

# ORIGINAL ARTICLE

## Orijinal Araştırma

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## Evaluation of Youtube Videos About Teething

## Diş Çıkarma ile İlgili Youtube Videolarının Değerlendirilmesi

### ABSTRACT

#### Objective:

Parents increasingly turn to platforms like YouTube to find information about their infants' health. While health professionals are the primary source of such information, the accessibility of medical content on the internet and the demand for remote healthcare services during the COVID-19 pandemic have made medical YouTube videos popular. In the field of pediatric dentistry, YouTube offers valuable insights into topics like oral hygiene, early childhood caries, and fluoride use. This study aimed to assess the content and quality of YouTube videos on teething symptoms in infants, identified as a highly searched topic on Google Trends.

#### Material and Methods:

Content analysis, DISCERN reliability scoring, and five-point Global Quality Scale (GQS) assessment were conducted on a sample of 46 videos. Results were categorized by uploader gender, video source category, and video quality. Statistical analyses, including Kruskal-Wallis and Mann-Whitney U tests, along with correlation analysis, were performed to identify differences between videos and groups.

#### Results:

Most videos were uploaded by non-healthcare professionals, health institutions, workers, and other YouTube channels. Mean view counts, likes, dislikes, and comments were determined for the examined videos. The quality of videos was evaluated using Global Quality Scale and DISCERN ratings, resulting in categorization as weak, moderate, and high quality based on Global Quality Scale scores.

#### Conclusions:

This study revealed varying quality in YouTube videos on teething symptoms in infants, with non-healthcare professionals' videos demonstrating lower quality. Nonetheless, reliable videos from pediatric dental experts can serve as valuable resources for parents with limited access to healthcare facilities, particularly during situations like the pandemic. Further research and support are needed in this area.

#### Key Words:

Youtube, Teething, Video Quality, Global Quality Scale, Discern

## ÖZ

### Amaç:

Ebeveynler, bebeklerinin sağlığı hakkında bilgi edinmek için YouTube gibi platformlara giderek daha fazla başvuruyor. Sağlık uzmanları bu tür bilgilerin birincil kaynağı olsa da, tıbbi içeriğin internet üzerinden erişilebilirliği ve COVID-19 salgını sırasında uzaktan sağlık hizmetlerine olan talep, tıbbi YouTube videolarını popüler hale getirmiştir. Pediatrik diş hekimliği alanında YouTube, ağız hijyeni, erken çocukluk çağı çürükleri ve florür kullanımını gibi konularda değerli bilgiler sunmaktadır. Bu çalışmanın amacı, Google Trends'te çok aranan bir konu olarak belirlenen bebeklerde diş çıkarma semptomları hakkındaki YouTube videolarının içeriğini ve kalitesini değerlendirmektir.

### Gereç ve Yöntemler:

İçerik analizi, DISCERN güvenilirlik puanlaması ve beş puanlı Küresel Kalite Ölçeği (GQS) değerlendirmesi 46 videodan oluşan bir örneklem üzerinde gerçekleştirilmiştir. Sonuçlar yükleyicinin cinsiyeti, video kaynağı kategorisi ve video kalitesine göre kategorize edilmiştir. Kruskal-Wallis ve Mann-Whitney U testlerinin yanı sıra korelasyon analizini de içeren istatistiksel analizler, videolar ve gruplar arasındaki farklılıkları belirlemek için gerçekleştirilmiştir.

### Bulgular:

Videoların çoğu sağlık çalışanı olmayan kişiler, sağlık kurumları, çalışanlar ve diğer YouTube kanalları tarafından yüklenmiştir. İncelenen videolar için ortalama görüntüleme sayıları, beğenme, beğenmeme ve yorum sayıları belirlenmiştir. Videoların kalitesi Küresel Kalite Ölçeği ve DISCERN derecelendirmeleri kullanılarak değerlendirilmiş ve sonuçta Küresel Kalite Ölçeği puanlarına göre zayıf, orta ve yüksek kalite olarak kategorize edilmiştir.

