

# Evaluation of the General Level of Knowledge about COVID-19 Infection of Parents Who Visited a Pedodontics Clinic during the COVID-19 Pandemic

COVID-19 Pandemisi Esnasında Pedodonti Kliniğine Başvuran Ebeveynlerin COVID-19 Enfeksiyonu İle İlgili Genel Bilgi Düzeylerinin Değerlendirilmesi

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## ABSTRACT

**Objective:** It is predicted that droplet-transmitted diseases will cause pandemics in the future, as they had in the past. In order to control possible pandemics, people need to be aware of diseases that can be transmitted through droplets. For these reasons, this questionnaire study aimed to assess parents' general knowledge and attitudes of pediatric patients who visited the pediatric dental clinic during the coronavirus disease 2019 (COVID-19) pandemic.

**Methods:** In this study, the questionnaire was applied to 450 parents of children who visited the pediatric dental clinic for routine pediatric dental examination. The data analysis of our study was performed using the Statistical Package for the Social Sciences version 23.0 software program (SPSS Inc.; Chicago, IL, USA). Percentages and frequencies of responses to questions were obtained.

**Results:** Most parents were found to have adequate knowledge about the transmission routes and symptoms of COVID-19 infection. 95.1% of parents stated that dentists should use protective equipment (mask, glasses, protective clothing) during aerosol procedures. About 98.8% of parents agreed that parents and patients in dental clinics should wear their masks to cover the nose and mouth during a COVID-19 pandemic.

**Conclusion:** We think that participants were aware of masks, social distancing during the pandemic, and the symptoms and transmission routes of COVID-19 infection.

**Keywords:** COVID-19, dentistry, pandemic, protective equipment

## ÖZ

**Amaç:** Gelecekte geçmişte olduğu gibi damlacık yolu ile bulaşan hastalıkların pandemilere sebep olacağı öngörülmektedir. Olası pandemilerin kontrol altına alınabilmesi için insanların damlacık yolu ile bulaşabilen hastalıklara karşı bilinçlenmesi önemlidir. Çalışmamızın amacı COVID-19 pandemisi sürecinde çocuk diş hekimliği kliniğine çocuklarının diş rahatsızlığı nedeniyle başvuran ebeveynlerin COVID-19 enfeksiyonu hakkındaki yaklaşımları ve bilgi düzeyleri hakkında bilgi sahibi olmaktır.

**Yöntemler:** Çalışmamızda çocuğunu dental muayene amacıyla çocuk diş hekimliği kliniğine getiren 450 ebeveyne anket uygulanmıştır. Elde edilen veriler SPSS versiyon 23.0 yazılım programı (SPSS Inc.; Chicago, IL, ABD). Yüzde ve frekans değerleri kullanıldı.

**Bulgular:** Ebeveynlerin çoğunun COVID-19 enfeksiyonunun bulaş yolları ve belirtileri hakkında bilgi düzeylerinin yeterli olduğu gözlenmiştir. Ebeveynlerin %95.1'i hekimlerin aerosollü işlemler sırasında koruyucu ekipman (maske, gözlük, koruyucu kıyafet) kullanması gerektiğini bildirmiştir. Ebeveynlerin %98.8'i COVID-19 pandemisi esnasında dental kliniklerde ziyaretçilerin ve hastaların maskelerini burnu ve ağızı kapatacak şekilde takmaları gerektiğini belirtmiştir.

**Sonuç:** Katılımcıların pandemi döneminde maske ve mesafe konusunda bilinçlendiğini ve COVID-19 enfeksiyonun belirtileri ve bulaş yolları konusunda bilgi sahibi olduklarını düşünmekteyiz.

**Anahtar Kelimeler:** COVID-19, diş hekimliği, pandemi, koruyucu ekipman

## INTRODUCTION

On March 11, 2020, the World Health Organization (WHO) announced that the coronavirus disease 2019 (COVID-19) novel coronavirus outbreak had reached a critical juncture, warranting classification as a global pandemic and a matter of international public health concern<sup>1</sup>

During the pandemic, many countries took various measures to try to prevent COVID-19 from spreading. Similar pandemics have occurred in the past, and many prevention have been taken in this pandemic.<sup>2</sup> The primary strategy has been to reduce the burden on the health-care system (especially beds and ventilators, etc.) and to find ways to slow the spread of viral pathogens. These preventions include implementing rules such as social distancing, hand hygiene, and wearing masks.

