

Relationship Between Dental Anxiety and Clinical Pain

Behavioral Sciences

Group 5A-4

Eyad Kholoki, Brett Miller, Sadie Kroll, Rachel Niesen

11/11/2020

Rounds Team

- **Group Leader: Dr. Dix**
- **Specialty Leader: Dr. Bartfield**
- **Project Team Leader: D₄ – Eyad Kholoki**
- **Project Team Participants:**
 - **D₁: Rachel Niesen**
 - **D₂: Sadie Kroll**
 - **D₃: Brett Miller**

Patient

- Age: 28
- Gender: Female
- Ethnicity: White
- Chief Complaint:
 - "I want to fix my smile."

Medical History

- Medical Conditions:
- Medications: None
- Trauma to face in mid-2018 – resulted in severe concussion, laceration to upper lip and bruised arm
- Treatment considerations: N/A

Dental History

- SRP in UL, LL, LR in October of 2020
 - Re-eval following four months
- Pt experienced trauma to face, resulting in fractured crowns and dislodged restorations.
- Pt detailed poor past experiences with dentistry including excessively forceful deep cleanings and unnecessary procedures performed

Radiographs

- Full mouth series

Radiographic Findings

Clinical Findings

- 1 slide describing all clinical findings
- Clinical photos 1-2 slides
 - Relevant extraoral &/or intra-oral views
- Photos of casts 1-2 slides
 - Mounted on articulator
 - Same views as intraoral photos
 - Occlusal maxilla, mandible
 - Open, closed
 - Anterior, lateral
 - In occlusion, excursions
 - Show excursions from posterior to molar view

Specific Findings

- List findings specific to the Rounds discussion, 1 slide
- To enhance viewing, include close-ups of clinical photos, cast photos, radiographs, add slides as needed

Periodontal Charting

Diagnosis

- Diagnosis pertaining to Rounds discussion,
1 slide

Problem List

- Gross Caries
- Periodontal Disease
- Dental Anxiety

D1 Basic Science

- ***D1 Basic Science Question: What is the importance of the CORAH anxiety scale?***
- Questionnaire measuring a patient's anxiety in dental related situations
- Informs clinicians of a patient's subjective feelings surrounding visits to a dental office and procedures
- Frequently used in an experimental setting to measure the success of a clinical intervention relating to dental anxiety

D1 Basic Science (cont.)

- Made up of four scenarios encountered by patients during a dental-related visit
- Patients can choose one four responses matching their reaction to the specified scenario
- Potential scores range from 4-20, with a score of 15 or higher indicating dental phobia
- More recent modifications of Corah's DAS include the addition of a fifth scenario related to injection of anesthetic, a change in response scale, and mean values for phobic and non-phobic patients
- Has high internal consistency and retest reliability

D2: What are the physiological processes of acute and chronic pain?

Acute Pain

- Triggers: tissue damage, traumatic injury, surgery, inflammation
- Lasts a few days to weeks
- Activates the SNS: hypertension, tachycardia, increased respiration, agitation, anxiety, restlessness

