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ОЦЕНКА УРОВНЯ СТРАХА И ТРЕВОЖНОСТИ У ПАЦИЕНТОВ ПЕРЕД ПОСЕЩЕНИЕМ СТОМАТОЛОГА

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Аннотация

Введение. В данной статье будет рассмотрено влияние страха и тревожности стоматологических пациентов на процесс лечения, а также предложены рекомендации по снижению этих негативных эмоциональных состояний с целью повышения эффективности и комфорта лечения. **Цель исследования** – провести анкетирование, выявить факторы страха и тревожности у пациентов, опираясь на опрос, и определить пути решения данной проблемы. **Материал и методы.** В исследовании был использован метод анкетирования. Участие в исследовании приняли жители Екатеринбурга, разных полов, возрастов и этнической принадлежности. Анкетирование было проведено 4 марта 2024 года. Результаты анкетирования обобщены вне зависимости от пола, возраста, этнической принадлежности. Полученные данные были преобразованы в процентном соотношении. **Результаты.** Большинство респондентов посещают стоматолога один-два раза в год, считают очень важным такие качества, как: коммуникабельность, внимательность и понимание со стороны стоматолога, систематически ищут отзывы и рекомендации о стоматологических клиниках перед визитом в клинику. Их беспокоят финансовые вопросы, связанные с расходами на лечение, а также болезненность от процедур. **Выводы.** Стоматологу следует обратить внимание на состояние пациента перед приёмом, объяснить процесс лечения и, при необходимости, направить к нужному специалисту.

Ключевые слова: стоматология, анализ уровня страха, пациент, фобия, анкетирование, лечение.

ASSESSMENT OF THE LEVEL OF FEAR AND ANXIETY IN PATIENTS PRIOR TO DENTAL CARE

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Abstract

Introduction. This article will discuss the effect of fear and anxiety on the treatment process in dental patients, and also suggest recommendations to reduce these negative emotional states to achieve more effective and comfortable treatment. **The aim of the study** is to conduct a survey, identify the factors of fear and anxiety in patients, based on the survey, and identify ways to solve this problem. **Material and methods.** The study used the method of questionnaire. The study was

attended by residents of Yekaterinburg, of different gender, age and ethnicity. The survey was conducted on March 4, 2024. The results of the survey are summarized regardless of gender, age, and ethnicity. The obtained data were converted in the percentage. **Results.** Most interviewees visit the dentist once or twice a year, consider the level of communication and understanding by the dentist very important, systematically seek feedback and recommendations on dental clinics before the visit. They are concerned about financial issues and the cost of treatment, as well as possible pain from procedures. **Conclusion.** The dentist should pay attention to the patient's condition before the appointment, explain his work plan and, if necessary, send to the appropriate specialist.

Keywords: dentistry, fear level analysis, patient, phobia, questionnaires, treatment.

INTRODUCTION

Dental anxiety and phobia represent a continuum with complex psychological implications, potentially causing avoidance behaviors and increased caries risk. Various factors contribute to fear development, such as personality, genetics, media, and past experiences. Childhood experiences are often significant. The interaction of these factors influences an individual's fear of dentists. Dental anxiety, or fear of dentists, is estimated to affect approximately 36% of the population, with a further 12% suffering from extreme dental fear [1]. This anxiety can have serious repercussions in terms of an individual's oral health, and it is considered to be a significant barrier to dental attendance resulting in poor attendance. This is known as dental avoidance and can lead to poor oral health or the necessity for specialist dental care. Indeed, 69% of participants in a study in city Yekaterinburg admitted believing that their oral health affected their life quality. That's why it's so important to know how to deal with it.

The aim of the study is to explore the peer-reviewed literature to answer the question: 'Why are people afraid of the dentist?' and 'How can we help them to overcome their fear?'

MATERIAL AND METHODS

The study used a questionnaire method. The study was attended by residents of Yekaterinburg, of different gender, age and ethnicity. The survey was conducted on March 4, 2024. The data obtained were converted as a percentage. To assess the diet of students, an oral survey and a survey were conducted in Google form. It included a number of the following questions:

1. How often do you visit a dentist for preventive examinations and treatment?
2. What is your general anxiety about your dental appointment?
3. What causes you the most anxiety when visiting a dentist?
4. How would you rate your overall confidence in the dentist's office?
5. Have you ever postponed going to the dentist out of fear?
6. What impact does the level of communication and understanding from the dentist have on your fear of treatment?
7. What dental practices can reduce your anxiety and improve your comfort during an appointment?
8. How often do you usually look for reviews and recommendations about dental clinics before going to the doctor?

RESULTS

The research evidence suggests that the causes of fear of dentists, dental anxiety or dental phobia are related to exogenous factors such as direct learning from traumatic experiences, vicarious learning through significant others and the media, and endogenous factors such as inheritance and personality traits. The results of the survey are summarized regardless of gender, age, and ethnicity. When assessing the frequency of students visiting dentists, it turned out: 52,5% visit dentist once-twice a year, 30% visit dentist more than twice a year, 17,5% visit dentist rarely. This indicates that there is a practice of preventive examinations among the respondents. Level of fear varies: 55% don't worry at all, 35% worry a little bit. This highlights the confidence of some patients in dental treatment procedures. There are many anxiety factors: 37.5% are concerned about the costs of procedures, 35% are concerned about pain from procedures, 27.5% are afraid of the unknown, 22.5% are concerned about the negative experience of past visits, but most people answered that they do not feel anxious at all - 40%. Financial problems and the cost of treatment, as well as concerns about possible pain from the procedures, are the most common sources of concern among respondents. The vast majority of respondents (52.5%) rate their confidence as moderately high, indicating a sufficient level of

