**ASSESSMENT OF KNOWLEDGE AND ATTITUDE TOWARDS INFORMED CONSENT AMONG PRIVATE DENTAL PRACTITIONERS IN DAVANGERE CITY- A CROSS SECTIONAL SURVEY**

**ABSTRACT**

Informed consent as a part of ethics is the process by which the treating health-care provider discloses appropriate information to a competent patient so that the patient may make a voluntary choice to accept or refuse treatment. The use of informed consent prevents dental malpractices.Hence it was aimed to assess knowledge and attitude toward informed consent among private dental practitioners in Davangere city.A descriptive cross sectional survey was conducted among 122 private dental practitioners in Davangere city. Data obtained from participants through 18-item prevalidated structured close ended questionnaire was analyzed using chi-square test. Out of 122 participants 61.5% participants are males. Percentage of participants with work experience less than five years are 38%, between six to ten years are 25% and more than ten years are 37%. A total of 60% participants have MDS degree. Among all, the private practitioners 70.4% between the ages 25-45 years explain about the economic involvement regarding the procedure to patients. MDS practitioners among all participants take consent for non-surgical procedure (32%), they provide copy of consent form if patients want (40.2%)and 58.4% explain the procedure before starting the treatment. General dental practitioners have less knowledge about informed consent. The attitude toward its use in clinical setting was found very towards satisfaction.

**Key words:** Informed consent, Dental ethics, Knowledge, Attitude, Dental practitioners.

**INTRODUCTION**

The term ‘health’ is a positive and dynamic concept. In common parlance, it implies absence of disease. The World Health Organization has defined health as “a complete physical, mental and social well-being and not merely the absence of disease or infirmity”. In recent years, this statement has been amplified to include the ability to lead a “socially and economically productive life.”1 Good health is important because a man of health can enjoy great happiness during lifetime.

To achieve better health, development of good practitioner-patient relationship has been considered as an essential attribute.2 Adherence to a code of ethics helps in maintenance of the doctor-patient relationship. The word “ethics” is derived from the Greek word “ethos” meaning custom or character. It is the philosophy of human conduct, a way of stating and evaluating principles by which the problems of behaviour can be solved. Principles of ethics include confidentiality, truthfulness, beneficence, non-maleficence, justice and respect for persons which includes autonomy and informed consent.3 The concept of consent in medicine came from ethics and the Hippocratic Oath is one of the ancient forms of medical ethics.4 Medicine is essentially a moral practice constituted by intrinsic moral convictions in which trust is an indispensable factor. The changing medical practice of the 20th century has given place to patient autonomy and informed consent. The age old paternalistic approach has been replaced by the patient’s right to self-determination which is recognised and protected by law.5Patients are demanding better and more information about their healthcare. Some have taken legal action when they have concluded that their clinician has failed to provide sufficient information about the outcome of selected treatment.6

Keeping these scenario in mind the Dental Council of India is focusing more in maintaining ethics among dental practitioners.7 Consent is a voluntary acceptance or agreement of what is planned or done by another person. Not taking consent is considered as deficiency in Medical and Dental Services under the Section 2 of the Consumer Protection Act. Consent is a fundamental and established principle in the Indian Law. Informed consent is the process by which the treating health-care provider discloses appropriate information to a competent patient so that the patient may make a voluntary choice to accept or refuse treatment.4 This disclosure includes disease or condition of patients, necessity and options of the treatments, complications and risk related to that disease and treatment, cost and expected outcomes.8 In the field of Dentistry, informed consent gained recognition in the mid-1980s, and over the years this element has been covered in the academic teaching.

Informed consent comprises of implied and expressed consent. Implied consent is assumed by patient’s attitude and applied mostly to the non-invasive procedures such as consultation, examination and diagnosis, whereas expressed consent is a formal type of permission related to more invasive procedures, including nature of decision for the procedures to be undertaken, reasonable alternatives to proposed interventions, the relevant risks, benefits related to each procedure, understanding of patient about the procedures and acceptance for intervention. In dental practice, verbal consent is one form of expressed consent and used adequately for routine dental treatment such as dental filling, extraction, whereas in written consent another form of consent is taken for more extensive treatments such as procedures requiring sedation and analgesia. Some children, even less than 10 years of age, are considered better than their parents to grasp the concept of treatment and its consequences.

The use of informed consent prevents malpractices and in dental practise.This also helps the dentist to develop good patient-doctor relationship by discussing the treatment modalities with them and their concerns towards treatment.9 Literature search shows that no surveys have been done in Davangere city to assess the knowledge and attitude towards informed consent among private dental practitioners. Here is an attempt to assess the knowledge and attitude towards informed consent among private dental practitioners in Davangere city.

**Research Question**

What is the knowledge and attitude toward informed consent among private dental practitioners in Davangere city?

**MATERIAL AND METHODS**

A Descriptive, Cross-sectional questionnaire survey was conducted among the private dental practitioners of Davangere city. The list of total number of private dental practitioners was collected from District Hospital Office, Davangere. The data was collected from private dental practitioners at their respective dental clinics.