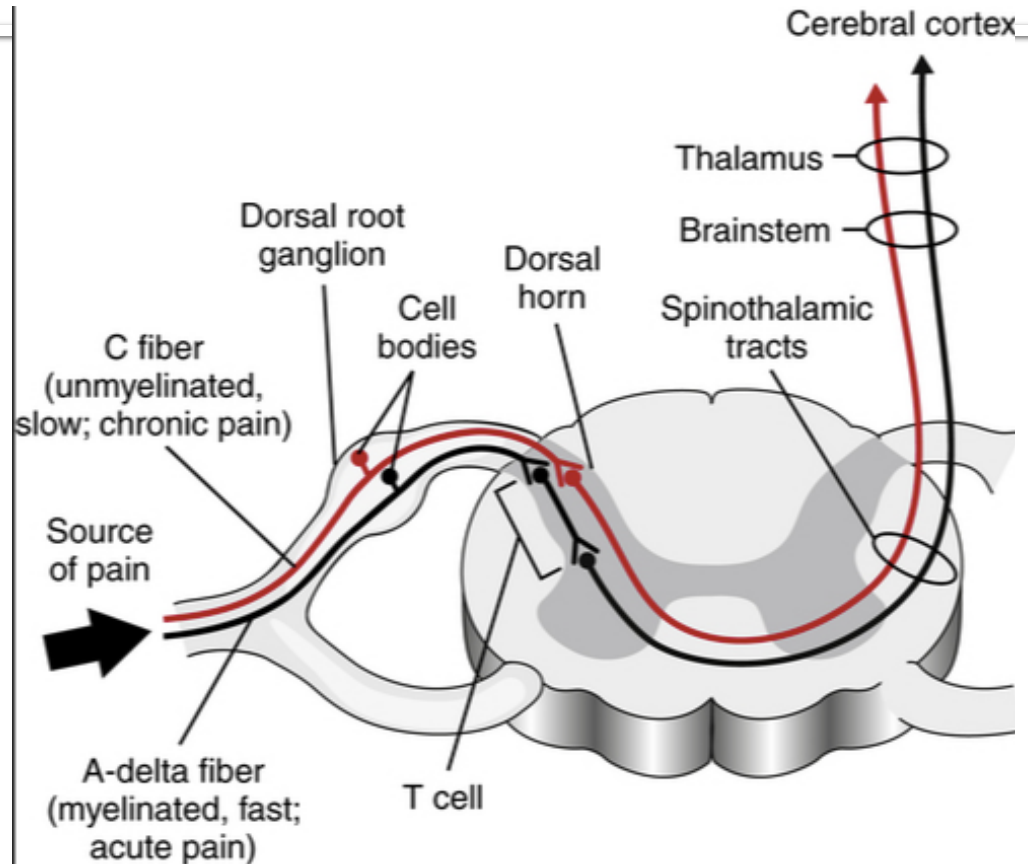
Chronic Pain

- Can progress from untreated/resolved acute pain
- Lasts 3 months or longer
- Long-term, unresolving pain
- Decreased QOL, takes a toll mentally, physically and emotionally

Ascending Pain Pathway

Afferent Sensory Nerve Fibers

- **A-delta fibers:**
 - Myelinated
 - Fast, Sharp, Acute Pain
- **C fibers:**
 - Unmyelinated
 - Dull, Slow, Throbbing, Chronic Pain



D3 PICO

- **Clinical Question:**

PICO Format

P:

I:

C:

O:

PICO Formatted Question

Clinical Bottom Line

Search Background

- **Date(s) of Search:**
- **Database(s) Used:**
- **Search Strategy/Keywords:**

Search Background

- **MESH terms used:**

Article 1 Citation, Introduction

- Citation: Authors, Title, Journal, Date, Volume, Page Numbers.
- Study Design:
- Study Need / Purpose:

Article 1 Synopsis

- 1-2 slides
- Method
- Results
- Conclusions
- Limitations

Article 1 Selection

- 1 slide
- Reason for selection
- Applicability to your patient
- Implications

Article 2 Citation, Introduction

- Citation: Authors, Title, Journal, Date, Volume, Page Numbers.
- Study Design:
- Study Need / Purpose:

Article 2 Synopsis

- 1-2 slides
- Method
- Results
- Conclusions
- Limitations

Article 2 Selection

- 1 slide
- Reason for selection
- Applicability to your patient
- Implications

Levels of Evidence

- ☐ **1a** – Clinical Practice Guideline, Meta-Analysis, Systematic Review of Randomized Control Trials (RCTs)
- ☐ **1b** – Individual RCT
- ☐ **2a** – Systematic Review of Cohort Studies
- ☐ **2b** – Individual Cohort Study
- ☐ **3** – Cross-sectional Studies, Ecologic Studies, “Outcomes” Research
- ☐ **4a** – Systematic Review of Case Control Studies
- ☐ **4b** – Individual Case Control Study
- ☐ **5** – Case Series, Case Reports
- ☐ **6** – Expert Opinion without explicit critical appraisal, Narrative Review
- ☐ **7** – Animal Research
- ☐ **8** – In Vitro Research

Double click table to activate check-boxes

Strength of Recommendation Taxonomy (SORT)

<input type="checkbox"/>	A – Consistent, good quality patient oriented evidence
<input type="checkbox"/>	B – Inconsistent or limited quality patient oriented evidence
<input type="checkbox"/>	C – Consensus, disease oriented evidence, usual practice, expert opinion, or case series for studies of diagnosis, treatment, prevention, or screening

Double click table to activate check-boxes

Conclusions: D3

How does the evidence apply to this patient?

- Consider/weigh:
 - Literature
 - Group Leader & Specialist experience
 - Patient circumstances & preferences

Based on the above considerations, how will you advise your D4?

Conclusions: D4

Based on your D3's bottom line recommendations, how will you ***advise*** your patient?

How will you ***help*** your patient?

Discussion Questions

- 1-2 slides
- List posted discussion questions
- Questions may also be from Group Leader or Specialist

Discussion Questions

THANK YOU
