

The Pain as a Triggering Factor of Dental Anxiety

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ABSTRACT

The pain contains a special touch to each person. Of all our senses none captures our attention so well that pain. We can ignore the other senses, but it is very hard to ignore the pain. But with all the discomfort that it produces, we would be in danger if we did not feel the pain. Because of pain are training in the body, neurodegenerative and psychiatric global reactions. Psychologically, pain may be manifested by anxiety, fear, irritability, frustration, etc., each living the pain depending on individual variables perceptual, emotional, behavioral and cognitive. In Dental Medicine dealing with pain leads to avoidance of treatments needed, leading often to tooth loss, with serious consequences, both on the physical level through feeding difficulties and psychic level by reducing self-esteem caused by an unsatisfactory aesthetic. An appropriate management of pain and anxiety can increase the therapeutic compliance and thus the quality of life through training and developing coping mechanisms-effectiveness.

KEYWORDS: pain, dental anxiety, behavioral modeling, compliance

1. INTRODUCTION

Dental procedures have always been the source of anxiety in the dental office, leading largely to neglect dental treatments. Fear of pain is the main triggering factor of dental anxiety, being present a higher extent in women than in men, but painful experiences were perceived by men more intense, leading to a higher intolerance of men to pain.

The memory of painful experiences can affect the subsequent evolution of doctor-patient relationship, having an adverse influence on the dental treatment and compliance to therapy. Dental pain is one of the most violent types of pain, affecting patients regardless of age or gender, being necessary a good knowledge of the dentist of the techniques to reduce anxiety and pain perception, which sometimes gets valences oversized with negative repercussions on quality of life.

The pain has implications anatomic and physiologic, psychological and intellectual, psycho emotional and psychosocial. Physical pain causes a strong emotional resounding with overall negative impact and long-term effect disorganized, especially in children - where we can remember by residual pain deriving from unpleasant experiences, the feeling of pain remaining strongly imprinted in the child's emotional memory.

Oversizing the pain may be from negative thoughts and expectations regarding dental treatments, especially those endodontics. It seems to be a general characteristic that the

patients to expect on greater pains than they feels in reality, this being a finding often seen in adults and children. Also, another fact which confirms the hypothesis of an "early pain" is that one that, before patients to reduce their expectations about pain, they will expect to have more visits to the dentist, without feeling pain. A study conducted by Kent (1) showed that patients who are suffering from anxiety have labeled the pain that they have suffered as much smaller than at which expected, although when they were asked, before three months, the level of pain was the same as that of their prediction.

There is the possibility that anxiety to be the most common cause of negative experiences of patients in the dental office (2). The theory of "latent inhibition" (3) states that any neutral or even positive experience can serve as the first phase of a negative attitude. Consequently, the patient did not feel pain at all in cabinet, could easily develop a high level of anxiety. Most traumatic negative experiences, if it are experienced at an early age, are "preserved" as is and can be translated in different gradients of anxiety throughout the patient's life.

It is important to realize that the pain does not fit into the simplistic theory of the intensity degree of tissue damage, it is a psychological phenomenon. It needed a much more complex parttern of understanding the human experiences, regarding the pain. The findings from this field can be grouped into three categories:

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- Patients with major physical trauma needed fewer painkillers, and have complained very little about discomfort;
- Some people feel pain even with little or no evidence of organic damage. Patients with atypical facial pain are a good example in the field of dentistry;
- The placebo effect can produce a considerable change in response to pain, even if is administered a harmless substance for pain.

Most important is the fact that the person believe that the substance will reduce the pain. It is interesting to note that even when are told to the patients that the tablet that they was take is a placebo analgesic effect, they think that it will reduce the pain.

2. Underlying factors of dental anxiety

The causal factors can be classified into the following categories: predisposing factors, triggering factors and favorable environmental conditions.

A. Predisposing factors -

may be biological factors (geneticals) that can determine a certain tolerant threshold of pain, factors that may predispose to a high psychological vulnerability, socio-demographic factors (age, sex, degree occupational) and psychological factors (represented by the presence of vulnerability as a innate trait, lack of control, of the predictability of pain during treatment and of the temperament of the individual. Dental anxiety usually starts in childhood, so young patients are the target group for prevention of anxiety dentistry. The education of children in this enhances the long-term behavior towards dental treatment, which is quite important, given that usually the child has anxiety even from the first visit to the dental office.

