

Evaluation of the Anxiety Levels and Oral Hygiene Practices among Sars-Cov-2 Infected Patients during Covid-19 Pandemic

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Abstract

The Sars-Cov-2 or the Covid -19 Pandemic has emerged as this Century’s most daunting and difficult health care crisis. It has rendered several people jobless, caused social isolation, changed the people work like adopting work from home strategies. At this time, it is become very crucial to deal with the various mental health problems the population is facing. This article aims to brings up the important aspect of the society that is mental health. In this particular article we have dealt with three sections of data that is demographic data, employment status and family setup. The anxiety

levels of the various groups are compared with their corresponding groups. The respondents were interviewed using Google forms. During the course of our study we observed, there is a clear association between anxiety levels and the oral hygiene practices. The different aspects causing anxiety during the pandemic include monotony, isolation, financial burden, negative reporting of the media and loss of a loved one lead to reduced care of one’s dental hygiene. The anxiety level was observed lower in case of employed individuals as compared to unemployed

individuals. The employed individuals had better oral hygiene. The last aspect we observe that anxiety levels of individuals living in a joint family is lower as compared to other family setups. Individuals belonging to a joint family setup, have a stronger backup as they know they have immense support leading to reduced level of anxiety.

Keywords

Sars - Cov-2, Anxiety Levels. Oral Hygiene Practices, Self-Validated Questionnaire, Mental Health

Introduction

The Sars-Cov-2 or the Covid -19 Pandemic has emerged as this Century's most daunting and difficult health care crisis. It has rendered several people jobless, caused social isolation, changed the people work like adopting work from home strategies. Education has changed from child to facilitator interaction to online classes. Several professional exams have been postponed causing jeopardy in many students' lives.³ During the pandemic the patients were bothered about the availability of beds, oxygen cylinders etc. All these factors render a very negative effect on the mental health of the population. People more than ever are suffering from anxiety, depression and even unsolicited anger and sadness. It has people to relapse or start many self-harming habits such as drinking, smoking, gambling or even causing self-inflecting wounds.⁵

It is a necessary more than ever to provide psychological support to the population. Therapy and mental health are not considered a prime focus of healthcare. People believe a sound and functional body is what helps us survive.² But as we know a common adage "a healthy mind breeds a healthy body." Everyone is facing issues of their own, employees are having a tough time adjusting to long hours of work from home, students are adjusting to online classes and

exams without any interaction with their peers and not getting enough physical activity. Many are isolated from their families and surviving on their own.⁵ All these issues need to be heard, understood and found solutions to. The aim of our study is to evaluate the Anxiety Level and Oral Hygiene Practices among Sars-Cov-2 infected patients During Covid-19 Pandemic.

Objectives

- To evaluate the anxiety levels and Oral Hygiene Practices among Sars-Cov-2 Infected Patients During Covid -19 Pandemic using a Self - administered Questionnaire via Google forms.
- To Correlate with the Employment status of the Respondents

Materials and Methods

In this study we evaluated the anxiety levels and Oral Hygiene Practices among Sars-Cov-2 infected patients during Covid-19 Pandemic. We designed a questionnaire in the form of google forms and it was self-validated. These Google forms were circulated among 100 participants who had been affected with virus. The results were evaluated using statistical analysis. Further the appropriate conclusion will be drawn upon.

<https://docs.google.com/forms/d/e/1FAIpQLSfjg-9Wq2LAUn2FEAfyKw8Yg9a7dOzS2lpCVBLsVjDbyrIXkQ/viewform?vc=0&c=0&w=1&flr=0>

The questionnaire circulated included questions pertaining to the demographic data such as email address of the respondents, age of the respondents, employment status of the respondents, the type of family structure the respondent belonged to.

The second part of the form included questions to the respondents in terms of, did they face any anxiety during the isolation phase of the pandemic, if the response was yes, we further interviewed them for the

reason of their anxiety. The respondents were further interviewed about the various symptoms of anxiety and did they develop any self-harming behaviour during that time.

The third part of the questionnaire dealt with the improvement seen in the lifestyle of the respondents. It interviewed the respondents regarding any improvement in the way of life providing the appropriate options.