During the COVID-19 pandemic, it was observed that protective measures such as social distancing and the use of masks were generally taken. On the other hand, a group of people were observed who thought there was no need to take these protective measures, did not wear masks, and ignored social distancing. Likewise, during this pandemic period, there have also been people who avoided going to any hospital.

It is predicted that droplet-transmitted diseases will cause pandemics in the future, as they have in the past. In order to control possible pandemics, it is important to increase people's awareness of droplet-transmitted diseases.<sup>3</sup> Therefore, it is essential to determine the level of public knowledge about COVID-19. In addition, parents are a particular group, and their behavior is important.<sup>4</sup> Therefore, parents, especially parents of children with systemic diseases, need to have a high level of knowledge to protect their children from pandemics individually. Although the COVID-19 vaccine has been found and the number of cases has decreased, people with chronic and systemic diseases are still at risk of COVID-19. Coronavirus disease 2019 infection in children shows symptoms similar to adults, but symptoms may be milder.<sup>5</sup> This situation is of great concern to pedodontists due to aerosol exposure during dental treatment and close working.

This questionnaire study aimed to assess the general knowledge and attitudes of parents of pediatric patients who visited the Pediatric Dental Clinic during the COVID-19 pandemic.

## MATERIAL AND METHODS

The present questionnaire study was approved by the local ethics committee for clinical research at Tokat Gaziosmanpaşa University (Date: 21.10.2021, Number: 83116987-863, Registration Number: 21-KAEK-222).

This prospective study was administered to the parents of pediatric patients (aged 0--14 years) who visited the Pediatric Dental Clinic of Tokat Gaziosmanpaşa University Faculty of Dentistry for routine pediatric dental examination between 28.10.2021 and 24.12.2021. The inclusion criteria were as follows: mentally healthy parents and children, parents who could complete/understand the questionnaire, and agreed to participate in the study. Questionnaires with incomplete answers were recorded as missing data and excluded from the study.

Before inclusion in the questionnaire study, written informed consent was obtained from the parents indicating that they

agreed to participate in the study. The parents completed the questionnaires in the waiting room before the dental examination of the participant's child. Privacy and confidentiality were strictly upheld, with no disclosure of individual outcomes.

A questionnaire consisting of 3 sections was prepared for this study. In the first part of the questionnaire, there are questions about socio-demographic information; in the second part, there are 10 questions about the evaluation of parents' level of knowledge about COVID-19 infection; and in the third part, there are questions that include 5 written questions in the second part translated into visual questions. The purpose of adding the third section to the questionnaire was to determine the consistency of the participants' answers while filling out the questionnaire.

The adequacy of the content of the questionnaire and the accuracy of the answers were evaluated by 2 pediatric dentists and 1 oral diagnostician before the study, taking into account the guidelines of the Ministry of Health of the Republic of Turkey<sup>6</sup> titled "Guidelines for working in health institutions and infection control measures" and the guidelines published by the WHO.<sup>7</sup> A Turkish language expert evaluated the clarity of the understanding of the questions. Based on the comments made by these experts, the questionnaire was designed with 15 questions and questions to obtain demographic data. A pilot test was conducted to assess the accuracy and clarity of the questions. Fifteen parents completed the questionnaire. After each questionnaire was completed, parents were asked if any questions needed to be understood while filling out the questionnaire. The questionnaire was finalized according to the feedback.

### Power Analysis

The number of participants was calculated using the G-Power sample size calculator (Universität Kiel, Germany). A precision of 3%, a population size of 10 600, and a 95% confidence interval were used, and the minimum required sample size was calculated as 385. The effect size was derived from the reference.<sup>8</sup>

### Statistical Analysis

The data obtained in our study were analyzed using the Statistical Package for the Social Sciences version 23.0 software program (SPSS Inc.; Chicago, IL, USA). Percentage and frequency values of the answers to the questions were obtained.

## RESULTS

A total of 485 parents participated in the study and completed the questionnaires. However, 35 questionnaires were excluded from the analysis due to missing information. Consequently, 450 questionnaires were considered for evaluation. The distribution of responses to the questionnaires is presented in Tables 1–3, showing frequencies and percentages.

About 84.2% of the participants were young adults between 20 and 44 ages. About 19.1% of the participants graduated from primary education, 53.1% from secondary education, and 27.8% from higher education (Table 1).

In our study, a high proportion of participants (88.1%) and their children (94.1%) did not have any systemic disease (Table 1).

A high rate of participants correctly answered questions about the symptoms (Q1, Q3) and transmission routes (Q2) of COVID-19 infection. Details of the data of the answers to these questions are given in Table 2.