### Sonuçlar:

Bu çalışma, bebeklerde diş çıkarma semptomlarına ilişkin YouTube videolarının kalitesinin değişkenlik gösterdiğini ve sağlık uzmanı olmayan kişilerin videolarının daha düşük kalitede olduğunu ortaya koymuştur. Bununla birlikte, pediatrik diş uzmanlarının güvenilir videoları, özellikle pandemi gibi durumlarda sağlık tesislerine erişimi sınırlı olan ebeveynler için değerli kaynaklar olarak hizmet edebilir. Bu alanda daha fazla araştırma ve desteğe ihtiyaç vardır.

### Anahtar Kelimeler:

Youtube, Diş Çıkarma, Video Kalitesi, Küresel Kalite Ölçeği, Discern

## INTRODUCTION

Tooth eruption refers to the process of a tooth transitioning from the alveolar bone to its functional position in the oral cavity. This developmental event commences with the emergence of the lower incisors in infants, typically occurring between the ages of 4-8 months, and extends until the eruption of the primary second molars around 30-36 months of age (1, 2). The appearance of a child's first tooth holds great importance as a significant milestone in their development. Furthermore, the eruption of primary teeth in infants can present challenges and emotional distress for both the infants themselves and their parents (3). Tooth eruption is believed to be accompanied by various symptoms and signs, which can be summarized as follows (1, 3-5).

Pain

Inflammation in the mucosa

Sleep problems

General irritability/fussiness

Perioral rash/redness

Hypersalivation

The desire to suck and bite increases

Gastrointestinal problems

Loss of appetite

Aural fullness on the side of the erupting tooth

Certain studies have failed to establish a direct causal relationship between teething and infant symptoms such as fever, redness, diarrhea, or infection (5-7). Various treatment options have been suggested during the teething period to reduce symptoms.

Teething rings

Cucumber (peeled)

Frozen fruits and vegetables

Gums can be massaged using a clean finger, a cold spoon, or wet gauze patch as a means of relief

Pacifiers

Analgesics/antipyretics

Topical anesthetic agents

Alternative holistic medicine

Parents can seek information on teething symptoms and treatment from pediatricians, dentists, and family physicians. In addition, parents often rely on the Internet to gather information about their babies' health (8-10). Although healthcare professionals continue to be the primary source of information for guiding patients' decision-making, the internet, particularly YouTube, holds significant influence (11). YouTube stands as the world's second most favored search engine and social media platform (12). As of 2020, YouTube boasted an excess of 2.1 billion users, leading to the consumption of over one billion hours of video content daily, with more than 500 hours of video being uploaded every minute (13). Notably, the platform lacks expert supervision of uploaded videos due to its inherent nature. Moreover, videos can be sourced from diverse origins, resulting in varying levels of quality (14, 15).

Few studies have investigated teething-related YouTubeTM content. This study evaluated YouTube videos that parents watched during teething to learn about the

normal course of teething, its symptoms, and treatments. The purpose of this study was to evaluate the content and quality of the most relevant YouTube™ videos about teething.

**Contribution to the literature:** This study was conducted at a time when limited information was available about the quality of YouTube content related to pediatric dental health and aims to fill the missing information in this area. The research was conducted at a time when parents are increasingly turning to platforms such as YouTube to learn about their babies' health, highlighting the importance of quality and accessibility of online content in pediatric dental health. The importance of the study was determined by its focus on the problems parents face during the teething process of their babies and the reliability of online resources. Babies' teething period can be a stressful process for families, and access to accurate information can help families manage this process more easily. The wider significance of the research is that, with increasing access to health information online, it highlights the need for parents to be able to obtain reliable information from these sources and highlights the importance of reliable and quality content for health information. The originality of the study was demonstrated by assessing the quality of content presented about pediatric dental health on a popular platform such as YouTube, filling an important gap that could help parents obtain reliable information from online sources.

**H0 Hypothesis:** There is no statistically significant difference between the quality of YouTube videos on teething symptoms in infants uploaded by non-healthcare professionals and the quality of videos uploaded by healthcare professionals.

