremely Extremely
Extremely Unlikely	Extremely Likely	H. Boost my confidence?
D. Headgear?		Extremely Unlikely Likely
Extremely Unlikely	Extremely Likely	I. Interfere with studies?
E. Jaw surgery?		Extremely Extremely Unikely Likely
	Extremely Likely	7. Do you think the treatment will be expensive?
3. Do you think wearing braces will be	painful?	Extremely Extremely Unlikely Likely
4. Do you think orthodontic treatm produce problems with eating or drinkin		8. How long do you expect orthodontic treatment to take?
produce problems with eating of armain	·5·	< 1 year
Extremely Unlikely	Extremely Likely	1–1.5 years
<b>5.</b> How do you think people will reac wearing a brace?	et to you	1.6–2 years
Extremely	Extremely	>2–3 years
<b>6.</b> Do you expect orthodontic treatment	Likely	>3 years
A. Straighten your teeth?	ю.	Don't know
$ \begin{array}{c cccc} & & & & & & \\ & & & & & \\ B. & Produce & a & better \\ & & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & & \\ & & \\ & & & \\$	Extremely Likely smile?	9. How often do you think you will need to attend for check up?
C. Improve your facial appearance?		< 1 month
Extremely Extremely Unlikely Likely	,	1–2 months
D. Make it easier to eat?  Extremely Likely Likely		> 2–3 months
		> 3–6 months
E. Improvement in speech?		> 6 months
Extremely Extremely Unlikely Ukely	nely	Don't know
F. Make it easier to keep my teeth clean	1?	10. Do you think about any post treatment
Extremely Unlikely	Extremely Likely	complications?

Extremely Extreme Unlikely Likely

#### **Statistical Analysis**

The responses provided by the patients and their parents to the questionnaire was entered and analyzed. The data was examined and the differences in the responses to each item of thequestionnaire between the patients and their parents was tested by using paired sample t tests. The responses to questions 8 and 9 were categorical and were not answered on a visual analogue scale. Item 8 and 9 had 11 and 10 response options, respectively.

#### Results

All patients and their parents completed the questionnaire and no one refused to participate. The mean age of the children was 12.6 years (SD 1.2).

## Comparison of patient and parent expectations

[Table/Fig 1]: Shows the comparison of responses to each questionnaire item for the children compared with their parents

S.No.	Questions	Patients (M)	SD	Parents(M)	SD	P
1.	At your initial appointment do you expect to:					
A	Have a check-up and diagnosis?	81.45	12.07	84.94	15.74	0.089
В	Have a discussion about treatment ?	18.53	22.43	76.90	25.84	800.0
C	Have Xrays?	21.41	22.81	27.94	21.58	0.066
D	Have photographs taken?	9.94	13 10	14.96	15.49	0.013
E	Have impressions?	8.7	8.07	15.62	24.62	0.01
F	Have oral hygiene checked?	64.2	16.7	71.41	1951	0.005
G	Have restorations ?	51.52	281	5914	2116	0.047
H	Have a brace fitted?	72.14	18.77	77.84	25.03	0.086
2.	What type of orthodoratic treatment do you expect?					
A	Fixed braces?	75.43	13	7712	1534	0.245
В	Removable braces?	1334	1797	15.82	23.9	0.52
C	Teeth extracted?	19.84	21.92	5738	22 11	0.003
D	He adge ar ?	4.44	10.86	5.21	816	0.58
E	Jaw surgery?	0	0	0.4	121	0.001
3.	Do you think wearing braces will be painful?	80.40	13.97	76.52	1+ 21	0.007
4.	Do you think orthodoratic treatment will produce problems with eating or drinking?	60.63	22.65	13.96	27.94	0.346
5.	How do you think people will react to you we aring a brace?	3131	26.7	4738	32.22	0.002
6.	Do you expect orthodontic treatment to:	20.000	A2-20	Berrow.	S	
A	Straighten your teeth?	81.34	1131	83.40	12.88	0146
В	Produce a better smile?	84.73	10.21	8431	10.83	0.24
C	Improve your facial appearance?	83.24	15.88	30,06	15.02	0.15
D	Make it easier to eat?	5715	22.01	56.91	21 59	0.493
E	Improvement in speech?	44.84	25.52	++ 12	22.04	0.837
F	Make it easier to keep my teeth clean?	70.44	23.07	77.08	1624	0.024
G	Improve my chances of a good career?	2539	13.7	3017	23 18	0.042
Н	Boost my confidence?	38.71	24.23	50.44	31.52	0,006
I	Interfere with studies ?	24.88	3016	3518	20.30	0.006
7.	Do you think the treatment will be expensive?	12.83	1813	19,89	20.83	0.012
10.	Do you think about any post treatment complications?	15.34	23.24	22.33	29.09	0.051