A high proportion of participants correctly answered questions about mask use (Q4, Q5) and social distance (Q8) (Table 2).

To the question, “Q6. What mask should the dentist wear when applying aerosolized (water-scattering) procedures during the COVID-19 pandemic?” 62.9% of the parents answered as specialty masks and 35.1% as surgical masks (Table 2).

To the question, “Q7. During the COVID-19 Pandemic, do dentists need protective clothing, masks, and glasses in aerosol (water-scattering) procedures?” 95.1% of the participants answered yes (Table 2).

To the question, “Q9. Has your child’s tooth brushing frequency changed during the COVID-19 Pandemic?” 51.1% of the parents answered no, it has not changed, while 40.7% answered yes, it has increased (Table 2).

**Table 1. Frequency and Percentages of Sociodemographic Data of Parents**

PART 1: Questions About Parents' Sociodemographic Information			
		n	%
Age	20-44	379	84.2
	45-54	54	12
	55-74	17	3.8
Gender	Female	279	62
	Male	171	38
Education	Primary education	86	19.1
	Secondary education	239	53.1
	Higher education	125	27.8
The gender of the child you brought to our clinic today	Female	248	55.1
	Male	202	44.9
The age of the child you brought to our clinic today	0	1	0.22
	2	1	0.22
	3	10	2.22
	4	14	3.11
	5	29	6.44
	6	50	11.11
	7	33	7.33
	8	49	10.9
	9	52	11.55
	10	53	11.8
	11	39	8.66
	12	55	12.22
	13	55	12.22
	14	9	2
The number of siblings of the child you brought to our clinic today	0	35	7.8
	1	116	25.8
	2	156	34.7
	3	99	22
	4	35	7.8
	5	5	1.1
	6	3	0.6
	7	1	0.2
Does your child have any chronic diseases diagnosed by a doctor? (More than 1 option can be selected.)	None	447	94.1
	Hypertension (high blood pressure)	1	0.2
	Diabetes	2	0.4
	Asthma/coah	12	2.5
	Cancer	0	0
	Immune system diseases	0	0
	Heart diseases	3	0.6
	Others (Specify ...)	10	2.1
Do you have any chronic diseases diagnosed by a doctor? (More than 1 option can be selected.)	None	422	88.1
	Hypertension (high blood pressure)	10	2
	Diabetes	9	1.8
	Asthma/coah	16	3.4
	Cancer	1	0.2
	Immune system diseases	2	0.4
	Heart diseases	6	1.3
	Others (Specify ...)	13	2.8

**Table 2. Frequency and Percentages of Data on Parents' Level of Knowledge About COVID-19 Infection**















PART 2: Questions Related to the Evaluation of Parents' Level of Knowledge About COVID-19 Infection				
		n	%	
Q1. What are the symptoms of COVID-19 infection? (More than 1 option can be selected.)	Fever	450	13.3	
	Cough	440	13	
	Shortness of breath	441	13	
	Diarrhea	290	8.6	
	Vomiting	244	7.2	
	Runny nose	219	6.5	
	Sore throat	376	11.1	
	Redness of the eyes	229	6.8	
	It may occur without symptoms	275	8.1	
	Joint or muscle pain	406	12	
	I don't know	13	0.4	
	Q2. What are the transmission routes of COVID-19 infection? (You can choose more than 1 option.)	Inhalation of respiratory droplets during coughing, sneezing, breathing	450	19.4
		Saliva	392	17
		Eye	202	8.7
Blood		180	7.8	
Fecal-oral route		173	7.5	
Contact with a sick person where the virus is alive		383	16.5	
Contact with surfaces		358	15.5	
Sexually transmitted		175	7.6	
I don't know		1	0.0	
Yes		369	82	
Q3. COVID-19 infection in children has similar symptoms to adults, but symptoms may be milder.	No	8	1.8	
	I don't know	73	16.2	
	Yes	440	97.7	
Q4. Is it necessary to wear a mask during the COVID-19 pandemic?	No	6	1.5	
	I don't know	4	0.8	
	N95	45	10.4	
Q4.(1) If yes, which type of mask should be used?	FFP2	6	1.4	
	Surgical mask	267	62.1	
	Cloth mask	44	10.23	
	I don't know	68	15.82	
	Yes	445	98.8	
Q5. During the COVID-19 pandemic, are patients and visitors to dental clinics required to wear face masks that cover the mouth and nose?	No	2	0.5	
	I don't know	3	0.7	
	Surgical mask	158	35.1	
Q6. What mask should the dentist wear when applying aerosolized (water-scattering) procedures during the COVID-19 pandemic?	Specialty mask (N95-FFP2)	283	62.9	
	Surgical mask and specialty mask	9	2	
	Yes	428	95.1	
Q7. During the COVID-19 Pandemic, do dentists need protective clothing, masks, and glasses in aerosol (water-scattering) procedures?	No	12	2.6	
	I don't know	10	2.3	
	Yes	438	97.3	
Q8. Should there be a social distance of at least 1 meter between seats in waiting rooms of dental clinics during the COVID-19 pandemic?	No	4	0.8	
	I don't know	8	1.9	
	Yes, it increased	183	40.7	
Q9. Has your child's tooth brushing frequency changed during the COVID-19 pandemic?	Yes, it decreased	37	8.2	
	No, it has not changed	230	51.1	
	Yes, it increased	172	38.2	
Q10. Has your tooth brushing frequency changed during the COVID-19 pandemic?	Yes, it decreased	12	2.7	
	No, it has not changed	266	59.1	