comfort in the dental environment. This indicates a sufficient level of comfort in the dental environment. A small proportion of respondents (12.5%) admitted that they sometimes or often delayed going to the dentist due to fear. This indicates the influence of psychological barriers on the process of receiving dental care. Most respondents (60%) consider the level of communication and understanding of the dentist very important. This can significantly affect the level of fear in patients. Dentist can also improve the patient's comfort during the appointment, for example: 70% answered that good explanatory work of the dentist calms them, 62.5% noted the opportunity to talk about their concerns and 50% answered, that access to information or the conduct of procedures increases their comfort. This makes them the main methods that, according to respondents, can reduce fear and increase comfort during a visit to the dentist. Almost half of respondents (47.5%) systematically seek feedback and recommendations on dental clinics before visiting. This indicates the importance of timely awareness and feedback among patients.

DISCUSSION

While Lauth [2] described dental phobia as "a special kind of fear, out of proportion to the demands of the situation, which will not respond to reason, is apparently beyond voluntary control, and leads to avoidance of dental treatment where this is really necessary," it is sometimes thought of as a distinct concept. Freeman [3] also emphasized the significance of avoidance in dental phobia, emphasizing that dental anxiety alone is not enough to identify dental phobia; the patient's past dental experiences must also be taken into account. Dental anxiety and phobia are points on a continuum that may indicate complicated psychological issues that have a major impact on the lives of those who experience them. These impacts may include avoidance behavior and an increase in dental caries. Thus, in order to avoid future dental health issues, it is important to think about the most effective ways to cure dental anxiety and fear. According to research findings and clinical experience, general dentists can effectively treat patients with dental anxiety, as stated by De Jongh et al. [4] However, patients who are phobic should be referred to secondary level care, such as psychological or pharmacological management. The development of fear of dentists and anxiety can be attributed to a wide range of aetiological factors, with evidence pointing to both endogenous and exogenous reasons, including personality, IQ, genetics, media, past experiences, and role models. An individual may possess certain personality traits that make them more likely than not to be prone to anxiety, or they may have known someone who has had a bad experience at the dentist in the past. Research suggests that dental fear and anxiety is more likely to have happened in childhood. One or more of these factors, or even their interplay, may contribute to a person's fear of the dentist. In fact, compared to someone who is extremely extraverted, a very neurotic person can be more susceptible to a bad encounter. When Liddell and Locker [5] said, "It is impossible to say from this study whether the experiences were, in fact, very traumatic, or whether the subjects were more sensitive to them," they effectively summed up this. The complexity of the multifactorial aetiology of fear of dentists, anxiety, and phobia has been brought to light by this review. The degree to which a patient's worries prohibit them from seeing a dentist, the history of the patient's dental anxiety, and the ways in which exogenous and endogenous factors influence the patient's fear of dentists and anxiety all have consequences for dental practice. By revealing these significant aetiological aspects, the dentist will be able to customize the patient's therapy to meet their needs for dental anxiety, reducing both the patient's dread and the dentist's stress at work.

CONCLUSION

1. The evidence points to a complex and multiple aetiology for dental dread, anxiety, or phobia.
2. Based on the survey's results, it can be said that enhancing patient comfort and lowering anxiety levels in the dental chair require maintaining information transparency, practicing effective communication, being aware of patients' needs and concerns, and developing patient trust in the chair.
3. The results demonstrate the obvious practical consequences of the research that has been done in this field thus far: treatment avoidance may be avoided if fear, anxiety, and phobia are well understood.

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СТРАТЕГИЯ ЗАЩИТЫ СОБСТВЕННОЙ ПОЗИЦИИ В АРГУМЕНТАТИВНОМ СПОРЕ

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Аннотация

Введение. Презентация любого проекта или научного открытия подвергается критике, подразумевающей под собой наличие конфликта двух сторон. Традиционно считается, что в аргументированном споре как одном из видов полемики стороны используют два вида аргументов: support и attack. **Цель исследования** – доказать необходимость превалирования аргументов attack над аргументами support при защите своей позиции в аргументированном споре. **Материал и методы.** Были проведены концептуальный и компаративный анализы литературы в области философии науки и теории аргументации, включающей в себя аргументы support и attack, а также статистический анализ количества данных аргументов в позиции победившей в споре стороны. **Результаты.** При защите своей позиции в аргументированном споре желательно обеспечить превалирование аргументов attack над аргументами support. **Выводы.** При построении стратегии защиты собственной позиции в аргументативном споре необходимо проводить анализ как своей позиции, так и позиции оппонента для того, чтобы выстроить более выигрышный план защиты.

Ключевые слова: спор, аргумент, support, attack, защита.

THE STRATEGY OF DEFENDING YOUR OWN POSITION IN AN ARGUMENTATIVE DISPUTE

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Abstract

Introduction. The presentation of any project or scientific discovery is subject to criticism, implying a conflict between two parties. When engaging in a form of polemics that is called an argumentative dispute, parties traditionally use two types of arguments: support arguments and attack arguments. **The aim of the study** is to prove that in defending one's position in an argumentative dispute, one should prefer attack arguments over support arguments. **Material and methods.** We used a conceptual and comparative analysis of academic literature on the problems in the philosophy of science and theory of argumentation, where two types of arguments are usually presented. Also, we conducted a statistical analysis of the number of these arguments in the position of the winning party in the dispute. **Results.** When defending one's position in an argumentative dispute, one has to ensure that attack arguments prevail over support arguments. **Conclusion.** In order to develop a better strategy for defending one's position in an argumentative dispute, one should analyze both one's position and the position of the opponent.

Keywords: dispute, argument, support, attack, defense.