Patients, as well as parents, had similar expectations with regards to having the fixed / removable brace (question 2A, 2B), regarding the headgear (question 2D) and jaw surgery (question 2E) and regarding whether orthodontic

treatment would produce problems with eating / drinking (question 4).

Similar expectations were observed between the patients as well as their parents regarding the orthodontic treatment to straighten teeth, produce a better smile, improve facial appearance and to make it easier to eat and for improvement in speech (question 6 A,B,C,D,E).

Patients and their parents had different opinions regarding the remaining questionnaire, as shown by the statistical analysis.

[Table/Fig 2] and [Table/Fig 3] shows the descriptive statistics for questions 8 and 9. 26 patients had no idea about the duration of orthodontic treatment as compared to 8 parents. Nearly twice as many parents as the patients expected the orthodontic treatment to be finished within 1 – 1.5 years. [Table/Fig 3] shows that more than 50% expected to visit once a month and that patients were more ignorant as compared to their parents regarding the frequency of their appointment.

[Table/Fig 2]: Expectations as to the duration of orthodontic treatment (question 8)

Duration of treatment	Patients (n=100)	Parents (n= 100)	Total number (n=200)
<li>vear</li>	24	20	44
1-1.5 years	20	43	63
1.6-2 years	22	18	40
>2-3 years	5	8	13
>3 years	3	3	6
Don't know	26	8	34

[Table/Fig 3] Expectations as to the frequency of appointments (question 9)

Frequency of appointments	Patients (n=100)	Parents (n= 100)	Total number (n=200)	
<li><li>l month</li></li>	57	64	121	
1-2 months	4	14	18	
>2–3 months	5	8	13	
>3-6 months	1	2	3	
>6 months	1	1	2	
Don't know	32	11	43	

#### Discussion

This study found some differences in the expectations of orthodontic treatment between the patients and their parents. Some patients/parents might have friends or relatives wearing braces and this might have changed their expectations.

Concerning the reliability and the validity of the questionnaire, it can be said that the questionnaire which was used in the study of Sayers and Newton was both valid and reliable. [15],[16]

It is not enough to translate a questionnaire literally. An additional challenge is to adapt it in a culturally relevant and comprehensible form while maintaining the meaning and intention of the original items; [17] however, even when the translation process is successfully implemented, the validity of the results might be suspicious. To increase the validity of our study, a pilot study was carried out before the questionnaire was distributed to all participants. The study was designed in such a way that the parents could not assist their children in answering questionnaire, as they were observed by one of the interns. We therefore feel confident to say that the responses of the children reflect their true feelings and not what their parents suggested to them. Several results from the present study are different to the results found in previous studies.

Tung and Kiyak [12] stated that parents expected a higher increase in the social confidence of their children as a result of orthodontic treatment, than their children. This was not found in the present study. Also, a considerable amount of discomfort during orthodontic treatment was anticipated by patients in previous studies, [18],[10],[11] which was not found in this study. Some of our results agree with those of previous studies. Many children in the Netherlands are wearing braces. [19]

In clinical practice, age-appropriate communication concerning what can be expected from orthodontic treatment is essential to achieve good cooperation from the patient. Effective communication is needed, because of the differences in cognitive development among the children and their parents.

It is fundamental for the clinician to direct the attention to the person in the chair and not only to the accompanying parent. [20] Before starting the treatment, orthodontists should always ask their patients how they feel about their dental

appearance and what they expect from the orthodontic treatment. They should give extensive instructions on what people in fact can expect with regards to pain, limitations and discomfort. This strategy may lead to less disappointment and more satisfied patients and may improve the quality of orthodontic care.

