



Editorial

Behaviour management during dental treatment!!!

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Editorial

Behavioral dentistry is an interdisciplinary science, which needs to be learned, practiced and reinforced in the context of clinical care and within the community oral health care system. $The \, objective \, of this \, science \, is \, to \, develop \, in \, a \, dental \, practitioner$ an understanding of the interpersonal, intrapersonal, social forces that influence the patients' behavior. The clinician must acquire knowledge to develop appropriate behavioral skills with an improved quality of communication and management of patients. Behavior dentistry also teaches to develop a recognition and understanding that the body and mind are not separate entities and focuses on patients' social, emotional and physiological dental experiences.

Behavior is an observable act. It is defined as any change observed in the functioning of an organism. Learning as related to behavior is a process in which experience or practice results in relatively permanent changes in an individual's behavior. Self-perceptions of dental-facial appearance begin with aesthetic values shared within families and based generally on social norms, but that they may be strongly influenced by peer values and specific experiences of individual children, particularly those involving social responses.

Theories incorporating concepts of social comparison and self-efficacy suggest that individuals evaluate themselves in comparison with others in their social environment. Children who perceive themselves to be attractive will reflect those perceptions in their behaviors and generally will receive confirming social responses. The comparison group may express an attractiveness norm that reflects negatively on the individual's behavior. This, in turn, can affect the individual perceived sense of self-efficacy or adequacy within that group and lead to behaviors that reflect more negative beliefs about the self, thereby inviting still more negative social responses.

Patient cooperation is the single most important factor every dentist must contend with. Major considerations are

Regularity in keeping appointments

More Information

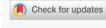
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- Compliance in wearing removable appliances
- Refraining from chewing hard and tenacious substances that are likely to distort or damage the teeth or crowns
- Maintenance of oral hygiene. Laxity in following these instructions may lead not only to compromised treatment but also to slow progress of treatment, loss of chair time and frustration.

What may be more interesting to the Dentist than the shaping of self-perceptions in the shaping of behavior that will ensure a successful result of treatment, that is, the patient's adherence to prescribed routines for self-care and other regimens during Dental treatment. It is helpful in this regard to know that most patients expect improved dental-facial appearance as an outcome of treatment, but there is much more to know about factors influencing cooperation.

Poor motivation can also contribute to non-compliance. The regulatory loop requires a motivational system to adjust behavior to coincide with the recommended regimen. A patient may recognize that the regimen is not being followed and yet simply not be motivated to correct the discrepancy. Poor motivation can also result from a lack of concern over the long-term health consequences of one's behavior and/ or a lack of belief in the treatment. Cognitive approaches that emphasize the personal relevance of the regimen or address misconceptions about the treatment may enhance motivation. Several approaches may be useful in treating poor compliance. Providing incentives or rewards for compliant behavior



might be a useful strategy to enhance motivation. The cause of noncompliance is multifactorial and strategies to improve compliance must be tailored to fit each situation. Current Dental research focuses on a critical aspect of the feedback; specifically, the input received by the comparator that quantifies the actual amount of adherent behavior. Likewise, Patients, parents, and clinicians need a way to ascertain this information.