## MATERIAL and METHODS

As this study did not involve any interventions on human subjects or their materials, and the data analyzed were publicly accessible, ethical approval was not required. The Google Trends website (Google Trends, 2022, Alphabet, USA) (<https://trends.google.com>) was utilized to determine the most frequently searched term related to "teething" (16). The search settings were configured as "Worldwide," "Google Web Search," and "Past 5 years" Past five years. After multiple attempts to utilize potential keywords associated with teething, new keywords were derived by utilizing the relevant query table within the application. Comparative searches were performed using the keywords "teething," "tooth eruption," and "tooth eruption in infants." According to the comparative search results, the term "teething" was the most used (Google Trends, June 28, 2023).

Previous studies have found that individuals typically search for and watch approximately 60-200 videos, with an average of 30-60 videos viewed (2, 17). The cookies and previous search results were cleared before the search, and the first 150 videos were selected for review. Irrelevant

videos, advertisements, non-English videos, duplicates, and videos longer than 15 minutes were eliminated from the selection process. Considering that search data may vary at different time intervals (June 28, 2023), the Uniform Resource Locator (URL) of each video was copied, and two researchers analyzed the selected videos according to predetermined criteria. Inter-rater reliability between the researchers was evaluated using the kappa reliability index. Following the exclusion process, the remaining 46 videos underwent content analysis, DISCERN reliability scoring, and assessment using a five-point GQS. The evaluation of the videos encompassed various aspects, including the profession of the video sharer, type of video channel, age of the video, number of likes and dislikes, number of comments, purpose of the video, and references. Additionally, the videos were examined for information related to teething, both local and systemic symptoms, the teething process, and available treatment options.

Reliability scoring was based on five questions derived from the DISCERN, a scale used to evaluate healthcare-related instructions. The scoring comprised five questions, with a score of 0 for a 'no' answer and a score of 1 for a 'yes' answer.

The questions asked in the evaluation process were as follows (18).

1. Are the objectives of the video clear and effectively achieved?
2. Do the videos provide information from reliable sources?
3. Is the presented information balanced and free from bias?
4. Are additional sources of information provided for patients to reference?
5. Are uncertainties regarding the information addressed appropriately?

GQS was utilized to evaluate the overall quality of the videos. This scoring system is based on a five-point scale that assesses the usefulness of the videos and addresses viewers' general concerns. The scale is as follows (19).

1. Low quality: Videos with poor flow, lack of patient assistance, and overall low quality.
2. Low to moderate quality: Videos with weak flow, limited information provided for patients, and limited usefulness.
3. Moderate quality: Videos with moderate quality and flow, providing important information but not covering all significant topics. Moderately useful for patients.
4. Good quality: Videos with good quality and flow, covering the most important topics and benefiting patients. May have minor shortcomings.
5. Excellent quality: Videos with excellent quality and flow, presenting detailed, valid, and accurate information. Highly beneficial for patients.

Statistical analysis of the videos according to their sources was performed according to the Kruskal-Wallis test. A significance level of  $p = 0.05$  was set to detect notable differences between groups. Additionally, Mann-Whitney U test was performed to determine the source of these differences.

## RESULTS

Out of the initial 200 videos analyzed on YouTube, a total of 46 videos met the inclusion criteria and were included in this study. The remaining 154 videos were excluded

from the evaluation for various reasons, including being non-English, lacking audio, lacking video content, being irrelevant to the topic, or being repetitive. Descriptive statistics regarding the demographics of the 46 included videos are presented in Table I.

**Table I.**

Descriptive statistical characteristics of the included videos.

