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Øzhayat, Esben Boeskov

Publication date: 2008

Document Version
Early version, also known as pre-print

Citation for published version (APA):
Decision Making in Oral Rehabilitation Using an Interview Method

Esben B. Øzhayat1, Klaus Gofredsen1, Beth Elverdam2 and Bengt Owall1

1. Department of Oral Rehabilitation, University of Copenhagen, Denmark
2. Institute of Public Health, University of Southern Denmark, Odense, Denmark

Materials and methods

Fifty-seven patients were included in the study. The participants should be in need for an extensive oral rehabilitation and should have undergone a traditional examination/interview. The number of teeth, number of occluding teeth, region of missing teeth and removable dental prostheses (RDP), if any, were recorded. The SEIQoL-DW included four steps: (1) Generation of cues by interview and selection of the five most important cues (2) Evaluation of the status of the five chosen cues on Visual Analogue Scale (3) Evaluation of the relative importance of the five cues using the DW-instrument (Fig.1) (4) Calculation of a score for each cue and an overall SEIQoL-DW score for each patient. For each participant, cues regarding reason for demanding treatment, symptoms, wishes and expectations from the traditional history taking, were recorded. The OHP (15) consisted of 49 questions. The patient answered how often a problem had occurred during the past month. A score from 0 to 4 was given to each answer depending on the level of occurrence. An overall OHP score were summarized (9 and 96).

The SEIQoL-DW method showed a potential for generating useful information in the oral rehabilitation decision making process. The method resulted in more cues and additional information compared to the traditional history taking and the OHP questionnaire. The status of the teeth did not influence the volume of information generated by the SEIQoL-DW. A high percentage of the participants were positive towards the use of the SEIQoL-DW method.

References


Conclusions

Fifteen percent of the participants were positive towards the use of the SEIQoL-DW method.