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Knowledge of dental ethics and jursiprudence among dental professionals

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Abstract

Aim: To assess the knowledge of dental ethics and jurisprudence among dental professionals.

Background: Ethics is the study of the ideal human character and conduct in circumstances when a distinction between right and wrong should be made. Dental jurisprudence is a set of legal regulations set forth by each state's legislature describing the legal limitations and regulations related to the practice of dentistry.

Materials and methods: The present study is a descriptive cross-sectional survey of 324 dental practioners, including students from CRI. A self-structured, close-ended questionnaire was administered that consisted of 15 questions was included. The questions were created through an online google form, and it was circulated among the study participants through online mode. With the use of statistical analysis tool SPSS software, the data were collected in a systematic manner.

Results: The present study is a descriptive cross-sectional survey of 324 dental practioners, including students from CRI. In the current study, over 91% of the participants have stated that dental ethics deals with moral studies of dentists towards his colleagues, patients and society, while 40% of the participants stated that COPRA act is not applicable to hospitals that provide free treatment

Conclusion: The current study brought attention to dental practioners and show lack of knowledge in dental ethics and law. It highlights the need for further educational initiatives and curriculum revisions that put an emphasis on morality, jurisprudence, and legal issues relevant to clinical practise.

Keywords: Dental Ethics; Jurisprudence; Dental Professionals; Law

1. Introduction

The healthcare industry has historically faced ethical challenges. Since medicine has been practised, healthcare professionals have had to deal with ethical dilemmas [1]. These days, its scope has expanded to include matters that need for careful consideration on the part of every practitioner. Everyday clinical practice requires the use of moral principles and knowledge of medical ethics. The autonomy and responsibility for the results of the therapy must reflect the moral principles of the practitioners in instances where there is a moral grey area, such as choosing the sort of intervention. A capacity for critical judgement is underpinned by professional, ethical norms that go beyond statutory legislation to guarantee that treatment choices are well-founded and suitable[2].

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The field of dentistry has developed considerably. From a stage of undifferentiated profession to a degree of advanced professionalism, it has developed. Dentistry has undergone changes during this time, accepting new ideas and adhering to rapidly evolving technology while letting go of outdated ideas and practises[3]. The profession's commitment to a Code of Ethics is one of its traits. The Greek word ethos, which means custom or character, is the root of the English word ethics. The term for custom in Latin is mos. As a result, moral philosophy is another name for ethics. Ethics is referred to as a branch of philosophy that addresses moral behaviour and judgement. It is the philosophy of human conduct, a way of outlining and assessing the fundamental ideas that can be used to address issues with behaviour[3].

Ethics is a science of ideal human character and behaviour *in situ* where the distinction should be made between what is right and wrong, duty must be followed, and good interpersonal relations should be maintained [4].

In many nations, health practitioners now receive ethical instruction as part of their training, and the number of ethics experts and committees has increased. However, the number of public complaints has been rising recently. Although few health professionals received thorough training, it is still expected of them to be aware of these factors and to put them into practice [5]. Dental ethics is a moral obligation that encompasses professional conduct and judgment imposed by the members of the dental profession. The dentists (Code of Ethics) regulations were laid down by the Dental Council of India (DCI) in 1976 and later it was revised in the year 2014. It is the duty of every registered dentist to read these regulations, understand his responsibilities, and abide by the same [6].

The science or philosophy of law that examines legal principles and legal relationships is known as jurisprudence. Three branches of jurisprudence—analytical, social, and theoretical—can be distinguished. The analytical branch establishes concepts and recommends procedures that allow one to understand the legal system as a logical, internally consistent structure. The sociological branch investigates how the law actually affects society and how social phenomena affect the substantive and procedural components of the law. The theoretical branch assesses and critiques law in light of the predetermined values or objectives [7].

Dental jurisprudence is a set of legal regulations set forth by each state's legislature describing the legal limitations and regulations related to the practice of dentistry, dental hygiene, and dental assisting [1].

Dental professionals are expected to behave professionally according to dental ethics, which is a moral commitment. The Dental Council of India (DCI) established the dental regulations (Code of Ethics) in 1976, and they were later updated in 2014. Every dentist with a licence must be aware of and follow these obligations [8]. Dental jurisprudence is a body of laws created by each state's legislature that specify the legal restrictions and laws governing dentistry, dental hygiene, and dental assisting. The statutory control of the dental profession is a direct concern of the Dentists Act of 1948. Dental practise is additionally governed by the Indian Penal Code, the Indian Contracts Act, and the Consumer Protection Act (COPRA). To operate a legally and medically competent practise, dentists must be thoroughly knowledgeable about these actions[9]. The present study aims to evaluate the knowledge regarding ethics and jurisprudence for the practice among dental students in Tiruvallur.

2. Material and methods

The present study is a descriptive cross-sectional survey of 324 dental practioners, including students from CRI. A pretested, self-structured, close-ended questionnaire was administered that consisted of 15 questions was included. The questions were created through an online google form, and it was circulated among the study participants through online mode. The data were collected systematically and analysed and statistical analysis was done using SPSS software version 23.0.