B. Triggering factors of anxiety mechanism:

are represented by stressful situations of life, specific to dentistry having relevant those events that encroaching upon the physical integrity (accidents, major trauma accompanied by severe pain, unpleasant experiences related to dental treatment) or external factors such as negative publicity from the media. Also, rejection reactions can be triggered by memories of of their own experiences, the influence of social environment through social learning mechanism or associations made in childhood as a result of the threat of disciplinary forms of injection as a way to punish undesirable behavior. After the the combined action of these factors is building a maladaptive cognitive schedule that unpleasant events associated with the object of fear, possibly triggering automatically into the considered anxiogenic situations.

C. Favorable conditions for the appearance of anxiety from the environment of the subject -

Are represented by the social impact of oral affections and quality of life. Cultural pattern of dental anxiety upon request, existing in our country, maintain a high level of fear among the population compared to the oro-dental treatments.

3. The impact of dental anxiety on the physiological, cognitive and behavioral level

A. At the physiological level is produced a response of the body stronger on the day treatment and in waiting room,

manifested by sweating, increased heart rate, dry mouth, release of stress hormones and a feeling of exhaustion after a session of dental treatment. Simpson (4) has demonstrated the connection between psychological and physiological changes during dental treatment. Experimental consisted of the placement of electrodes on the forearm of children who came for the first time to the dental office, and after they made the based measurements, before it to see the doctor, they monitored the changes in heart rate and the level of electrification skin as a result of the various procedures. When the dentist dressed in gown, for example, rate increases heart rate by 10 beats / minute, and when the dental chair lift with the patient, rate increases heart rate by 12 beats / minute (compared to normal). When the doctor made intraoral examination, heartbeat rate decreases by 1 beat / min, and when the examination ended, heartbeats are located by 3 beats / minute, under the basic limit.

Some situations are more anxiogenic than others; therefore, it is important to know which dental procedure generates a stronger anxiety. To do this, Wardle (5) surveyed in 1982 the patients of a dental clinic, using a list of basic dental maneuvers. In front of each procedure, the patient have the choice of response: lack of anxiety, mild anxiety, moderate anxiety, high anxiety, very high anxiety. On the first place among the dental maneuvers is extraction, followed by injection of anesthetic and milling work with, and in last place is professional brushing teeth.

B. At the cognitive level, the anxiety can create certain patterns of thought, exemplified by: anticipating the pain, tooth loss, exaggerated prediction of the future (I will happen something very bad and painful), negative feelings of vulnerability, feelings of losing control, of self-esteem, stigma, remembering previous traumatic dental experiences and hypersensitivity to stimuli in the dental office (visual, olfactory, auditory), the association of these stimuli with pain and suffering.

C. At the behavioral level, may occur alterations in dietary habits (avoiding solid or cold food by anticipating the pain), prevention orodental behaviors, avoiding contact with the environment of dental offices (frequency of visits in cabinet is reduced, reprogramming), self-medication in order to avoid the cabinet (antibiotic, analgesic), refusing to watch shows, movies or advertising materials with and about dentists and, eventually, aggressive behaviors in the dental office.

A final component of anxiety is motric behavior, which can take different forms. Behavioral problems manifested by children (eg removing tools, refusing to open the mouth) are sometimes considered manifestations of anxiety.

A method for assessing this type of behavior in a child is to quantify in one of four categories using a scale developed by Frankl and collaborators since 1962 (6):

1. Absolute negative behavior: refusal of treatment, strength and hostility, extreme fear, forced crying and removal by the doctor or even isolation.
2. Slightly negative behavior: minimum negativism or resistance, minimal or moderate fear, nervousness or crying.
3. Slightly positive behavior: he accept cautiously the treatment, but with a slight opposition, ask questions or

delay treatment maneuvers, moderate desire to comply the dentist.

4. Absolutely positive behavior: near and appropriate verbal contact with the doctor, without signs of fear, interest from dental procedures.