Ethical approval was obtained from the Institutional Review Board of Bapuji Dental College and Hospital, Davangere. All the private dental practitioners (122) in Davangere city who voluntary consented to participate formed the study sample.

A pre-validated questionnaire was taken from studies done in different areas of the country.10 Questionnaire consist of three sections. First section meant for collecting demographic characters. Second section consists of ten questions to assess the knowledge. Third section comprises of five questions to assess attitude of private dental practitioners toward the use of informed consent. To rate the students’ response to knowledge -related questions (ten questions), one point will be assigned to each correct answer. Additional One point will be assigned to each of the correct answer for attitude related questions (eight Questions).

**Instructions to Participants**

1. We would be very appreciative if you could please take some time to complete this survey.
2. It will take 15-20 minutes to complete.
3. Please tick mark one answer for each question

**Statistical Analyses**

The data was compiled systematically in Microsoft Excel spreadsheet and subjected to statistical analyses using Statistical Package for Social Sciences (SPSS) version 20 software. Descriptive statistics was expressed in terms of percentages. Data was analyzed using chi-square test to assess the categorical data. Statistical significance was set at p ≤ 0.05.

**RESULT**

This cross sectional survey was conducted on 122 private dental professionals in Davangere city (**Table** **1 and 2)** showing the demographic details in the form of percentage of responses regarding knowledge and attitude towards informed consent.

Among all the participants 61.5% participants are males and rest 38.5% are females **(Graph 1).** Majority of private dental practitioners who are qualified as MDS (60%) are aware that one copy of the informed consent form should be given to the patient if asked for, similarly 40% General dentists agreed with the same. Percentage of participants with work experience less than five years are 38%, between six to ten years are 25% and more than ten years are 37% **(Graph 2)**.

Private dental practitioners (25.4%) with the clinical experience of more than ten years did not agree that the patient consent be taken after treatment while practitioners (18.8%) with the work experience of less than five years agreed.

Among all, the private practitioners (70.4%) between the ages 25-45 years explain about the economic involvement regarding the procedure to patients **(Table 3)**. MDS practitioners among all participants take consent for non-surgical procedure (32%), they provide copy of consent form if patients want (40.2%)and 58.4% explain the procedure before starting the treatment **(Table 4)**. Out of all, participants work experience of less than five years (43%) agreed that they take consent for surgical procedure followed by participants with work experience of more than ten years (27%) **(Table 5).**

**DISCUSSION**

This cross sectional survey was conducted among 122 private dental professionals in Davangere city, Karnataka to assess the knowledge and attitude toward informed consent. This is the first study conducted to assess the same among private dental professionals of Davangere city.

In this present study, knowledge and attitude showed significant association with qualification, work experience and age of dental professionals. Majority of significant responses were obtained from practitioners with work experience of more than ten years and with post graduate degree. This might be due to more clinical exposure and independency among practitioners. Institutions may also play important role in providing knowledge and experience towards ethics to the perusing dentist. A total of 100% response was obtained from the dental practitioners.

Out of all, 96% dental professionals acknowledged that what an informed consent is. These results are in accordance with a study done by **Gupta et al10** found that 97.4% of participants considered informed consent as crucial part of dentistry.

Regarding the types of informed consent, 94.3% professionals know about verbal consent and 99.2% have knowledge about written consent. This might be due to the fact that patients are nowadays more knowledgeable and aware towards their right, this makes dentist more concern and alert about the patient and their treatment. Regarding the knowledge towards consent, males have shown better response in comparison with the females.

Regarding the treatment for children and disabled patient 92.6 % of practitioners have knowledge about obtaining consent from concerned and only 7.2% are not aware of this type of consent. Majority of dental professionals (68%) believe that patient’s consent help in the treatment, this can provide importance to patient’s views and decision during treatment planning and ultimately improves doctor-patient relationship.

Regarding dental procedures, 93.4% of dental professionals explain the procedure before starting the treatment which might help in better cooperation and positive attitude in patient towards dentist and treatment. Similar result was seen in the study done by **Pradhan et al7** where, 51% dental professionals agreed the same. Out of all 91% of dental professionals always explain about the risks and complications related to the dental problem and treatment that could help in better acceptance by the patient. Similar results were found in the study done by **Kottreshetti et al**,6 in which 84% of dental professionals explain about the complications and failure of the treatment.

Around 83% of dental professionals explain about the economic involvement regarding the procedure to patient. But in contrast with the present study, in the study done by **Pradhan et al,7** 62% dental professionals do not explain about charges to the patient. Considering India, economic diversity can be seen anywhere which can affect or deviate treatment plan towards alternative. It is very important to maintain transparency related to finance in front of patient.

The Consumer Protection Act (CPA) is meant to protect the rights and interests of consumers, those who hire or avail of services from others Majority of dental professionals (96.7%) are aware of CPA included practitioners who are male with MDS degree and work experience of less than five years. Awareness towards CPA showed that they are well equipped to deal with litigations that may arise in their dental practice. Study done by **khare et al4** also showed 84% awareness towards CPA. Study done by **Gupta et al10** showed 53% practitioners who are not sure about the CPA awareness.