2.1. Inclusion criteria

All the practioners willing to participate in the study were considered in the inclusion criteria

2.2. Exclusion criteria

The exclusion criteria included the students and practioners who refused to participate.

2.3. Ethical approval

The Institutional Review Board approved the study protocol and obtained ethical approval.

2.4. Data collection and analysis

The questionnaire was provided to participants through google survey form. The students were told to approach the investigator immediately in case of any doubts regarding any of the questions in the questionnaire survey. With the use of statistical analysis tool SPSS software version, the data were collected in a systematic manner.

3. Results

The present study is a descriptive cross-sectional survey of 324 dental practioners including students from CRI.

In the current study, over 91% of the participants have stated that dental ethics deals with moral studies of dentists towards his colleagues, patients and society. Also, 44% of the participants have stated that it is ethical to display dentists photograph on the name board while 40% of the participants stated it is unethical. About 88% of the participants have stated that it is ethical for a dentist to display their registration number in certificates and bill receipts, 10% of the participants were not aware of it.

In the present study, over 55% of the participants have stated that if a treatment appears beyond their skill, they would refer to dental specialist while 23% of the participants stated that they would attempt the procedure. About 40% of the participants didn't know that COPRA (Consumer Protection Act) was not applicable to free hospital-based treatment, while 40% of the participants stated that COPRA act is not applicable to hospitals that provide free treatment,

4. Discussion

The current study was a modest attempt to look at dental practitioners compliance with dental ethics and law. The study was the first of its sort, and there wasn't much existing literature to compare it to. Most of the participants had average knowledge regarding the year in which the Dentists Act was given and that the dentists (Code of Ethics) regulation was given by the DCI.

In our study, over 91% of the participants have stated that dental ethics deals with moral studies of dentists towards his colleagues, patients and society, stating the participants had a satisfactory knowledge about ethics. With respect to the code of ethics by DCI, of section 3.3 when questioned whether dentists could receive gifts from pharmaceutical companies, 35% of the participants have stated that they could receive gifts, while 50% of the participants have correctly stated that it isn't ethical to get gifts and 15% of them didn't know. According to DCI rules of selling drugs in clinic, over 56% of the participants have correctly stated it is not ethical to sell or supply drugs in their clinic and 41% of the participants have stated it was ethical to sell drugs in their clinic, reflecting that participants haven't gained much knowledge about drug selling, similar results are seen in the study conducted by Janakiram C [10].

In our study, over 56% of the study participants stated that dental clinic can be named as dental hospital when there are 3 registered dental practitioners in the setup, while only 31% of the participants had the knowledge in naming a clinic as dental hospital by stating that 'when the patients are maintained for several days for follow-up'. Also, 44% of the participants have stated that it is ethical to display dentists photograph on the name board while 40% of the participants have responded correctly stating it is unethical, while 15% of the participants weren't aware of it. About 88% of the participants have stated properly that it is ethical for a dentist to display their registration number in certificates and bill receipts, 10% of the participants were not aware of it. According DCI, Section 3.8, about 67% of the participants have correctly stated that dental practitioner should announce the treatment fees before the treatment and 27% of them stated that their fees should be quoted after the treatment which is wrong, results are accordance with the study conducted by Kotrashetti VS [11]. The respondents gave diversified opinions when asked about consultations and treatments to fellow dentists. With code of ethics, section 6, chapter 4 the present study has stated that 28% of the study participants have responded correctly that it could not be mandatory to offer free consultation to fellow dentist, similar results are seen in the study conducted by Kesavan, R., et al [9]. About 65% of the participants have stated that it is unethical to display or advertise dental clinic in electronic media, similar results are seen in the study conducted by Janakiram C [10]. while 19% of the participants have said it is ethical to advertise dental clinic. About 59% of the participants had knowledge that patients record should be maintained for period 3 years.

About 40% of the participants didn't know whether COPRA (Consumer Protection Act) was not applicable to free hospital-based treatment, at the same instant 40% of the participants have wrongly stated that COPRA act is not applicable to hospitals that provide free treatment, results show that participants lacked knowledge about COPRA which are less compared to the study conducted by Singh et al [11].

In the present study, over 55% of the participants have stated that if a treatment appears beyond their skill they would refer to dental specialist in accordance with code of ethics, while 23% of the participants stated that they would attempt the procedure and 22% of the participants would alter the treatment plan. Also, 58% of the participants have stated that they were aware that dental council may remove registration of the practioner for a specific period if any case of professional misconduct.

5. Conclusion

According to the current study, dental practioners have just average knowledge about dental ethics, jurisprudence and law. We must approach this problem in a realistic and significant way. It highlights the need for greater ease of access to information for dentists, CDE programmes, more thorough national surveys, curriculum changes that place a greater emphasis on ethics, jurisprudence, and legal issues pertaining to clinical practise, as well as clinician interest in staying informed of newer and changed rules and regulations.

Compliance with ethical standards

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Disclosure of conflict of interest

No conflict of interest.

Statement of ethical approval

The present research work does not contain any studies performed on animals/humans subjects by any of the authors.

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