

ETHICAL PRACTICES OF DENTISTS IN PUNE CITY: A CROSS SECTIONAL STUDY

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Abstract

Introduction: Every professional body has its own code of conduct for its members. Dental profession in India is regulated by the Dental Council of India (DCI) under the aegis of the Ministry of Health and Family Welfare, Government of India. DCI; a statutory body formed by an act of parliament- the Dentists Act, 1948 (XVI of 1948). Crowding of dentists across cities leads to unhealthy competition and commercialization. This leads to violating the code of conduct put forth by the state dental councils and many of the norms are openly flouted and rules randomly bent. The objective of the present study is to assess the amount of violation of the code of conduct by the dental clinics with respect to the clinic name board and advertisement, in and around Pune city, by an on-site survey. **Materials and methods-**Ethical clearance was obtained from the Ethics Committee of M.C.E society, Azam Campus, Pune. The study consisted of questions regarding the size of the dental clinic board, attractive symbols or wordings, qualifications other than the academic ones, and advertisements of the clinics through media or sign boards. In all, 123 clinics were observed. Statistical analysis was carried out using SPSS 22.0 (Chicago, U.S.A). **Results-**There were in all 123 clinics (60- BDS and 63- MDS). More BDS practitioners faulted the regulations with respect to size of the sign board, slogans on the board- like “family dentists”, “tooth designing”; fixing the sign board far away from the place of practice- at the pharmacist. Higher percentage of MDS practitioners advertised through media for promoting their clinics compared to the BDS practitioners. Overall more than half of the dentists mentioned their place of study and the university from where they obtained their degrees. Almost 25% mentioned that they had obtained gold medal in their academics and a few of them also specified the subject in which they won the medals. **Conclusion:** The current study highlights the violation of codes by dentists in Pune city. It also shows that post graduates are also violating norms. It is up to the DCI, to take appropriate steps including the earliest revision of its norms and its supervision of its strict adherence.

Keywords- DCI, Dentists, Ethics, Pune

1. INTRODUCTION

Dental ethics is defined as “a philosophy of human conduct, a way of stating and evaluating principles by which problems of behaviour can be solved”.^[1] Moral principles are governed by ethics and when brought into an obligation becomes law. Ethics is essential for establishing and


maintaining an honourable behaviour pattern that is acceptable to the society.[2] Therefore it helps us to decide what is morally right and follow a pattern of indispensable honesty, especially important in the field of health care. Even though dental ethics is an unwritten code, there are certain guidelines that have been laid down for information of members of the profession.[3] Every professional body has a specific code of conduct for its members. Dental profession in India is regulated by the Dental Council of India (DCI) under the aegis of the Ministry of Health and Family Welfare, Government of India. DCI; a statutory body formed by an act of parliament- the Dentists Act, 1948 (XVI of 1948). It registers, regulates, and monitors the dental practice.[4] The codes of ethics are a set of principles of professional conduct, a benchmark to which the dentist must aspire when fulfilling their duties to their patients, public, profession and colleges which is laid down by the DCI. It promotes ethical conduct, professional responsibility and facilitates dialogue on common problems on dental practice.[5] Even so, specifying code of ethics in the DCI code of regulations does not ensure that practitioners will be ethical in their professional career. As per the WHO, the dentist: population ratio is 1:7500.[6] Though it is apparently fulfilled in India, there is severe irregular distribution of dentists in this country.[7] The number of dental clinics is higher in urban than the rural areas. Dentists preferably settle in metropolitan cities. Three-fourth of the total number of dentists are clustered in urban areas, which houses only one-fourth of the country's population.[8] With such widely spread discrepancy; there is a tendency to alter the norms for one's own benefit. Pune, an education hub is known as the oxford of the west due its vast number of educational institutes. There are 4 dental colleges that provide undergraduate as well as postgraduate courses across different specialities. The city also houses a large number of private dental clinics. There are more than 100 dental clinics and a large number of dentists who perform as only consultants apart from those owning clinics. Crowding of dentists across cities leads to unhealthy competition and commercialization.[9] This leads to violating the code of conduct put forth by the state dental councils and many of the norms are openly flouted and rules randomly bent.[8] The objective of the present study is to assess the amount of violation of the code of conduct by the dental clinics with respect to the clinic name board and advertisement, in and around Pune city, by an on-site survey.

2. MATERIALS AND METHODS

Ethical clearance was obtained from the Ethics Committee. The study consisted of questions regarding the size of the dental clinic board, attractive symbols or wordings, qualifications other than the academic ones, and advertisements of the clinics through media or sign boards. In all, 123 clinics were observed. The results were entered in Microsoft excel sheet 2013 and cleaned. **Results** There were in all 123 clinics (60- BDS and 63- MDS). Table 1 shows the observation distribution based upon the degree of the dentists in relation to the size of the board, advertisements and flashy designs and slogans. More BDS practitioners faulted the regulations with respect to size of the sign board, slogans on the board- like "family dentists", "tooth designing"; fixing the sign board far away from the place of practice- at the pharmacist. More number of MDS practitioners advertised through media for promoting their clinics compared to the BDS practitioners (Table 1). Overall more than half of the dentists mentioned their place of study and the university from where they obtained their degrees. Almost 25% mentioned that they had obtained gold medal in their academics and a few of them also specified the subject in which they won the medals. Surprisingly most of the MDS practitioners are academicians associated with different dental colleges, with a majority of them working as post graduate guides.

