

## ALCOHOL CONSUMPTION IN INDIAN DENTISTS

Gaurav Solanki\*

*Jodhpur National University, Jodhpur-324003, (Rajasthan) India***Corresponding author\*:** [drgauravsolanki@yahoo.com](mailto:drgauravsolanki@yahoo.com)**Abstracts**

Dentists experience stressful situations every day, and have to deal with these in a very professional manner. The dentists participated were told about the hazard and ill-effect of alcohol consumption. There need to be a reduction in consumption of alcohol in dentistry for the upliftment of general masses as well as the dentist. Alcohol consumption has widely increased through out the world now-a-days. This all is due to a stressful life style and emotional load on a person. It is believed that in all professions, there are unique problems and problematic circumstances facing the people who are involved. Dentistry is not excluded from this phenomenon.

**Keywords:** Alcohol Consumption, Dentists, Occupational Stress, Social Anxiety, Personal Factors**1. Introduction:**

It is believed that in all professions, there are unique problems and problematic circumstances facing the people who are involved. Dentistry is not excluded from this phenomenon<sup>1</sup>. Dentists experience stressful situations every day, and have to deal with these in a very professional manner. A dentist is regarded as a highly-skilled professional in his field and the expectations of his patients puts him in a very challenging but vulnerable position. More than two decades ago, Forrest hypothesized that the practice of dentistry is a rewarding but demanding profession, and he claimed that the health of dentists may depend on how successfully they keep the rewards and demands of their profession in proper perspective<sup>2</sup>. Forrest in 1978 suggested that dentists need to identify factors that cause stress and strain, and must take measures to eliminate, or at least reduce, the harmful effects of stress and strain on their health and emotions<sup>3</sup>. In 1986 Katz found that the stress in the dental working environment is a topic of great importance, and the effective reduction of stress in the dental environment has emotional and health benefits for the dentist and everyone else involved. The researcher experienced that some dentists consume alcohol to relieve stress and strain caused by their profession. At first this measure might be beneficial to reduce the effects of stress and strain on the dentist's emotions, but for some dentists, this measure leads to dependency that has devastating consequences<sup>4</sup>. Through the ages, alcohol and other chemical substances have been used to relieve physical and emotional pain. Unfortunately, even if chemical substances such as alcohol are used for good reasons, the

use of these substances can lead to dependency on such substances. Erlank claims that substance dependency is a universal phenomenon that does not distinguish between age, race, status, gender or title and substance use, abuse and dependency may occur regardless of a person's occupation<sup>5</sup>. Dentists are definitely not an exception to this rule. According to Erlank in 2002, the potential of dependency to a substance was only recognized in the late 19th century. Alcohol is easily available, and dentists do not need to abuse the authority provided by their profession to obtain alcohol. The researcher believes that alcohol is commonly used as an emotional pain reliever in the health professions, because in order to obtain other addictive substances, medical practitioners and dentists and even other health professionals have to abuse their professional rights to prescribe drugs in order to obtain the substances<sup>6</sup>. Kenna and Wood in 2004 reported that dentists consume more alcohol than other health professionals, but when compared to the general population in the USA, health professionals appear to take less alcohol. They found that when methodologically rigorous studies on alcohol and other drugs were performed involving the dental profession, the researchers focused exclusively on dental students and early dental career practitioners. They also found that much of the data pertaining to dentists on alcohol consumption have largely been based on review articles, retrospective analyses of treatment seeking dentists, and qualitative studies<sup>7</sup>. Croucher in 1994 reported that the social interaction that exists between a dentist and a patient is an occupational-related stress factor, which may produce burnout in dentists<sup>8</sup>. In the researcher's experience there are

many stress factors that a dentist has to cope with, and the literature confirms this. In a study conducted as far back as 1984, O'Shea, Cora and Ayer reported that an exploratory factor analysis led them to hypothesize six sources of stress among dentists, namely: patient compliance, pain and anxiety, interpersonal relations, the physical strain of work, economic pressures, third party constraints, and the strain of seeking ideal results<sup>9</sup>. It was found that hazardous alcohol consumption among certain dentists, especially male dentists and dentists in rural areas were up to four times higher than that of the average Indian population. Stress and health problems among dentists were determined by Randkin and Harris in 1990. They reported that dentists are vulnerable to health problems due to the stress associated with the profession, but most of the literature on the stress that dentists experience is based on opinions rather than systematic research. This study investigated alcohol use linked to the stress of a selected sample of Indian dentists<sup>10</sup>.

## 2. Methods:

A quantitative approach with a less qualitative approach was utilized. The survey with a questionnaire was used to obtain data with regard to biographical/background information, stress and coping, quantity and frequency of alcohol use, and dysfunction as a result of alcohol use among a randomly selected sample of 50 Indian dentists with a response rate of 70%. The respondents perspective on alcohol use linked to the stress of the dental profession with recommendations were also obtained. For the qualitative data collection, the researcher utilized the collective case study. He planned semi-structured interviews with an interview schedule with five dentists that have already had treatment for alcohol abuse or were self-characterized as problem drinkers.

## 3. Result and Discussion:

The dentists participated were told about the hazard and ill-effect of alcohol consumption. A marked decrease in daily consumption of alcohol was seen. It also lead to reduction in the consumption of those alcoholic products which had more percentage of alcohol in it and increased or replacement of it with alcohol products with less percentage of alcohol in it. There need to be a placement of rule and laws for the consumption of the alcohol. There need to be a reduction in consumption of alcohol in dentistry

for the upliftment of general masses as well as the dentist.

## 4. Conclusion:

The following conclusions regarding stress factors in the dental profession linked to alcohol consumption as a stress relieving mechanism and the adverse effects of this way of coping are drawn from the literature study and the quantitative and qualitative empirical findings. Dentists who participated were told about the hazards of alcohol consumption and its ill-effect. A marked reduction in their alcohol consumption was seen.

## References:

1. Alexander RE. Stress-related suicide by dentists and other health care workers. Fact or folklore? *J Am Dent Assoc.* 2001; 13(6): 786 - 94.
2. Ashton H. Brain Function and Psychotropic Drugs. New York: Oxford University Press, 1992.
3. Bailliere's Nurses Dictionary. For nurses and health care workers. 24th Ed. Elsevier Limited, 2007.
4. Bayard M, Hill K, McIntyre J. The alcohol withdrawal syndrome. *Am. Fam. Physician.* 2004; 69 (6): 1443 - 50.
5. Bernadt MW, Murray RM. Psychiatric disorder, drinking and alcoholism: what are the links? *Br. J. Psychiatry.* 1986; 14: 393 - 400.
6. Bierut LJ, Dick DM. The genetics of alcohol dependence. *Curr Psychiatry Rep.* 2006; 8 (2): 151 - 57.
7. Dictionary of Psychology. Penguin Reference. 3rd Ed. Penguin Group, 2001.
8. Dodgen, CE and Shea, WN, "Substance Use Disorders", San Diego: Academic Press, 2000.
9. Burke FE, Freeman R, Main JR. Occupational stress and dentistry: theory and practice. *Br Dent J.* 1995; 17(6): 214 - 22.
10. Gale EN. Stress in Dentistry. *NY State Dent J.* 1998; 6(8): 30 - 34.