	N:	Mean	Min.	Med.	Max.	S.D.
Number of views	46	102470,17	19	31004	729824	162279,17
Video duration (in minutes)	46	251,28	31	169	866	197,54
Time elapsed since upload (in days)	46	1933,02	170	1683,5	5206	1321,20
Number of likes	46	621,82	0	106,5	6100	1203,03
Number of dislikes	46	42,47	0	17	242	61,08
Number of comments	46	43,56	0	7	390	85,58
GQS (Global Quality Scale) score	46	3,69	1	4	5	1,2
DISCERN score	46	3,13	0	3	5	1,35
Interaction index	46	1,14	-0,18	0,47	7,45	1,61
Viewing rate	46	8976,71	7	1451	112801	20865,19

N: Number of videos; S.D.: Standard deviation; Min.: Minimum; Max: Maximum

The videos analyzed in this study had an average of  $102.470 \pm 162.279$  views,  $622 \pm 1.203$  likes, and  $42 \pm 61$  dislikes and received  $44 \pm 86$  comments. Video uploaders; When examined by gender, it was seen that the number of women (80.60%) was higher than the number of men (17.40%). However, it was found that the gender variable did not make a difference between the groups ( $p > 0.05$ ).

The URL address, number of views, video duration (in minutes), time elapsed since upload (in days), number of likes, number of dislikes, number of comments, uploader source (dentists, healthcare institutions/employees, others), and gender of the narrator in each video included in the study were recorded. The interaction index [(number of likes–number of dislikes) / number of views  $\times 100\%$ ] and viewing rate [number of views/times elapsed since upload  $\times 100\%$ ] were calculated. Additionally, the parameters of the GQS, which provides information on the overall quality of the videos, were also calculated. Regarding the 46 videos included in the study

on YouTube related to "Teething," it was found that they were viewed an average of  $102.470 \pm 162.279$  times, liked  $622 \pm 1.203$  times, disliked  $42 \pm 61$  times, and received  $44 \pm 86$  comments. The GQS score for the videos was  $3.69 \pm 1.2$ , and the Discern score was  $3.13 \pm 1.35$ . The same researcher re-watched the videos, and the ICC coefficients for GQS and the reliability of the information indices were found to be 0.806 and 0.750, respectively. DISCERN, inter-researcher analysis for GQS scores Cohen Kappa score was 0.958 and 0.926 respectively and there was a high degree of reproducibility in terms of scoring. When classified according to the source of the videos, 13.04% ( $n=6$ ) were uploaded by dentists, 56.52% ( $n=26$ ) by healthcare institutions or employees (pediatricians, nurses, hospitals, psychotherapists), and 25% ( $n=13$ ) by other YouTube channels. In the evaluation based on the sources of the videos, no statistically significant difference was found between the groups ( $p > 0.05$ ) (Table II).

**Table II.** Evaluation of the videos according to their source

	Dentist (n = 6)					Others (n = 26)					Health employee (n = 14)					p
	Mean	Med.	S.D.	Min.	Max.	Mean	Med.	S.D.	Min.	Max.	Mean	Med.	S.D.	Min.	Max.	
Number of views	288,83	299,71	200	55	866	247,57	186	151,58	31	647	242,07	141,5	235,74	51	774	0,603
Video duration (in minutes)	1342	1180	830,10	176	2473	1874,8846	1445,5	1376,11	170	5206	2294,28	2314,5	1351,71	270	4220	,370
Time elapsed since upload (in days)	121106,33	203942,97	24013,5	282	519675	96121,15	33111,5	142405,57	55	542885	106274,29	27700,5	189487,5	19	729824	,981
Number of likes	424,83	91	591,66	14	1400	598,19	122	1249,82	1	6100	750,14	138,5	1354,43	0	4800	,912
Number of dislikes	62,83	15,5	87,61	0	198	37,07	12	57,42	0	242	43,78	30	58,04	0	217	,826
Number of comments	24	7,5	44,47	0	114	46,38	6,5	90,36	0	390	46,71	11,5	93,21	0	317	,865
GQS (Global Quality Scale) score	4,16	4,5	1,16	2	5	3,38	4	1,20	1	5	4,07	4	1,14	1	5	,077
DISCERN score	3,83	4	1,16	2	5	2,65	3	1,26	0	4	3,71	4	1,32	0	5	0,12
Interaction index	1,35	0,48	1,85	0,22	4,96	0,96	0,41	1,93	-0,18	7,46	0,98	0,54	1,17	0	5,21	0,75
Viewing rate	6054	1592	8557,04	160	21014	11020,28	1026,5	29631,03	7	112801	8550,8	1505	17545,94	10	84959	0,965

N: Number of videos; S.D.: Standard deviation; Min.: Minimum; Max: Maximum.