COVID-19, coronavirus disease 2019.

To the question “Q10. Has your tooth brushing frequency changed during the COVID-19 pandemic?” 59.1% of the parents answered no, it has not changed, and 38.2% answered yes, it has increased (Table 2).

Visual questions (Q11-15) in the third section on masks, protective equipment, and social distancing were answered correctly at

Table 3. Comparison of the Answers Given to the Written and Visual Questions Evaluating the Level of Knowledge of Parents About COVID-19 Infection

Visual Questions	n (%)	Written Questions	n (%)
Q11. During the COVID-19 Pandemic, which picture shows how a dentist should dress for aerosol (water-splashing) procedures?	 394 (87.6)	Q7. During the COVID-19 Pandemic, do dentists need protective clothing, masks, and glasses in aerosol (water-scattering) procedures?	Yes—428 (95.1) No—12 (2.6) I don't know—10 (2.3)
Q12. During the COVID-19 Pandemic, which mask shown in the pictures should the dentist use for aerosol procedures?	 382 (84.9)	Q6. What mask should the dentist wear when applying aerosolized (water-scattering) procedures during the COVID-19 pandemic?	Surgical mask—158 (35.1) Specialty mask (N95–FFP2)—283 (62.9) Surgical mask and specialty mask—9 (2)
Q13. Which of the masks shown in the pictures did you use during the COVID-19 pandemic?	 68 (15.1)	Q4. Is it necessary to wear a mask during the COVID-19 pandemic?	Yes—430 (95.6) No—14 (3.1) I don't know—6 (1.3)
	 55 (12.2)	Q4.(1) If yes, which type of mask should be used?	N95—45 (10.4) FFP2—6 (1.4) Surgical mask—267 (62.1) Cloth mask—44 (10.23) I don't know—68 (15.82)
	 4 (0.9)	Q5. During the COVID-19 pandemic, are patients and visitors to dental clinics required to wear face masks that cover the mouth and nose?	Yes—445 (98.8) No—2 (0.5) I don't know—3 (0.7)
Q14. Which of the given images is the correct use of the mask?	 392 (87.1)		
	 0 (0)		
	 1 (0.2)		
	 46 (10.2)		
Q15. Which of the pictures is incorrect in terms of social distancing during the COVID-19 pandemic?	 11 (2.5)	Q8. Should there be a social distance of at least 1 meter between seats in waiting rooms of dental clinics during the COVID-19 pandemic?	Yes—438 (97.3) No—4 (0.8) I don't know—8 (1.9)
	 17 (3.8)		
	 387 (86)		
	 45 (10)		
	 1 (0.2)		

COVID-19, coronavirus disease 2019.

a high rate. Details of the data of the answers given to these questions are given in Table 3.

When the answers given to the picture questions and the written questions corresponding to these picture questions were examined, it was seen that the answers were compatible with each other (Table 3).

## DISCUSSION

In our study, the general knowledge level of the parents who visited the pediatric dental clinic during the COVID-19 pandemic was evaluated about COVID-19 infection. It is seen that our participants, most of whom are healthy and young adults with an intermediate level of education, have sufficient knowledge about

COVID-19 infection and the measures to be taken to protect against this infection, and they know that COVID-19 infection shows symptoms similar to adults in children, but the symptoms may be milder.

