Bridging the Gap between Knowledge and Practice in using Personal Protective Measures for Infection Control

Sir,

I would like to congratulate Rachna Kaul and her co-workers for highlighting a very important issue regarding usage of protective eye wear among dental practitioners of Bengaluru city. It has emphasized on work related eye/vision hazards and also found that 55.3% of dental practitioner’s used protective eye wear in Bengaluru city. To add to the present data, in one of our survey on infection control practices among endodontic postgraduate students of Bengaluru city, it was observed that hardly 22.8% (21/92) used protective eyewear compared to other personal protective measures even though they were aware showing lacunae in the knowledge and practice.

Many studies showed the negligence of wearing protective eye wear among dentists in spite of knowing that it is one of the personal protective equipment recommended. Interestingly a study has shown that not only dental practitioners but people in medical field also give less importance for the use of eye wear. All these indicate that the students learnt infection control measures from faculty lessons showing increased knowledge, but when it has to be practiced, the number was very less. As Kaul et al concludes to increase the awareness among dentists, along with it reviewing the guidelines should be emphasized. One should abide themselves to the universal guidelines like ‘Standard infection control and precautions’, ‘American Dental Association Recommendations’ and guidelines set by center for disease control and prevention.

In addition, reinforcement of knowledge by continuing dental education programs and short training courses about cross infection and infection control procedures are recommended for dental students, dentists, and dental assistants to upgrade themselves. But, as the studies have stated the gap between knowledge, attitude and practice do exist, to address these shortfalls and to improve the adherence to procedures, constant motivation becomes the key factor.

REFERENCES


Mythri Halappa
Senior Lecturer
Department of Public Health Dentistry
Sri Siddhartha Dental College
Tumkur, Karnataka, India

Arun Aslam
Reader
Department of Conservative Dentistry and Endodontics
RV Dental College, Bengaluru, Karnataka, India
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