The fourth part of the questionnaire dealt with the dental hygiene of the patient, regarding the various dental practices. Respondents were interviewed regarding the various dental problems they faced during that tenure and how were they able to solve these issues.

Statistical Analysis

The data collected was entered in Microsoft Excel and Statistical Package for Social Sciences (IBM Corp., Armonk, N.Y., USA Version 20) was used to perform the statistical analysis. Descriptive statistics included computation of percentages and means. Kolmogorov-Smirnov test and Shapiro-Wilk test were employed to test the normality of data. The statistical tests used were independent t-test and Mann-Whitney U test. Correlation between different variables was assessed using Pearson's correlation and Spearman correlation test. The level of significance was fixed at 5% and $p \leq 0.05$ was considered statistically significant.

Inclusion Criteria

- Respondents of 18-75 years of age.
- Respondents willing to participate in the study.
- Respondents infected with the Sars-Cov-2 Virus.

Results and Discussion

On evaluating the data obtained from the

questionnaire-based study, the maximum respondents 45.3% were in the age group of 25-40 years of age.

The lack of sleep was the major symptom reported by the respondents after the Covid-19 infection approximately 26.6%. This could be attributed to the increased anxiety of fear of possible complications due to Covid. The increase in temperature and myalgia can also be contributed to the lack of sleep. The next common symptom was excessive sleep which could be seen in 23.4% respondents. This could also be a reaction to the present scenario and it taking a toll on the mental wellbeing of the patient.

It was observed in the present study that 62.5% of the respondents belonged to nuclear family as in urban establishments the trend of nuclear families is more prominent.

When the reasons for anxiety were evaluated, it was found that 38% of the respondents responded to the fear of the virus. The reason could be that the virus could be life-threatening to them or their loved ones. The fear stemmed from the fact that the virus could be life-threatening to them or their loved ones, what if complications were to occur or the inaccessibility to the medications. 6% of the respondents had a fear of losing a loved one.

In the present Questionnaire-based study, the maximum number of respondents were working from home keeping the safety measures of the authorities in mind.

This pandemic had impacted the mental health of many individuals. It was found that 98.4% of individuals didn't develop any self-inflicting habits in spite of the rise in infection levels. Instead, it was found that the individuals turned the challenge into an opportunity and found that they had a better family interaction during the period of Covid.

This tough time made them realise the importance of family and the presence of a stable family structure. 10.9% even started a new hobby.

On evaluation of the Dental Problems affecting the respondents 39.1% responded with the presence of tense muscles when waking up in the morning.

On the evaluation the resolution of the dental problems, the respondents responded that they solved on their own.

According to the Comparison of the Employment Status of the Respondents with their Anxiety Levels, Respondents working from home had lowered levels of anxiety and better oral hygiene.

On Comparison between the different family setups, it was found that respondents living alone had elevated levels of anxiety as compared to the other family setups, it could be because of reduced human interaction.

Conclusion

At the end of the study, we can conclude a few points such as: -

- There is a clear association between anxiety levels and the oral hygiene practices. The different aspects causing anxiety during the pandemic include monotony, isolation, financial burden, negative reporting of the media and loss of a loved one lead to reduced care of one's dental hygiene.
- The next aspect, we can observe that the anxiety level was observed lower in case of employed individuals as compared to unemployed individuals. The employed individuals had better oral hygiene. As the person who is occupied and is able to generate a steady income is more relaxed and therefore takes better care of oneself.

- The last aspect we observe that anxiety levels of individuals living in a joint family is lower as compared to other family setups. We have discussed earlier, the major cause of anxiety during the pandemic is isolation and monotony. Individuals belonging to a joint family setup, have a stronger backup as they know they have immense support in terms of financial, emotional and day to day needs leading to reduced level of anxiety.

Limitations of the Study

Every scientific study as we know have a few limitations. Even for this particular study recognize, there are a few limitations such as –

- A limited group of volunteers are selected who have access to emails and are computer savvy.
- Due to the restraints of the pandemic, one could not reach the lower sections of our society and therefore adopted this method of data collection via google forms.

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Dr. Amit Bhardwaj: Contributed to conception, design, and critically revised the manuscript.

All authors gave their final approval and agree to be accountable for all aspects of the work.”

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