In the study conducted by Ceyhan et al,<sup>9</sup> most participants stated that the symptoms of COVID-19 infection were fever, shortness of breath, and dry cough. Similarly, in our study, participants chose fever, cough, and shortness of breath as the most common symptoms of COVID-19 infection. In the study conducted by Kasemy et al,<sup>10</sup> participants stated that fever was the main symptom among the symptoms of COVID-19 infection. Similarly, in our study, fever was the most frequently selected symptom among the symptoms of infection.

In our study, the most frequently selected ways to transmit COVID-19 infection were coughing, sneezing, inhaling respiratory droplets during breathing, saliva, and contact with a sick person. In the study conducted by Al-Hanawi et al,<sup>11</sup> the majority of participants stated that the transmission of infection occurs through respiratory droplets when infected people cough and sneeze. In the same study, 43.77% of the participants stated that people should use surgical masks to prevent infection. Similarly, in the study by Bates et al,<sup>12</sup> 47.2% of the participants stated that ordinary citizens should wear surgical masks. In the study conducted by Önal et al,<sup>13</sup> 91.6% of the participants it was stated that they used their masks to cover their mouth and nose. In the present study, most participants stated that it is necessary to wear a mask to cover the mouth and nose during the pandemic and that the type of mask to wear is a surgical mask.

In the study by Ahmed et al,<sup>14</sup> 60% of the parents they were reported that dentists should use personal protective equipment. In the study by Sürme et al,<sup>15</sup> almost all participants felt safe because the physician's protective clothing could prevent COVID-19 transmission. In the study conducted by Farsi and Farsi,<sup>16</sup> 82.4% of the parents stated that using personal protective equipment by dentists and ancillary staff is essential, and 77.7% of the participants answered that all visitors should use masks outside the treatment. Our study also observed that the parents knew that physicians should use protective equipment and special masks during aerosolized procedures.

In the study conducted by Farsi and Farsi,<sup>16</sup> participants stated that paying attention to social distancing in patient waiting rooms is very important. In our study, it was observed that the parents knew that social distancing should be kept in the clinics' waiting rooms.

In the present study, it was determined that participants had a high level of knowledge about COVID-19 infection. When the answers given to the visual questions and the written questions corresponding to these visual questions were examined, it was seen that the answers were compatible with each other. Therefore, the answers given by the participants to the questions are consistent.

A study conducted by Karaarslan et al<sup>17</sup> observed that the frequency of tooth brushing of adults increased significantly during the pandemic. In this study, it was reported that the first reason for the increase in tooth brushing frequency during the pandemic period was that individuals thought there was a relationship between COVID-19 infection and oral hygiene and that good oral hygiene would reduce the risk of infection. The second reason was that individuals feared their oral health would deteriorate

because they could not visit the dentist due to the pandemic. According to the authors, first, these findings show that tooth brushing behavior is a multidimensional phenomenon influenced by perceived risks and benefits. Second, people engaged in inappropriate precautionary behaviors not mentioned or documented in the literature as a method of infection control to cope with a new disease. Third, perceived COVID-19 risk is positively associated with a positive response to toothbrushing behavior. Fourth, individuals' toothbrushing behavior changed rapidly and dramatically during the pandemic. Fifth, oral health care has not been separated from general health care during the pandemic, and oral health should be seen as a component of general health. Sixth, the pandemic can contribute to raising awareness of the importance of oral health.<sup>13</sup>

In the study conducted by Campagnaro et al<sup>18</sup> in June 2020, when the number of cases was high in Brazil, it was reported that 83.5% of children brushed their teeth during the pandemic. In our study, it was observed that the frequency of tooth brushing of both parents and children tended to increase rather than decrease. In addition, in our study, the tooth brushing frequency of children increased slightly more than that of their parents. This may be due to parents acting as the primary practitioners or supervisors of children's daily oral care and the possibility of not receiving dental treatment during the pandemic.<sup>19</sup>

The main limitation of this study is its single-center design. This situation may have limited the generalizability of the results to the whole population. Despite this limitation, the results of the study show parents' general level of knowledge about COVID-19 infection provides valuable information.

The participants have become aware of masks and distancing during the pandemic and know the symptoms and transmission routes of COVID-19 infection.

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**Ethics Committee Approval:** Ethics committee approval was received for this study from the Tokat Gaziosmapaşa University Clinical Research Local Ethics Committee (Date: 21.10.2021, Number: 83116987-863, Registration Number: 21-KAEK-222).

**Informed Consent:** Written informed consent was obtained from parents who participated in this study.

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