# BASCD 2024 Abstract #17

# Dental fear/anxiety among children: a cross-sectional study of prevalence and association caregivers' perspective aspects

Paiva, A.C.F., <sup>1,2</sup>\* Rabelo-Costa, D., <sup>1</sup> Gallagher, J.E., <sup>2</sup> Paiva, S.M., <sup>1</sup> Bendo, C.B. <sup>1</sup> Federal University of Minas Gerais, Brazil; <sup>2</sup> Faculty of Dentistry, Oral & Craniofacial Sciences, King's College London, UK

# **Background:**

Dental fear/anxiety (DFA) refers to strongly negative feelings associated with dental care and has an elevated prevalence in children (36.5%, 95%:CI: 23.8-49.2) in the world. DFA may be passed on from parents to their children. There is little evidence regarding DFA amongst young children in non-clinical settings and the association with children's oral health and caregivers' perspective.

# **Objectives:**

To evaluate the prevalence of DFA in young children and the association with social anxiety, DFA of the caregivers and perceptions of children's oral health.

#### **Methods:**

A population-based cross-sectional study of a representative sample of children (4-6 years) was conducted during 2023 in the city of Carmópolis de Minas, Brazil. Children's DFA was measured through the caregiver's proxy-report (Dental Anxiety Question), and through the child's self-report (Children Fear Survey Scale-Dental subscale). They also provided information on their child's experience of toothache and oral health condition as well as their own aspects through completing the Dental Anxiety Scale (DAS), the Dental Fear Survey, and the Liebowitz Social Anxiety Scale. This project was approved by the Research Ethics Committee of the Federal University of Minas Gerais (CAAE:31334720.1.0000.5149). Descriptive and regression analysis (unadjusted and adjusted Poisson regression with a significance level of 5%) were performed.

#### **Results:**

Participants consisted of 272 children and their parents. The prevalence of self-reported DFA was 44.3% and the proxy-report was 34.9%. Reporting a good perception of oral health (Prevalence Ratio=0.64; 95%CI: 0.45-0.09; p=0.013) was associated with lower proxy-reports of DFA. Higher scores on the DAS were associated with higher proxy-reports of DFA (PR=1.46; 95%CI: 1.02-2.10; p=0.037).

## **Conclusion:**

The reported prevalence DFA in a representative sample of Brazilian children is high. The proxy-report on children's DFA was associated with the DFA of the caregiver and a worse perception of children's oral health. Children's self-report of DFA was not associated with the DFA of their caregivers or with social anxiety.

## **Funding source:**

The Brazilian Coordination of Higher Education of the Ministry of Education (CAPES).

# **Correspondence to:**

Ana Clara Paiva

Email: anaa paiva02@hotmail.com

https://doi.org/10.1922/CDH BASCD24 Abstract17