

What we know about oral health-related quality of life on Bonaire.



Yvonne A.B. Werkhoven^{1,3}, Arie Dijkstra², Sarah E. van Zanten³, Cees P. van der Schans¹

¹Centre of Research and Development, Hanze University Groningen, University of Applied Sciences, ²Social Psychology, University of Groningen, ³Oral Health Institute, University of Groningen/ Hanze University Groningen, University of Applied Sciences, The Netherlands

Aim of the study

To determine the relationship between oral health behavior (OHB), attitude, expected social outcomes (ESO), dental anxiety, and one's dentition characteristics with oral health-related quality of life (OHQoL).

Methods

51 dental patients in a general practice on Bonaire, a part of the Netherlands Antilles, filled out a questionnaire: **Dutch Oral Health Impact Profile-14** (OHIP-14, $\alpha=0.88$), **index of OHB** (10 items; tooth brushing, interdental cleaning and tongue cleaning), **Attitude** ($\alpha=0.83$), **ESO** ($\alpha=0.75$), and **Dental Anxiety Scale** (DAS, $\alpha=0.93$). **Dentition characteristics** of the patients (healthy dentition, slightly unhealthy dentition, mutilated dentition) were assessed by the third author.

Results

Unhealthy dentition, dental anxiety, a negative attitude towards OHB, and less value attached to negative social outcomes of having unhealthy teeth, were associated with a low perceived OHQoL. ^{Table 1.}

Table 1. Correlations

	DAS	Dentition characteristics	Attitude	ESO
OHIP-14	.444**	.343*	-.400**	-.308*

* is significant at 0.05 level ** is significant at 0.01 level

Dental anxiety and unhealthy dentition had independent effects on OHQoL, explaining **31.2 %** of the variance. ^(figure 1.)

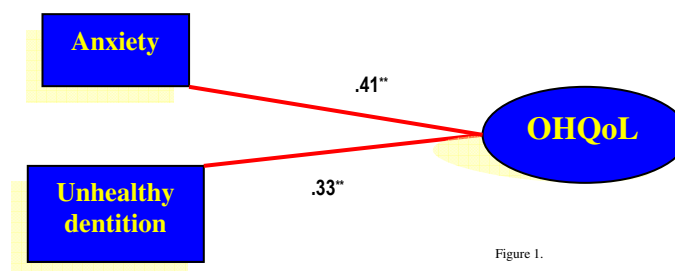


Figure 1.

Conclusions

OHQoL is related to independently assessed **dentition characteristics**, and to self report measures, especially a measure of **dental anxiety**. Oral health behavior itself was not associated with OHQoL. Subjective as well as objective factors were important for oral health-related quality of life.

Slade, G.D. (1997). Derivation and validation of a short form Oral Health Impact Profile. *Community Dentistry and Oral Epidemiology* 25: 284-90.



Rijksuniversiteit Groningen

Special thanks to Sitske Oort & Rianne Kuipers³