As this study is based on questionnaire which was distributed to the dental professionals for self-reporting, this subjectivity may lead to over or underestimation of the knowledge and attitude of dental professionals.

**CONCLUSION**

The current study showed unbalanced knowledge among dental practitioners about informed. General dental practitioners have less knowledge about informed consent. The attitude toward its use in clinical setting was found very towards satisfaction. Practitioners with master’s degree and more work experience have better knowledge and attitude towards consent.

**RECOMMENDATIONS**

Knowledge and attitude towards informed consent among dental professionals should be emphasized in their undergraduate and postgraduate curriculum. This study can help researchers in future for further researches to find more significant association between knowledge and attitude towards informed consent among dental professionals. There should be patients’ decision involvement in treatment planning along with the dental professionals. This can help in creating positive doctor-patient relationship.

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**TABLES**

**Table-1: Frequency of responses regarding Knowledge**

|  |  |  |  |
| --- | --- | --- | --- |
| **Knowledge** | **Yes(%)** | **No(%)** | **Not sure(%)** |
| 1. Do you know what an informed consent is? | 118(96.7) | 2(1.6) | 2(1.6) |
| 1. Do you know what verbal consent is? | 115(94.3) | 3(2.5) | 4(3.3) |
| 1. Do you know what written consent is? | 121(99.2) | 1(0.8) | 0 |
| 1. Should signature be taken even if it is a verbal consent? | 75(61.5) | 28(23) | 16(13.1) |
| 1. Should the patient consent be taken before treatment? | 120(98.4) | 2(1.6) | 0 |
| 1. Should the patient consent be taken after treatment? | 39(32) | 70(57.4) | 10(8.2) |
| 1. Do you know that consent should be obtained for disabled/child patient? | 113(92.6) | 4(3.3) | 2(1.6) |
| 1. Does patient’s consent help with the treatment? | 109(89.3) | 7(5.7) | 5(4.1) |
| 1. Are you aware that one copy of the informed consent form should be given to the patient if asked for? | 105(86.1) | 6(4.9) | 9(7.4) |
| 1. Are you aware of the Consumer Protection Act? | 118(96.7) | 2(1.6) | 1(0.8) |

**Table – 2**

**Table-2: Frequency of responses regarding Attitude**

|  |  |  |  |
| --- | --- | --- | --- |
| **Attitude** | **Never(%)** | **Sometimes(%)** | **Always(%)** |
| 1. Have you been taking consent from patient before? | 5(4.1) | 64(52.3) | 53(43.4) |
| 1. Do you take signatures even if it is verbal consent? | 35(28.7) | 56(45.9) | 30(24.6) |
| 1. Do you take consent for surgical procedure? | 4(3.3) | 13(10.7) | 104(85.2)) |
| 1. Do you take consent for non-surgical procedure? | 16(13.1) | 67(54.9) | 37(30.3) |
| 1. If patients ask to take a copy of the consent form do you provide a copy? | 11(9) | 39(32) | 69(56.6) |
| 1. Do you explain about the procedure to patient before starting the treatment? | 4(3.3) | 3(2.5) | 114(93.4) |
| 1. Do you explain about the risk/complication to patient before starting the treatment? | 2(1.6) | 7(5.7) | 112(91.8) |
| 1. Do you explain about the economic involvement regarding the procedure to patient? | 4(3.3) | 15(12.3) | 102(83.6) |

**Table 3**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Age** | Do you explain about the economic involvement regarding the procedure to patient? | | | **χ²** | **p-value** |
| **Never** | **Sometimes** | **Always** | **23.589** | **0.005\*** |
| **Below 25** | **1(0.8)** | **4(3.3)** | **2(1.6)** |
| **25-34** | **3(2.5)** | **6(4.9)** | **43(35.2)** |
| **35-45** | **1(0.8)** | **5(4.1)** | **43(35.2)** |
| **>46** | **0** | **0** | **14(11.5)** |

**\*Statistically significant (p less than or equal to 0.05)**

**Table-4**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Qualification** | Do you explain about the procedure to patient before starting the treatment? | | | **χ²** | **p-value** |
| **Never** | **Sometimes** | **Always** | **7.791** | **0.05\*** |
| **BDS** | **4(3.3)** | **2(1.6)** | **43(35.2)** |
| **MDS** | **1(0.8)** | **1(0.8)** | **71(58.2)** |

**\*Statistically significant (p less than or equal to 0.05)**

**Table 5**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Work experience** | Do you take consent for surgical procedure? | | | **χ²** | **p-value** |
| **Never** | **Sometimes** | **Always** | **18.547** | **0.005\*** |
| **<5 years** | **2(1.6)** | **2(1.6)** | **42(34.4)** |
| **6-10 years** | **2(1.6)** | **0** | **29(23.8)** |
| **>10 years** | **1(0.8)** | **11(9)** | **33(27)** |

**\*Statistically significant (p less than or equal to 0.05)**

**GRAPHS**