\* Kruskal-Wallis test p values. There was no significant difference between the groups as a result of the test ( $p > 0.05$ ).

When the videos were grouped according to the quality of information provided, it was determined that 6 (13.04%) videos had poor-quality content, 10 (21.74%) videos had moderate-quality content, and 30 (65.22%) videos had good-quality content (Figure 1).



Figure 1. Distribution of Videos by Source (n; percentage%).

When categorizing the videos based on the quality of the information provided, it was observed that 6 (13.04%) videos were uploaded by dentists, 14 (30.43%) videos were uploaded by healthcare professionals and institutions, and 26 (56.52%) videos were uploaded by other channels (Figure 2).

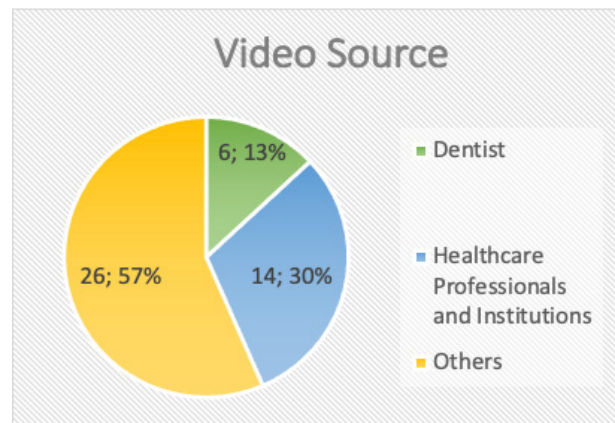


Figure 2. Distribution of videos according to the quality of information provided (n; percentage%).

Statistical analysis of the videos according to their sources was performed according to the Kruskal-Wallis test. There was a significant difference between the groups ( $p < 0.05$ ). Mann-Whitney U test was performed to determine the source of this difference. The results are presented in Table III. Videos with good-quality content were found to have a significantly longer duration than those with moderate and poor-quality content ( $p < 0.05$ ) Furthermore, videos of good and moderate quality had significantly higher view counts than those of poor quality. The interaction index, viewing rate, discern score, and GQS score showed significant differences among videos with good, moderate, and poor-quality content, with a decreasing trend observed in their respective values ( $p < 0.05$ ).

Table III. Statistical analysis of videos by content quality

	Dentist (n = 6)					Others (n = 26)					Health employee (n = 14)					p
	Mean	Med.	S.D.	Min.	Max.	Mean	Med.	S.D.	Min.	Max.	Mean	Med.	S.D.	Min.	Max.	
Number of views	105,33a	112	55,34	31	163	150,6a	132,5	98,27	55	397	314b	265	212	72	866	0,002*
Video duration (in minutes)	2347,83	1722,5	1848,98	687	5206	2261	2314	1314,52	623	4301	1740,7	1495	1213,25	422,0		0,446
Time elapsed since upload (in days)	8315a	4941,5	9703,55	313	26133	115858,9b	51697,5	140288,7	923	437021	116838,3b	33111,5	180638,49	19	729824	0,40*
Number of likes	29,33	32	16,65	1	48	422	137	462,98	4	1200	806,93	189,5	1434,35	0	6100	0,116
Number of dislikes	4,5	10,07	0	0	25	55,5	41,5	71,86	0	242	45,73	17	61,66	0	217	0,115
Number of comments	6,83	5,5	7,98	0	22	17,5	11	20	0	58	59,6	13	102,23	00	390	0,559
GQS (Global Quality Scale) score	1,33a	1	0,51	1	2	2,9b	3	0,31	2	3	4,43c	4	0,5	4	5	0,000*
DISCERN score	0,33a	0	0,51	0	1	2,9b	3	0,31	2	3	3,9c	4	0,8	4	5	0,000*
Interaction index	0,61	0,44	0,61	0,09	1,77	0,47	0,32	0,46	0,12	1,73	1,47	0,54	1,90	-0,18	7,46	0,277
Viewing rate	324a	258	279,58	39	786	6084b	1895,5	8147,48	112	25226	11671,5c	2282	25080,87	7	112794	0,049*