To increase the accuracy of assessment, Melamed et al in 1975 (7) enumerated a list of behaviors deemed to be reactions induced by fear of dental surgery, and also the frequency of in time of the events evaluated by their inclusion after observing the child for a period of 30 minutes successively, the researcher indicating which of these reactions have occurred in each interval of 3 minutes. It is denoted the presence of the following behaviors observed in two situations: in the case of separation by mother and the behavior in the cabinet. In the first instance, it notes: the presence of the following behaviors: if the baby cries, clinging to the mother, refuses to leave or sticks to her. In the second situation is noted the presence of the following behaviors: if the baby cries, drown or suffocate, does not want to stand in the position of examination, tries to remove the tools, protesting verbally. overreacts to pain, close the eyes, becomes pale on the extremities, cries on injections, he refuses to open his mouth, has rigid posture, oblige the doctor to raise the tone of voice or to appeal to the constraints. To each reaction is given a score, thus quantifying the intensity and frequency of motor behavior of manifestation of anxiety in children.

D. At the social level, dental anxiety may be manifested by damage of professional life (underperformance), avoidance of social contacts and personal relationships, affects the quality of life of the individual and may occur social taboos represented by avoiding the discussions about dental diseases and about anxiety symptoms toward treatment.

4. Techniques and procedures to reduce dental pain and anxiety

Behavioral modeling aims to address strategies adapted to each patient dental history. Behavioral management aims at formation and development of coping mechanisms to help the patients to cope with efficiently the treatment. An important role in shaping behavioral plays and time management. A treatment session should not be neither too short nor too long. It is also important the structure of a visit to the doctor: the patient must know clearly what will happen during the meeting. The communication plays an important role in that it provides explanations to the patients about procedures, interventions, demonstrated being the fact that the effects of treatment are stronger when the information about therapeutic procedures is combined with other information, such as those about the possible sensory perceptions during the treatment, making the patients to feel they have some control over the situation.

An important factor is the empathetic approach of the medical staff, compared to preferences and needs of patients. Providing a positive feed-back is an excellent result regarding the therapeutic compliance. Having control is an important element in overcoming a stressful situation in the dental office, the situation being evaluated as less threatening (8). These approaches (9) are intended to prevent the installation of anxiety, but if it was already

installed, we will have some techniques of reducing the level anxiety, such as:

- **The relaxation** - has impact on the physiological level by reducing the neurovegetative manifestations - reducing the heart rate, sweating, choking sensations, etc., knowing the fact that the human brain cannot process these two feelings at once: the relaxation of body and mind anxiety;
- **Systematic desensitization** - is used successfully in the treatment of phobias and consists in training the patient to progressively faced with anxiogenic stimuli or situations;
- **Distracting the attention** - from an unpleasant procedure, being replaced by methods such as watching some exciting movies, listening some audio tapes, etc.;
- **Focusing attention** - concretized by concentrating the attention on the positive aspects of treatment;
- **Guided imagery technique** - are intended to change the representations of the patients towards to anticipated pain before treatment and painful actually felt through imagining some landscapes that inspire them peace or other representations which can dominate the interest;
- **Music therapy** - is one of the methods shown to be very effective, widely applicable. Music therapy can combat dental anxiety and also, having an antialgic effect through ways of action in the psychological plan by: release intracerebral endorphin, effect of distracting from painful stimuli, the feeling of familiarity and comfort in the dental office, being recommended songs with repetitive rhythms, predictable dynamic, harmonic consonance, the patient's favorite songs, baroque or classical style, meditative and relaxing music.
- **Hypnotherapy** - used successfully in dentistry having as effects: reducing state of nervousness, eliminating defense reactions, allowing the control of pain, bleeding or salivation control, bruxism treatment, etc. Milton Erickson 1979 (10) describes several procedures of pain control such as hypnotic analgesia, hypnotic anesthesia, the movement of pain sensation, the reinterpretation in hypnosis state of painful experiences, etc.

We present below a fast method of hypnotic analgesia induction, used in dentistry, described by Dafinoiu (11) according to Joseph Barber (1977).

„I would like to talk to you a few moments to see if you would like you feel more relaxed and you can feel relaxed than usual. You'd like you feel more relaxed than now?

