Knowledge, Attitudes, Practices and status of oral health among diabetic patients at Kikuyu Hospital

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Introduction: Diabetes is a chronic disorder known to affect oral disease progression (Ainamo, 1990). Recent evidence also shows that oral disease may further complicate diabetes management, or act as a precursor in its natural history (Stewart, 2001). Therefore, oral disease may pose a threat to the prognosis or inversely, diabetes may accelerate oral disease and tooth loss (Oliver et al., 1994).

Objective: The aim of the study was to assess the level of knowledge, attitudes and behaviour and their relationship to the status of oral health among diabetic adult patients, as they are at special risk. Additionally the study also assessed the knowledge and behaviour of health care providers at the diabetes clinic.

Research Design and Methods: This was a cross-sectional descriptive study. Quantitative data was collected from patients attending a diabetic programme based at PCEA Kikuyu Hospital through the use of interviewer administered structured questionnaires. The variables were defined as per the standard WHO oral health questionnaire. Clinical examination was conducted to assess oral health hygiene and status of the patients. A random sample of 153, people attending the diabetes clinic was interviewed and examined. The response rate was (94.7%) i.e. 145 respondents. Twelve health workers in the diabetes programme were interviewed through a focus group discussion (FGD).

Results: Periodontal disease was seen to be highly prevalent in the study population (69%), with (32.4%) of the patients presenting with at least one mobile tooth as the only symptom, and (36.6%) exhibiting intense gingivitis, suppuration and recession. An assessment of the Oral health Status showed that a majority (63%) had poor oral health status. A large number of patients (39.3%) had a poor oral health knowledge score. There was significant association between knowledge and oral health status using the chi square test (p 0.001). Oral health practices were also poor with only (65.5%) of the patients brushing teeth only once or less daily. A significant strong association between oral hygiene practices and oral health status was found (p=0.0001). Only (17.7%) of the patients had visited a dental facility in the last one year. A significant strong association between oral health seeking behaviour and oral health status was found (p=0.0001). Most patients (64%) were however found to have a positive score in the oral health attitude questions. There was an association between oral health seeking and oral health status (p=0.008). In the FGD it emerged that health providers (medical and nursing) lacked the necessary knowledge and skills to disseminate oral health information.
Conclusion: The study reveals a high percentage of the patients in the study had poor oral health status. Limited oral health awareness among healthcare providers is equally worth noting. The findings bring to light the magnitude of the problem that exists and holds enormous potential in diabetes management through oral health care for health service providers and other interested groups.

Recommendations: There is need to lay more emphasis on oral health care by the health workers in order to create awareness, among diabetic patients and thus promote good oral health behavior and treatment seeking. Health care providers at both oral and diabetic clinics require more collaborative efforts and counseling of patients in order to highlight interrelationships between these two conditions. This emphasis needs to be extended to the relevant training institutions.