IJCRR
Section: Healthcare
ISI Impact Factor
(2019-20): 1.628
IC Value (2019): 90.81
SJIF (2020) = 7.893

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Occupational Aspects among Dental Surgeons in Chennai: A Letter to the Editor

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It is a pleasure writing a Letter to the Editor for the published article: **Gokul K, Abirami SB. Occupational hazards among practicing dentists in Chennai-A Survey report. Int J Cur Res Rev. 2015;7(24):30-8.**

This is a Descriptive Epidemiological study conducted by using a self-administered questionnaire to 250 Dental Surgeons. As Dentistry is not considered a hazardous job, hence occupational health problems in this profession are mostly overlooked. Therefore, the authors should be thanked for taking up this subject to create awareness of Dental Surgeons' health hazards.

This is a well-conducted study highlighting the profession's inherent hazards, which is normally taken for granted. This study has specifically shown that musculoskeletal injuries, exposure to infectious diseases, percutaneous injuries as well as chemical hazards due to many biomaterials and auxiliary products that are used in dentistry being chemically reactive and hazardous include mercury, powdered natural rubber latex, and disinfectants which are commonly encountered in this profession. That eye injury is an occupational hazard to Dentists has never been highlighted and protective goggles are rarely used because of a lack of this awareness. Among the authors' findings, lower back pain was the highest, followed by neck pain, and frequent respiratory illness. This is due to working long hours at a high level of concentration, sedentary job, exposure to microbial aerosols, and various clinical dental practice chemicals.

Table 1 has been subjected to T-test. As the data is not a continuous variable but a difference between proportions, hence, Chi-square test would have been more appropriate. Few more tables on different health problems would have made this paper more valuable. It has been observed that based on the number of years in practice or number of practice hours per day, there was no statistically significant difference in the presence of lower back pain, wrist pain, or neck pain among the dentists. However, as the job involves hours of work in an odd posture, low back pain, wrist pain, neck pain are likely and they persist as the Dentist has to continue his work month after month without any significantly long rest period may be the reason for the problem in all sub-groups. Therefore, the application of Ergonomics will go in a long way to solve this problem.

There was a high level of awareness of exposure to occupational hazards among the dental surgeons is a very positive point in taking remedial measures. Unless the problem is appreciated, the preventive measures are overlooked. Lower back pain was the highest hazard experienced and further studies need to be done by Ergonomically improving the workplace and studying the result. Increased awareness must be created about complications of musculoskeletal deformities and using eye protection during hazardous work by imparting Health Education. This is a good Descriptive Epidemiological study highlighting many unknown facts and this makes it suitable for starting further studies in Analytical Epidemiology on this subject.