I am very sure that you will feel that I have done nothing, that has nothing happened. You can feel a little more relaxed, but I doubt that you can perceive other changes. I would like however to notice if something surprises you, no matter what you can remark. Agreed, so ... the best way to **start to feel more relaxed** is just start by you sit down immediately as comfortable as possible ... come on, sit in the the most comfortable position possible ... it is good. Now, I want to remark how relaxed you can feel only through a single and deep inhalation. Come on.... broad, deep, satisfying inspiration ... is good. You can already remark **how good you feel** ... how you feel that your shoulders and neck are heated ... Now therefore ... I would like to inhale deeply for another

four times, deep inspirations and relaxing ... and while each inspiration is followed by a deep breath, remark just how relaxed can become your shoulders ... and observe how your eyes seems relaxed while it is closing ... let it merely to close ... it's better this way ... notice this ... and also remark how, while you let out air from the lungs, you can **feel this relaxation in which you start to dive** ...

Well, it is good ... now, while continuing to breathe deeply ... comfortable ... regularly ... everything I want to do is to imagine ... a stair. Just imagine a stair, no matter what kind of stair ... with 20 steps and you're on the top step ... No need to see the 20 steps in the same time, you can only see a few of them or the whole stair from a once, do whatever you want ... it's better that way ... you are on the top step of the stair and see step where you stand and also regardless of the this step ... all you see is good ... Now, in a few moments, but not right away, I'll begin to count, clearly and loudly, from 1 to 20 and ... as you probably guessed already ... when I mention I wish that after each number you down one step on this stair ... to can see how you coming down, you feel going down, going down, step by step, going down one step each number that I will pronounce. All you have to do is to remarks, just remarks, to remarks that you feel more relaxed and more relaxed with each step, as you descend ... one step for each number pronounced, as the number will be higher the more you will find out down the stair ... the more you will find you below the stairs so you will feel more relaxed ... one step for each number ... is good like that, you can start preparing yourself ... Now I'll start.

One ... one step towards the base of the stair ...

Two...Second step down now, it is good like that, ...

Three ... Third step down now ... and remarks maybe, that you feel more relaxed ... I wonder if there are parts of your body that you feel more relaxed than the other ... maybe your shoulders feel more relaxed than the neck ... maybe your feet feel more relaxed than arms ... I know nothing about this and this has really not matter ... what matters really is to feel good ... you feel relaxed ... this matter ...

Four ... come down fourth step, maybe you already feel how parts of your body start to relax ... I wonder if deep relaxation, weight oppressing that you feel on the forehead does not start to expand ... it lowers progressively, it covers eyes, face, mouth, chin ... descends and covers your neck, deep, restful, heavy relaxation.

Five ... five gears to the base of the stair ... a quarter of the way ... you descended a quarter of stair and you already started, maybe really feel and appreciate the relaxation and pleasant state that you have achieved ...

Six ... come down now the sixth step ... and begin, perhaps, to remark that sounds bother earlier fades gradually ... that all sounds that can you still perceive become part of the feeling of relaxation and pleasant mood ... everything what can you perceive it integrates into your experience about the state of relaxation and well ...

Seven ... seven gears descended ... It's better this way ... maybe you noted that feelings of relaxation and well spreads to the shoulders and arms ... I wonder if you've noticed that

one of the arms seems harder than the other ... maybe feel right arm harder than the left ... it matters less ... be pleased that you become increasingly aware of this feeling relaxed, of weight and better, or maybe of float ... it is a feeling of heaviness or floating ? ... certainly I do not know this, but has no importance ...

Eight ... come down now on the eighth step ... and maybe remark that as you relax more, your heart seems to beat faster and perhaps stronger than you expected ... maybe you notice tingling in fingers ... maybe that twitching eyelids surprise you ...

Nine ... come down now on the ninth step and breathe comfortable, slow, deep .. you relax and remark this weight in which you dive, while you continue to perceive this feeling of deep relaxation, oppressive and agreeable that continues to expand throughout the body ...

Ten... ten stairs now ... at the middle the stair, you wonder what will happen to you and maybe asking yourself if indeed something will happen to you ... and yet, knowing that this has no importance, feel so pleasant relaxed and quiet, just continuing to feel relaxation with its sensations of relaxation, of well, that continues to spread throughout the body ...