N: Number of videos; Mean: Mean, SD: Standard Deviation, Min: Minimum, Max: Maximum. p-values indicating significant differences based on the Kruskal-Wallis test are marked with an asterisk (\*). The Mann-Whitney U test was used for pairwise comparisons between groups. Lowercase letters within a row indicate similarities between groups, whereas different letters indicate differences between groups. Statistical significance was set at  $p < 0.05$ .

Table IV presents the results of the correlation analysis of the video parameters. Significant positive correlations were observed between the number of views, time since upload, interaction index, DISCERN score, and GQS score ( $p < 0.01$ ). A negative correlation was found

between the time since upload and interaction rate ( $p < 0.01$ ). Positive correlations were found between the number of views, likes, dislikes, comments, and viewing rates. Moreover, positive correlations were identified between the GQS, viewing rate, and DISCERN scores ( $p < 0.01$ ).

**Table IV.** Statistical analysis of videos by content quality

	Number of views	Video duration (in minutes)	Time elapsed since upload (in days)	Number of likes	Number of dislikes	Number of comments	GQS	DISCERN	Interaction index	Viewing rate
Number of views	1,0	-0,504**	0,0	0,1	-0,2	0,2	0,447**	0,1	0,447**	0,524**
Video duration (in minutes)	-0,504**	1,0	0,3	0,1	0,3	0,0	-0,623**	0,0	-0,2	-0,2
Time elapsed since upload (in days)	0,0	0,3	1,0	0,874**	0,846**	0,620**	-0,2	0,946**	0,1	0,3
Number of likes	0,1	0,1	0,874**	1,0	0,805**	0,760**	0,1	0,886**	0,2	0,2
Number of dislikes	-0,2	0,3	0,846**	0,805**	1,0	0,533**	-0,2	0,767**	0,1	0,1
Number of comments	0,2	0,0	0,620**	0,760**	0,533**	1,0	0,2	0,659**	0,2	0,2
GQS	0,447**	-0,623**	-0,2	0,1	-0,2	0,2	1,0	0,0	0,2	0,2
DISCERN	0,1	0,0	0,946**	0,886**	0,767**	0,659**	0,0	1,0	0,1	0,299*
Interaction index	0,447**	-0,2	0,1	0,2	0,1	0,2	0,2	0,1	1,0	0,843**
Viewing rate	0,524**	-0,2	0,3	0,2	0,1	0,2	0,2	0,299*	0,843**	1,0

\* $p < 0,05$  \*\*  $p < 0,01$ .

## DISCUSSION

The H0 Hypothesis of this study was rejected. A statistically significant difference was found between the quality of YouTube videos on teething symptoms in infants uploaded by non-healthcare professionals and the quality of videos uploaded by healthcare professionals.

Parents seek information about their infants' health by conducting online searches on websites, such as YouTube. The primary source of such research is healthcare professionals; however, the accessibility of medical information on the internet and the demand for remote healthcare services during the COVID-19 pandemic have led to a surge in the popularity of medical content on YouTube (20). Within the realm of pediatric dentistry, YouTube videos serve as a valuable source of information on various topics including oral hygiene, early childhood caries, and fluoride use (21-23).

The objective of this study was to analyze the content of YouTube videos focusing on teething symptoms in infants. With the rise in internet and social media usage, there has been a growing trend of both healthcare professionals and non-experts sharing videos related to teething symptoms in recent years.

