

Personality and dental anxiety

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Introduction

Dental anxiety

- patient's reaction to a specific kind of dental-related stress, an emotional reaction to dental stimuli or experiences combined with a cognitive evaluation of such stimuli and experiences; a complex phenomenon, which has a somatic, psychological and social dimension (Carlsson et al., 2013).

Dental anxiety may be:

- exogenous (conditioned by a negative dental experience)
- endogenous (accounts for the vulnerability to react with fear to potentially dangerous situations)

Psychological factors contribute to the aetiology of dental anxiety more substantially than aversive dental experiences (Armfield & Ketting, 2015).

Correlators of dental anxiety - research review

Dental anxiety correlates significantly and positively with:

- neuroticism (van Wijk and Hoogstraten, 2005)
- self-awareness (understood as seeing yourself as an object observed by other people) (Economou, 2003)
- forcing out thoughts about dental appointments and the frequency of negative intrusive thoughts about dental treatment (De Jongh, 1996)
- life satisfaction, forcing out negative thoughts about dental treatments and the internal locus of control (Hittner & Hemo, 2009)
- fear of revealing one's own looks (Tellez et al., 2015)
- anxiety disorders, such as Generalized Anxiety Disorder (GAD), agoraphobia, fear of injections and blood, and Social Anxiety Disorder (SAD) (Pohjola et al., 2011)
- fear of pain, fear of closed spaces and of being hurt (McNeil & Berryman, 1989)

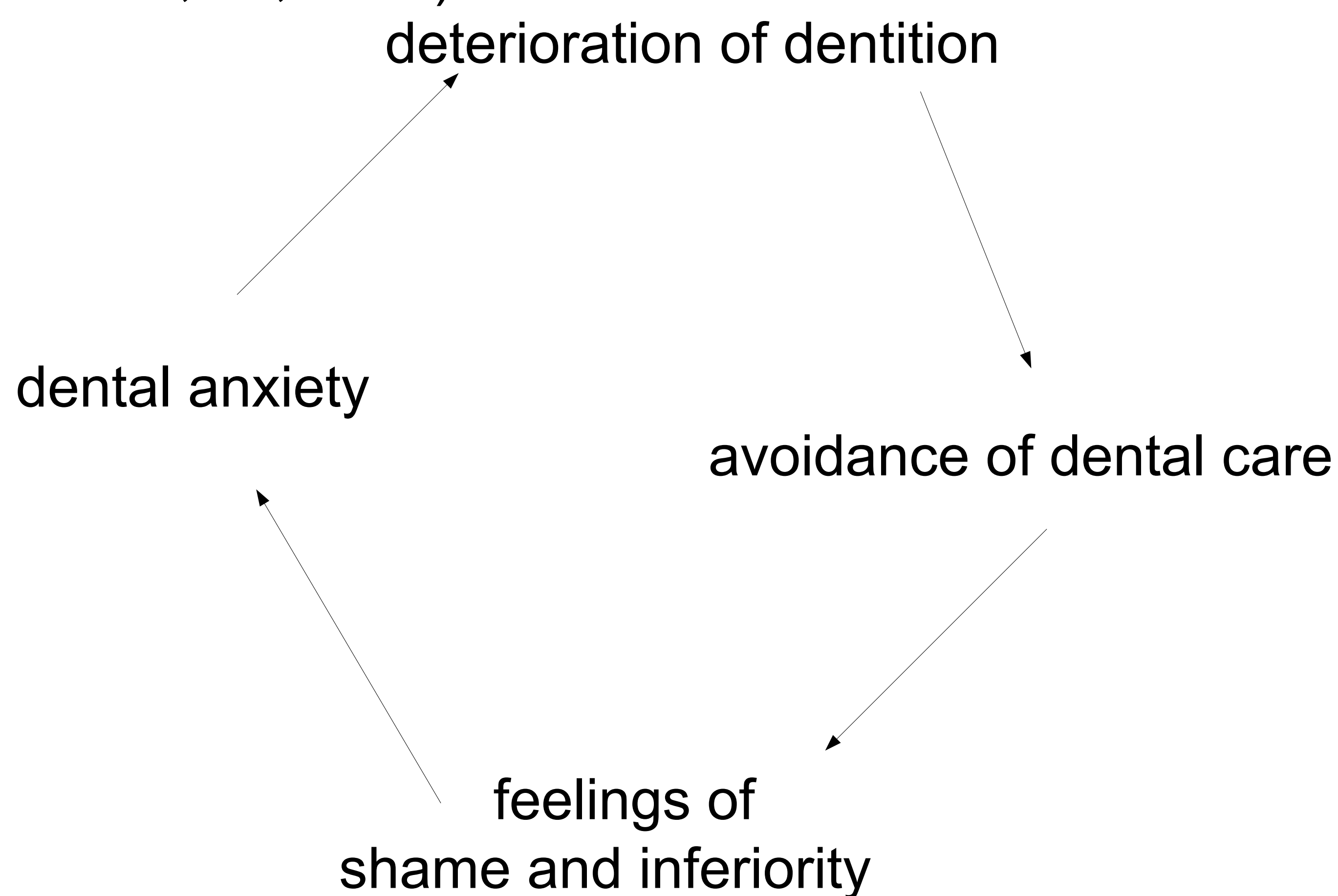
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Conditions provoking dental anxiety

The social model of dental anxiety (Berggren, Pierce, Eli, 2000)



In this model, it is of significance that people are social beings, and interpersonal relations constitute a very important aspect of human life. In interpersonal relations, external appearance plays a significant role which is why oral health issues so strongly and negatively influence the quality of social functioning.

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