Table 1. Distribution of the dentists based upon the different parameters of observation related to the DCI norms of practice

Sr. no	Observation point	BDS	MDS	Total
1	Size of the sign board more than 3x2 feet	38(63.3%)	41(65.1%)	79(64.2%)



2	Flashy Designs and Slogans and Promises on the sign board	40 (66.7%)	25(39.7%)	65(52.8%)
3	Abbreviated words other than qualifications	10(16.7%)	10(15.9%)	20(16.3%)
4	Affix a sign board far away from the place of clinic	40(66.7%)	25(39.7%)	65(52.8%)
5	Advertisement through media like newspapers and local magazines	20(33.3%)	38(60.3%)	58(47.2%)

3. DISCUSSION

Being a dentist is a privilege that is coupled with responsibility and strict adherence to moral practise. Therefore it is assumed that all dentists will conduct him/herself in a very dignified manner while setting up a practise.[9] It is not uncommon to witness codes of ethics broken in today's era of undisputed competition.[9,10] The following codes as per the DCI regulations of 1976 are considered to be unethical practices by a dentist:

"Using of sign board larger than 0.9 metre (3 feet) by 0.6 metre (2 feet) and the use of such words as 'teeth', 'Painless Extraction' or the like, or notices in regard to practice on premises other than those in which a practice is actually carried on, or show cases, or flickering light signs and the use of any sign showing any matter other than his name and qualifications as defined under clause (j) of section 2 of the Act".[11]

We observed that majority of the dentists openly refused to follow this rule. The size of the dental clinic sign board was defined nearly five decades ago by the DCI and the respective state dental councils, where the general population was less than half of the present number. There weren't many commercial establishments or multiplexes. In those days the only way to advertise was through boards. But in the concrete jungle of today, noticing a 3x2 feet board near a complex is a herculean task as it may be hidden away due to a number of other posters and bill boards. It is the right of the service providers to make the consumers aware of the existence of the services that can be availed at their clinic. Hence the prescription of the DCI needs to be revisited.[9] Online ads are a part of Digital India now, but until someone gives a written complaint, no action is taken against the dentists and most of the time it is ignored completely.[9] There is always a lurking danger of unwarranted treatment sought for minor dental ailments that do not always need an extravagant intervention. But too much advertisements tap on this psychology of the public and could lead to exploitation and in turn reduce the respect for dentists in the common society. Many clinicians used flashy designs and slogans to attract their customer's like- use of the word Dental Chamber, Smile Parlour and Family dentist. This was similar to the studies carried out in Chennai[9] and in Raichur.[12] *"Mentioning after the dentist's name any other abbreviations except those indicating dental qualifications as earned by him during his academic career in dentistry which conform to the definition of 'recognised dental qualification' as defined in clause (j) of section 2 of the Act, or any other recognised academic qualifications"*- states the DCI norm.[11] A total of 13.1% in Raichur,[12] and only 9% in Chennai city[9] had used other than academic qualifications on their sign boards which were much lesser than our study findings. Qualifications like M.I.D.A., M.I.C.D., F.C.I.P., F.A.C.D., and M.R.S.H. were the abbreviations observed. The use of these unrecognized academic qualifications possibly is to show that they are more qualified in order to attract the patients. We observed that more than half of the total dentists placed their sign boards across far distances away from the clinics- mainly at the pharmacist's shops. It is because the chemist shop is the place where the person in need of drugs visits regularly.[9,12] In today's era, use of multimedia for advertisements is a common phenomenon. At times sending messages to dentists for hands on courses is also a new trend in place. There are a number of software that are available which cater to both patients as well as fellow dentists. The use of media for advertising by dentists in Pune city (overall 47.2%) was higher than the findings of the study in Chennai (36.0%).[9] Since there is lack of control over the internet, the advertisements regarding the services provided may not always be true always and may be potentially misleading on various occasions. Advertisement is considered as

an unethical practice since it entices patients from other dentists, convincing them to undergo treatment, especially cosmetic procedures, that may not be mandatory for their oral health.[9]

4. CONCLUSIONS

The current study highlights the violation of codes by dentists in Pune city. It also shows that post graduates are also violating norms. Ethical practice has been missing and a strong shift from quality to mass practice is being observed. It is up to the DCI, to take appropriate steps including the earliest revision of its norms and its supervision of its strict adherence. It is also the moral responsibility of the dentists to self-monitor their activities.

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