Eleven ... down now on the eleventh step ... remarking maybe the extent to which you feel increasingly harder, increasingly relaxed, there was nothing to disturb you, nothing to get tedious, while you feel more and more relaxed

Twelve ... Twelve descended stairs ... and I wonder if you realize the extent to which you can easily understand the words I speak ... without any difficulty and without a care ...

Thirteen ... thirteenth steps down now, feeling increasingly deeper the impression of a real pleasure that accompanies this expansion, this relaxation ...

Fourteen ... fourteenth steps down now ... perhaps noting the impression of diving, enjoyable and restful your body seems to be sinking deeper, deeper into the armchair, with no worries, nothing bothers you ... armchair supports you and surrounds you with its warmth, comfortable ...

Fifteen ... fifteen steps now three ... quarters of the way, from descent deeply ... becoming more deeply relaxed not have to do anything ... just to make you happy and appreciate the situation ...

Sixteen ... down now on the sixteenth step ... wondering you maybe what you feel when you will be based on the stairs, and yet, knowing how much you feel increasingly more prepared to become from this moment increasingly more deeply relaxed Increasingly more comfortable relaxed, not having anything to bother you, to distracting or tedious you ...

Seventeen.... down now on stage seventeen ... increasingly closer to the base of the stairway, feeling, perhaps, how your heart beats increasingly stronger, probably felt the weight of your arms and from your feet, which is becoming more and more agreeable Knowing that nothing really matters than the pleasure you obtain from this experience of beneficial relaxation, not having anything to disturb or distract you ...

Eighteen ... down now on the eighteenth step you get close to the base of the ladder, you have no worries, no sorrows, nothing to bother or distract you and keep down increasingly deeper, increasingly more deeply relaxed Body hard ... hard ... and relaxed. comfortable and relaxed ... You have nothing special to do, anyone satisfied, satisfied ... just remarkable how heavy and relaxed feel, the extent to which you can feel better and you continue to feel the way slow and restful, restful, restful and pleasant in which you continue to breathe ...

Nineteen... nineteenth steps descended...you almost reached on the base of stair .. nothing bothers you, does not bother ... while you feel **more and more better**, becoming more relaxed, becoming more rested Increasingly better ... just careful and now...

Twenty ...it is the basis of stair ... deeply, deeply relaxed ... and this relaxation is deepen with every inspiration While talk to you a few moments about a phenomenon that you know many things ... is about to remember and to forget ... you know many things about this because they are phenomena that we regularly use ... you remember every moment of every day ... and then forget in order to you remember something else ... cannot you remember everything all at once, so let a few memories to return quietly in the depths of your spirit I wonder, for example, if you remember what you ate yesterday at breakfast ... I bet that the effort to find this memory is **too high**, although this memory is there ... there ... somewhere, buried deep in the depths of your spirit ... no need to remember, as you will not remember And I wonder if **you'll be pleased** to see that the things we are talking about today, while your eyes are closed, you will return in memory tomorrow or day after tomorrow ... or maybe a week ... I wonder if you decide to leave the memory of these things to rest peacefully in the depth of your spirit ... or if you you'll remember gradually, little by little ... or suddenly being still there, in a corner of your spirit ... you might be surprised to discover that the waiting room of your dentist is where memories back to the surface ... maybe not ... maybe you'll notice that it is more pleasant to remember in another day about everything that happened ... it does not matter ... whatever you do, if you still choose to have them remind ... is well ... absolutely natural ... this has no importance ... that you will remember suddenly or gradually ... completely or only partially ... or will you let this memory to rest peacefully and comfortably in a hidden corner of memory ... this does not matter at all ... and also I wonder if you'll notice and you're surprised to see to what extent your visit here today is more pleasant and enjoyable than you could have imagined I wonder if you'll notice to your great surprise that no longer feel any other feeling ... can you feel intrigued by this startling impression ... surprise ... curiosity....

