



Community's Level of Knowledge and Attitude Concerning Tooth Extraction in Bonto Katute Village, Sinjai District

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ABSTRACT

One of the treatments that can be done to treat dental and oral diseases is tooth extraction. Tooth extraction is an action that is often carried out in dental practice because most patients come with teeth that can no longer be treated. The obstacle experienced in tooth extraction efforts is the public's knowledge of things related to tooth extraction. Insufficient knowledge makes people hesitate to go to the dentist for treatment. This study aims to determine the level of knowledge and attitudes of the community regarding tooth extraction in Libureng village, Barru Regency. This research is descriptive with a cross-sectional design. The total sample of 87 respondents was obtained using the Slovin formula and simple random sampling. Data is presented in the form of a diagram based on frequency distribution. The results of the research show that the level of public knowledge about tooth extraction in Libureng village, Barru Regency, namely 55%, can be said to be good and the community's attitude towards tooth extraction at 69% can be said to be good. The conclusion is that the level of knowledge and attitudes of the people in Holidayeng village towards tooth extraction is classified as good.

Keywords : Level of Knowledge, Attitudes, Society, Tooth Extraction, Bonto Katute Village, Sinjai District

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1. Introduction

Dental and oral health is part of general health which is currently considered important for a person's quality of life.¹ Teeth and mouth are an inseparable part of the human body and have an important role for humans. Teeth serve both functional and aesthetic reasons. The importance of permanent teeth can be demonstrated by the fact that they should remain as long as possible in the oral cavity. Dental and oral diseases are common despite prevention and have substantial negative effects on individuals, communities and wider society. Dental and oral health is a global public health problem that has a high prevalence in low-income and middle-income countries and is also linked to broader social, economic and commercial factors.

Health science develops from the knowledge known by humans. Knowledge can be obtained from various sources including the five senses, thoughts and intuition. When compared between knowledge and science there is a real difference. Knowledge is everything that humans know regardless of whether the knowledge is true or false, while science limits only true knowledge.

True knowledge is knowledge that has been proven to be true through scientific methods. Humans want to be free from disease, so they begin to study or study how to ensure that humans can always live healthily. By using the ability to think rationally on the basis of knowledge, it attracts people's interest in studying health sciences which we then know as health science experts. Dental and oral health services as a general health service cannot be separated from efforts to improve the quality of health.

Talking about health problems in general, it cannot be separated from dental health problems in particular. Dental health as an integral part of general health needs attention from the government and society. Tooth extraction is the removal of a tooth. If the tooth nerve has died or the tooth has become very badly infected, extraction is the only way. Tooth extraction can be done in a simple way or a complicated extraction. The most common causative factor for tooth extraction cases is cavities that are very severe and cannot be treated anymore.² This condition illustrates that dental health services are only treated when the disease is already in a serious condition. Thus, efforts to provide





dental health services to the community in the form of tooth extraction sometimes experience major obstacles.

Generally, the obstacles that occur are because people's knowledge of tooth extraction is very poor, this is what still influences the attitudes of some people. The behavior of rural and urban communities towards dental and oral diseases is different. When people in villages experience dental and oral problems, they still use traditional methods according to their own knowledge and experience, or with the help of other people who are not dentists. On the other hand, urban residents always consult a dentist when they experience problems with their teeth and mouth, because their knowledge about dental and oral health is more extensive.

The importance of people's knowledge and attitudes about tooth extraction as an effort to improve dental and oral health in the community, as well as the lack of adequate health facilities like those in developing cities, this is what differentiates people in cities and villages, thus influencing the attitudes of rural communities. Seeing that this problem has never been conducted in Libureng Village, Barru Regency, the researchers were interested in conducting research. The aim of this research is to determine the level of knowledge and attitudes of the community regarding tooth extraction in Libureng Village.

2. Research Methods

This research is a descriptive study with a cross-sectional research design. The sample size studied was 87 respondents obtained using the Slovin formula. The research was carried out by first asking permission from the local village head to conduct research in the community. Data collection was carried out using a questionnaire which was filled out by the people who would be used as samples and asked for written permission in the form of informed consent. After permission from the community, the research began. Data obtained by distributing questionnaires directly to 87 respondents spread throughout Libureng Village. This was done randomly and then selected based on inclusion and exclusion criteria. After the sample is obtained, filling out the questionnaire begins.





The data is processed based on frequency distribution and presented in diagram form and then analyzed descriptively based on percentage results the assessment criteria use the Guttman scale.

3. Results and Discussion

a. Results

1) Respondents' Knowledge

Based on the research results obtained, respondents' knowledge about tooth extraction in Libureng Village, Barru Regency is 55% which can be said to be good as obtained from a scoring result of 481.

Figure 1. Distribution of Subject Characteristics from Research Results Regarding Knowledge of Tooth Extraction. Community knowledge is measured



with the help of a questionnaire consisting of 10 questions. Research Results Figure 4. Distribution of subject characteristics based on age.