When the videos were classified according to their sources, dentists, healthcare institutions and professionals (pediatricians, nurses, hospitals and psychotherapists) uploaded 69.56% ( $n = 32$ ) of the total videos. Bozkurt et al. (17) found in their study on impacted canine teeth that the rate of videos uploaded by health professionals (dentists, orthodontists, surgeons) to provide educational information was 42% ( $n = 26$ ). In a study evaluating 90 videos in 2020, Duman reported that 68.8% of the videos were uploaded by health-related professionals or websites. In

another study, the rate of videos uploaded by ordinary people was found to be 41.25% (12). As a result, YouTube videos on this topic were shared by different professional groups as well as non-professionals. Various parameters were employed to assess the reliability of these videos. The average GQS score for overall quality assessment was calculated as  $3.69 \pm 1.2$  which is similar to another study (2). Videos categorized as moderate quality may offer valuable information on certain aspects while neglecting other important topics, but still provide limited yet useful information for patients. In this study, the high prevalence of videos related to eruption symptoms shared by non-professionals had an impact on the average GQS score. Previous research has consistently demonstrated that most YouTube videos are uploaded by non-dental professionals and are characterized by low quality (24).

According to the DISCERN analysis of the examined videos in our study, the average score was calculated as  $3.13 \pm 1.35$ . The average DISCERN score of videos published by dental professionals was higher compared to those published by non-dental professionals. These findings indicate a higher level of reliability in the videos as assessed by the DISCERN analysis, but it should be noted that false information sharing is possible on YouTube because of the freedom of expression and often-uneditable nature of the content (25). Given the dynamic nature of YouTube, it is important to recognize that metrics, such as video views, likes, dislikes, and comments, can fluctuate over time and are susceptible to manipulation.

Although, unlike our study, another study found that medium quality video was the most common, statistical analysis of the relationship between the GQS score and the interaction index demonstrated significant differenc-

es among videos with good, moderate, and poor-quality information content. These findings are consistent with previous studies that have reported similar associations (2, 17, 26).

Statistically significant differences were observed among the groups when evaluating the videos based on their sources. Videos with good-quality information content were significantly longer in duration than those with moderate or poor-quality content. It was also observed that videos of good and moderate quality had significantly higher viewing counts than those of poor quality. Parents can acquire limited knowledge about their infants' teething symptoms, possible situations they may encounter during this process, experiential videos for comparison with peers, and brand-specific symptomatic treatments (2).

A statistically significant difference was found between the quality of YouTube videos on teething symptoms in infants uploaded by non-healthcare professionals and the quality of videos uploaded by healthcare professionals. The videos prepared by members of the medical profession tended to be complete and more accurate, and our study is similar to the study of Bezner et al., in this respect (14).

Our study has certain limitations. An evaluation was made based on the first results of the keyword research. At the end of each video, similar videos recommended by YouTube™ were ignored, and instead of these videos, the first search results were returned to determine the next video. In this context, the viewer's video experience may vary depending on individual video viewing habits.

Although there is a significant amount of dental eruption information available on the YouTube™ platform, our study does not directly investigate how this information is used by viewers. This gap may be the subject of future studies to evaluate how information obtained via the Internet contributes to patients' and parents' understanding of the diagnosis. Additionally, examining the role of other major social networks in digital information transmission may also be considered.

Given that internet use among parents will likely continue to increase, our findings highlight the continued need for quality information by patients, parents, and caregivers. Pediatric dentists, dentists, and other healthcare professionals should consider platforms such as YouTube™ to establish a foundation of reliable information.

## CONCLUSION

The quality of information on teething-related topics on YouTube varies, with videos posted by nonprofessionals, particularly those of low quality. Reliable YouTube videos published by pediatric health experts would serve as a valuable resource for parents who cannot access health-care facilities for various reasons such as pandemics. Further research and support are required in these areas.

### Ethics Committee Approval:

Not applicable.

### Author Contributions:

Concept - E.E.Ç., B.M.; Design - B.M.; Supervision - E.E.Ç.; Resources - B.M.; Materials - E.E.Ç., B.M.; Data Collection and/or Processing - E.E.Ç.; Analysis and/ or Interpretation - E.E.Ç.; Literature Search - E.E.Ç., B.M.; Writing Manuscript - E.E.Ç., B.M.; Critical Review - E.E.Ç., B.M.

### Conflict of Interest:

The authors have no conflict of interest to declare.

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