I wonder if you'll be pleased to note that today ... and any other day every time you will support the head dentist's chair again When you'll feel head resting ... you will remember what extent you feel good and relaxed today ... and you feel the same impression again ... and you'll feel even more relaxed and relaxed than now Relax ... relaxed ... nothing to get tedious, nothing to bother you ... I wonder if you'll recall also wellbeing and relaxation, only the light above your head can this state of relaxation well and it could reappear quickly and automatically, any occasion

where you were about to sit in this chair ... I do not know exactly how you will find it I just know, as perhaps you know, that this state will recur, much to your surprise, more pleasant, more relaxed, restful than you can imagine ... you'll have no worries, no problem ... Whatever you can to perceive or remarks will be part of your feeling of comfort, well, rest, rest absolutely and relaxing ... everything that you could perceive it can be part of the impression of great comfort and absolute good and I want you remember that every time I'll touch you right shoulder, like now ... every time this happens, and only when it will happen Every time I'll touch your right shoulder, like now you'll feel a particular sensation ... the feeling that you're prepared and ready to do something ... every time I touch you right shoulder, like now you will feel like you are ready to close your eyes... maybe impression that you are ready to relax more **strongly**, that there is nothing that you troublesome, nothing to disturb you ... maybe you're ready to do something this has no importance ... nothing has indeed important than your comfort feeling, well, relaxing comfort deep, deep, relaxation absolute ... With no worries, no troublesome it's good.... And now, while you continue to take advantage of pleasant and comfortable state of relaxation, I would like to remark how good you feel so that you really like this experience, to like the sensations you feel your body ... and at one point, but not yet not before being ready ... but at some point, I will start to count from 20 to one ... and you climb back the stairs ... one step for each number ... you have the time you need ... time is relatively eventually You'll feel about to climb back stairs slowly and in a pleasant way, one step for each number that I will notify. When I reach the three, your eyes will be ready to open When I will reach two they will be open and when I reach one, you will be agile, sober, fresh and lively ... maybe like you have done a little siesta refreshed, slack and though you are slack and relaxed, you'll feel agile In full form ... Maybe surprised ... I do not rush, you have all the time, while you climb these restful steps again ...

20 ... 19 ... 18 ... very well, has just climb the stairs again ... ready to be surprised, knowing what you ate yesterday and still 17 16 ... 15 ... a quarter of the way, more and more faster ... 14 13 ... 12 ... 11 ... 10 ... you're on halfway ... more and more faster ... relaxed, but more and more faster ... 9 ... 8 ... 7 6 ... 5 4 ... 3 very well ... you are completely awake, sharp, relaxed, fresh and lively It is very good. How do you feel? Relaxed?"

Exercise for thermo - measuring pain

"Imagine a thermometer to measure your pain. In the lower part of this thermometer we have the value 0 corresponding to a lack of pain, and at the top we find the value of 10, which corresponds to the great pain that you can imagine, and when you'll be able to see this thermometer of pain, your finger will pick up slightly. You can see this value of pain now ... What value can read on the "thermometer of pain"? {<The thermometer> can be used to quantify the pain or intervention on it}. When your thermometer will indicate a lower value, corresponding to a more comfortable level, tolerable of pain, your finger will pick up "{After the exercise was introduced, patient uses in his view whenever he wants to evaluate the effectiveness of a strategy to control pain or ending exercise, each time at end, in order to assess the level of pain with exercise ends.}

The therapeutic compliance

In Dental Medicine (12) the therapeutic compliance is different from other branches of medicine, patient reluctance to submit to the dentist is much higher, but this reluctance is not about following the therapeutic indications, because the treatment is applied at a high rate in the cabinet of the dentist and less at home. The problem of non-compliance is that of the addressability caused only partly by ignoring the dangers for the oro-dental health, but in almost all cases of hypo-compliance, dental anxiety occupies first place, due in particular to dental treatments resulting in acute pain intense and general discomfort caused by explorers and therapeutic dental maneuvers.

Increasing the compliance (13) depends on the achievement of a quality case history which can have positive consequences in terms of decreasing the incidence of malpractice and satisfaction towards treatment.

...//...

These issues are related to behavioral peculiarities of dental patients which obliges the doctor to seek the most suitable ways and means of attracting patients from preventive consultations and conservative treatments, meant to prevent tooth loss. A major objective in this regard is the avoidance of pain and discomfort caused by oro-dental maneuvers, and that of prevention and reduction of dental anxiety that is representing the main cause of the rare visits of dental patient.

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