2) Respondent's Attitude

Research data regarding respondents' attitudes regarding tooth extraction in Libureng Village, Barru Regency, namely 69%, which can be said to be good, was obtained from a scoring result of 604.

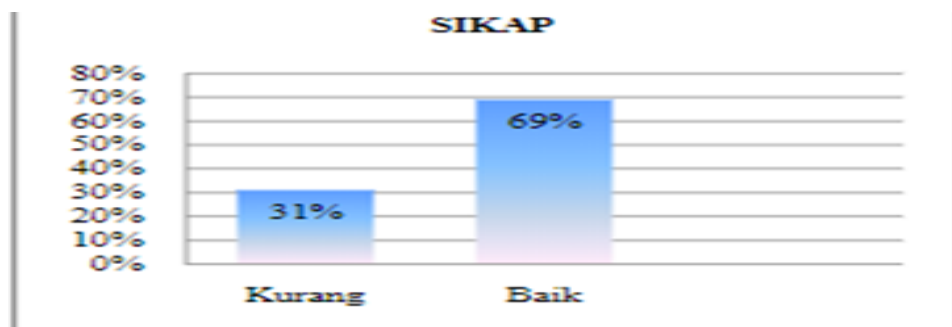




Figure 2. Distribution of characteristics of subjects from research on attitudes towards tooth extraction. Community attitudes were measured with the help of a questionnaire consisting of 10 questions.

b. Discussion

1. Knowledge

The research results showed that 34 respondents (39%) knew that dental and oral health checks at the dentist or health center were routinely carried out every 6 months. This is because there is still a lack of education about dental and oral health in Libureng Village so that few people know about routine dentist control. The results of the study showed that 34 respondents (39%) knew that dental and oral health checks at the dentist and oral health check at the dentist or health center were routinely carried out every 6 months. This is because there is still a lack of education about dental and oral health in Libureng Village so that few people know about routine visits to the dentist. This result is not much different from the results of research conducted by Alamsayh in 2010 in Sari Rejo Village, Medan, which showed that 41% of respondents answered they didn't know and 33% answered they knew.

The results of the research were 40 respondents (46%) who knew that people with heart disease should not have teeth extracted. These results still show that the respondents do not have broad insight so they still do not know what diseases should not be done during tooth extraction. This is the same as research conducted by Morgan in 2012 in Tomohon City, where 72.92% did not know that tooth extraction should not be performed on people with heart disease.

Research on whether or not respondents know that tooth extraction should not be performed on people with diabetes or diabetes. It was found that only 30 respondents (34%) knew about this. This knowledge is still lacking because respondents do not seek out information from various print and electronic media. In this case, the distribution of respondents based on age is mostly 17 - 27 years old. These results show that there are still many people who do not know that in





the field of dentistry, sufferers with uncontrolled diabetes mellitus will be at risk of infection and poor wound healing. Therefore, socialization about diseases that endanger tooth extraction needs to be carried out, so that knowledge in the field of dentistry will be more widely known by the public. Likewise, tooth extraction should not be performed on people with high blood pressure or hypertension. It was found that 41 respondents (47%) knew this.

Knowledge about tooth extraction in diseases that are dangerous when tooth extraction is still lacking. Therefore, it is necessary to provide education and outreach about tooth extraction for these dangerous diseases. 19 Dentures can replace teeth lost due to tooth extraction. In this study, there were 50 respondents (57%) who knew that treatment after removing teeth could involve installing dentures. This is quite good because more than half of the respondents knew this statement.

Based on Riskesdas 2007, the prevalence of people who have dental and oral problems is 22.6% with the percentage of dentures being installed at 10.3%. 5 Based on the research results, only 12 respondents (14%) were aware that slanted or impacted teeth were extracted with an operation called odontectomy. This shows that there are still few respondents who know about it. These results can be related to research conducted by Adisti Dwipayanti and Winny Adriatmoko in the oral surgery department of Jember State University during April to June 2005. The research showed that out of 63 odontectomy sufferers there were 24 sufferers aged 20-21 years or the most post-odontectomy complications were at this age. young, namely 28.6%. So in this study it was concluded that the majority of impaction sufferers were at a young age . This can be the basis that high school students' knowledge about dental impaction is very important to know because young people are the dominant group where impaction occurs. Furthermore, in research on respondents who knew that damaged teeth should be removed rather than left, it was found that 67 respondents (77%) knew this. This is because most cases of tooth extraction are carried out because the tooth can no longer be treated





and causes pain, which is the reason for the respondents to have their teeth removed.