#### Conclusion

This study provides a validated measure of the orthodontic expectations of 10 to 15 year old patients and their parents before their initial orthodontic consultation regarding their initial appointment, type of treatment, expected experiences during treatment, duration of treatment, the frequency of their visits and the benefits of orthodontic treatment.

#### References

- [1] Marc Bernard Ackerman Enhancement Orthodontics - Theory and Practice, backwell publishing 2007.
- [2] Renske Hiemstra, Annemieke Bos and Johan Hoogstraten. Patients' and parents' expectations of orthodontic treatment .Journal of Orthodontics, 2009, Vol. 36, 219-228
- [3] Phillips C, Broder HL, Bennett ME. Dentofacial disharmony: motivations for seeking treatment. Int J Adult Orthod Orthog Surg 1997; 12: 7-15.
- [4] Nurminen L, Pietila T, Vinkka-Puhakka H. Motivation for and satisfaction with orthodontic-surgical treatment: a retrospective study of 28 patients. Eur J Orthod 1999; 21: 79-87.
- [5] Shaw WC. Factors influencing the desire for orthodontic treatment. Eur J Orthod 1981; 3: 151-62.
- [6] Sheats RD, McGorray SP, Keeling SD, Wheeler TT, King GJ. Occlusal traits and perception of orthodontic need in eighth grade students. Angle Orthod 1998; 68: 107-14.
- [7] Bos A, Hoogstraten J, Prahl-Andersen B. Expectations of treatment and satisfaction with dentofacial appearance in orthodontic patients. Am J Orthod Dentofacial Orthop 2003; 123: 127-32.
- [8] Bernabe É, Sheiham A, Messias de Oliviera C. Impacts on daily performances related to wearing orthodontic appliances. Angle Orthod 2008; 3: 482-86.
- [9] Lewis H, Brown W. The attitude of patients to the wearing of a removable

- orthodontic appliance. Br Dent J 1973; 134: 87-90.
- [10] Sergl HG, Klages U, Zentner A. Pain and discomfort during orthodontic treatment: causative factors and effect on compliance. Am J Orthod Dentofacial Orthop 1998; 114: 684-91.
- [11] Sergl HG, Klages U, Zentner A. Functional and social discomfort during orthodontic treatment-effects on compliance and prediction of patients' adaptations by personality variables. EurJOrthod2000;22:307-15
- [12] Tung AW, Kiyak AH. Psychological influences on the timing of orthodontic treatment. Am J Orthod Dentofacial Orthop 1998; 113: 29-39.
- [13] Shaw WC, Gabe MJ, Jones BM. The expectations of orthodontic patient in South Wales and St Louis, Missouri. Br J Orthod 1979; 6: 203-05.
- [14] Bennett EM, Michaels C, O'Brien K, Weyant R, Phillips C, Vig KD. Measuring beliefs about orthodontic treatment: a questionnaire approach. J Public Health Dent 1997; 57: 215-23.
- [15] Sayers MS, Newton JT. Patients' expectations of orthodontic treatment:

- part 2 findings from a questionnaire survey. J Orthod 2007; 34: 25-35.
- [16] Sayers MS, Newton JT. Patients' expectations of orthodontic treatment: part 1 development of a questionnaire. J Orthod 2006; 33: 258-69.
- [17] Sperber AD. Translation and validation of study instruments for cross-cultural research. Gastroenterology 2004;126: 124-28.
- [18] Utomi IL. Challenges and motivating factors of treatment among orthodontic patients in Lagos, Nigeria. Afr J Med Med Sci 2007; 36: 31-36.
- [19] Poorterman JHG, Schuller AA. Tandheelkundige verzorging jeugdige (JTZ). ziekenfondsverzekerde Een onderzoek naar veranderingen in preventief mondgezondheid en tandheelkundig gedrag: Tussenmeting 2003. Leiden, TNO Kwaliteit van Leven; Amsterdam: Academisch Centrum Tandheelkunde Amsterdam, 2005.
- [20] Milberg DJ. Communicating with young patients: look, listen, learn, and lead. J Clin Orthod 2007; 41: 751-55.