Tooth extraction helps maintain oral health by 74 respondents (85%). This is related to the extraction of damaged teeth which disrupts the health of the teeth and mouth by becoming a breeding ground for bacteria, so that tooth extraction helps maintain oral health. It is understood that leaving damaged teeth in the mouth will cause even more pain, cause a bad smell in the mouth and can reduce appetite. A total of 56 respondents (64%) knew that the cost of tooth extraction was relatively cheap. The remaining 31 respondents (36%) did not know this.

This is because not all residents of Libureng Village have visited a dentist or community health center so they do not know the relatively cheap cost of tooth extraction at the community health center. The results of this research are the same as research conducted by Astiana Indah, Wiguna in Enrekang District, South Sulawesi in 2007, that they generally agree that the cost of tooth extraction when they come to the health center is relatively cheap and affordable. 22 As many as 77 respondents (88%) know that it is better to go to the health center to have a tooth extracted rather than using traditional methods. As many as 10 people (12%) didn't know because they were still used to traditional methods. Generally, respondents who prefer the traditional method are people over 50 years old, who consider the traditional method to be faster and easier to do and does not cost money.

2. Attitude

The research results showed that 53 respondents (60%) felt anxious when having their teeth extracted. Respondents who felt anxious generally had never had their teeth pulled, so their fear came from suggestions from people around them who said that pulling teeth was scary. 82 respondents (94%) said they would go to the dentist or health center if their teeth had cavities. The remaining 5 respondents (6 %) prefer not to go straight to the dentist if their tooth has a cavity and wait until the pain becomes unbearable. The remaining 34 respondents (40%)





had mostly had their teeth removed so they were no longer afraid of having their teeth removed. As many as 73 respondents (84%) felt embarrassed if their damaged teeth were visible to the person they were talking to.

The people of Libureng Village often have social interactions so they think that aesthetic impressions are important and must be maintained. In this study, this was due to a lack of dental health education and some sufferers often delayed going to the dental clinic or community health center. A total of 46 respondents (53%) agreed to consider the opinions of people around them regarding tooth extraction. Some respondents felt hesitant to go to the dentist or health center when they had problems with their teeth, especially when their teeth needed to be extracted. The opinions and suggestions of people around them who convinced that the respondent needed a tooth extraction greatly influenced the respondent's attitude towards going to the dentist/health center. A total of 68 respondents (78%) who went to the dentist wanted to have their teeth removed immediately.

This is because to go to the dentist/puskesmas, respondents tend to wait until the teeth are very damaged so the action taken is to extract the teeth. If there were other alternative actions that could be taken, the majority of respondents chose to still have the extraction done on the grounds that they did not want to have toothache again. The type of tooth extraction to be carried out is left to the dentist, as many as 73 respondents (84%) agree that the choice of type of tooth extraction is left to the dentist. Respondents trust dentists more as the party who knows more about the type of tooth extraction that will be carried out.

85 respondents (98%) felt healthy and comfortable if the problem tooth had been removed. This is because respondents will not feel complaints due to cavities which result in annoying pain. When looking at the equipment in the dentist's practice room, 59 respondents (68%) felt tense or afraid. Dental equipment generally looks sharp and scary so that patients who go to the dentist feel tense or afraid when they are going to have dental and oral treatment so that as many as 46 respondents (53%) have considered canceling going to the dentist.





The results of the study showed that only 19 respondents (22%) thought that teeth that were irregular and damaged were fate and therefore did not need to be extracted. The majority of respondents, namely 68 people (78%), felt that teeth that were irregular or damaged needed to be extracted.

From research conducted, most people in Libureng Village will go to the health center if they have cavities, because the cost of treatment is cheaper and access is easy to reach. There are still some people who wait until their teeth hurt to come for treatment to the community health center. The public's lack of knowledge about the latest dental treatments makes people prefer to have damaged teeth removed immediately. Another reason is that people consider tooth extraction to solve problems more quickly. Apart from that, the cheap cost of tooth extraction is a reason for society. This is what causes people to tend to prefer coming to the health center rather than going to the dentist's practice. When public knowledge increases, it will change people's attitudes about dental care. This is because the human mindset is increasingly developing and open to technological advances in the health sector.

4. Conclusion

Based on the research results, it was found that the level of knowledge and attitudes of the people in Libureng Village were classified as good. It is necessary to provide health education and equip health facilities, especially dentists, so that they can increase knowledge and change the general attitude of the people in Libureng Village regarding dental and oral health. For the public, efforts are needed to improve the information system regarding public knowledge and attitudes towards tooth extraction, both through print and electronic media. For students, it is hoped that it will be a barometer of the quality of public knowledge and attitudes about tooth extraction, as well as developing better counseling concepts and further research can be carried out on the level of knowledge about tooth extraction and its relationship with public attitudes in general.

5. Compliance with ethical standards





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Disclosure of conflict of interest

This research collaboration is a positive thing for all researchers so that conflicts, problems and others are absolutely no problem for all writers.

Statement of informed consent

Every action we take as authors is a mutual agreement or consent.

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