

Ethical Issues and Dilemmas Encountered Among Dentist in Saudi Arabia: A Pilot Study

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Abstract: **Introduction:** Ethical issues tackled by the new generation dentists have become more complex than earlier. Ethical dilemmas can result in lack of confidence, fatigue in empathy and reduced efficiency of patient care. **Objective:** Present research was a pilot study among practising dentist in Saudi Arabia to recognise their ethical dilemmas and knowledge in the subject. **Methodology:** It was carried out in the form of case scenarios and their decision were asked. Most common ethical issues faced by them were asked to describe. 157 dentists were surveyed and obtained information pointed that they have to be updated in the subject of ethics. **Results:** The decision in the day to day practice taken by them were satisfactory though few had dilemma in taking right decision. **Conclusion:** Updating the information with continuing dental education as well as strengthening the topic at the undergraduate level can improve the scenario.

Keywords: ethical dilemma, dentist, Saudi Arabia.

Introduction

In today's society, ethical problems handled by dentists have turned out to be more intricate than before and seem to rise more commonly than which was tackled by dentists in the past times¹. At the foremost, dentists are genuine health professionals; at the same time, they are the individuals managing a commercial creativity. When this mutual role is managed and route together they are challenged with specific and contradictory ethical demands².

In the last few years, the steadiness of decision making in finding what is the 'best' dental treatment has moved away from professional paternalism to the act of respecting the informed and autonomous choice of the patient. Dentists experience problems when patients ask or select an inappropriate treatment or when dentist are constrained to agree to compromise treatment.³ A dilemma is a composite circumstance demanding an optimal choice between two equally objectionable alternatives. Ethical dilemmas arise from conflicts among ethical beliefs, obligations, ideologies and concepts.⁴

Ethical viewpoints are significant and can be used to instruct future dentists as well as professionals in healthcare, and to incessantly improve global health processes. For this purpose, importantly there is a need to address ethical concerns because of the rising use of high technology and the inordinate complexity of our health care systems^{3,4}. There are less methodical and thorough revisions to know the nature and degree of the above described difficulties. The present study took on to explore what professionals in Saudi Arabia notice as the fundamental problems they are facing in the modern dental workplace. This study was conducted with the aim of determining the ethical dilemmas

encountered by dental practitioners with the help of few case scenarios and the common ethical issues faced by them during their practice. The questionnaire was sent to each dentist and the response was analysed statistically.

Materials and methods

Purpose of the study was explained and after informed consent, a self-administered, self-designed questionnaire containing seven case scenarios was given to the study participants. This questionnaire was a modification of that described by Priyanka et al.⁵

The questionnaire was divided into two parts. The first part was designed to collect socio-demographic data of the participants, such as their level of education, location of clinic and the duration of their practice. The second part included a set of case scenarios and questions to assess the participants' knowledge of ethics and its application in their routine practice. It consisted of a set of seven scenarios with close-ended questions intended to evaluate many ethical conflicts confronted by them. Meaning of each ethical principle was explained in the questionnaire.

The questionnaires were sent to dental practitioners in Saudi Arabia. Different places of Saudi Arabia were selected and questionnaires were circulated through their E mail or personally. 100 dentists, from Saudi Arabia were participated. The response was collected and analysed statistically. The ethical clearance of the present research was obtained from the scientific research committee of King Khalid University-College of dentistry.

Results

Out of 157 respondents, 56.7% were males and 43.3% were female. 76.4% of dentist who responded were of Saudi nationality and 23.6% of respondents were non-Saudi dentist. Out of this 21% were specialist and 79% were general practitioners. 10.8% were from northern part, 45.2% from south region, 17.2% from central part, 19.7% from west and 7% from east region of Saudi Arabia. 15.3% from rural part and rest 84.7% had clinic in the city.

Present research was designed to recognise the ethical dilemmas faced by dentists during their decisions in their clinical practice.

For the case scenario 1, 52.9% responded that dentist violated ethical principle of truthfulness by not telling the truth regarding the type of treatment to the child patient. 24.2% suggested that doctor violated autonomy ie respecting the patient's capacity to decide the treatment. 22.9% responded that ethical principle of beneficence was not followed. 35% believed that by doing so, dentist decision was right and 47.1% considered it as wrong decision. 17.8% were in dilemma regarding the dentist's action.

In the case of the second scenario, 54.1% of the participants felt that dentist violated principle of beneficence (doing good) by not extracting the tooth which can be otherwise endodontically treated and saved. 14.6% thought that dentist violated justice and 31.2% considered that dentist did not respect patient's ability to decide treatment. Only 21% of respondents felt that dentist was right. 71.3% considered that dentist decision was wrong. 7.6% were in dilemma and not able to decide. 59.2% think that dentist has a right to refuse treatment and 29.3% think that dentist was indifferent to patient's preferences. In the case of the third scenario, 79% of the respondents agreed that Dr X was not right in giving his friend priority over the other patients waiting in line. According to 64.3%, 19.7% and 15.9% of the participants, Dr X had breached the principle of justice, confidentiality and beneficence respectively.

For the case scenario 4, in case of haemophiliac patient who came for extraction of tooth and dentist's decision to proceed with treatment without physician's opinion, 81.5% felt that dentist should have taken physician's consultation. 10.2% agreed to dentist's decision and 8.3% had

dilemma to decide which was right and wrong. 81.2% considered that dentist breached beneficence, 21.8 %, thought dentist was not truthful and others considered autonomy was violated.

For the case scenario 5, 37.6% consider that dentist decision was right that he/she should remain silent if the patient is not insisting about his details of investigation but 47.8% were not agreeing to dentist's decision. 14.6% had a dilemma. 37.6% consider that HIV status should be informed to his relatives and not to him. 51.6% were not agreeing to this decision. 10.8% dentist had dilemma about it.

For case scenario 6, about the faulty treatment of another dentist, 37.6% think that they should correct overhang restoration without informing the patient. 21% said that patient should be informed about the faulty treatment. 28% considered that the matter should be discussed with both dentist and patient. 9.6% had an opinion that this should not be told to anyone. Rest had dilemma what to decide. For case scenario 7, 68.2% considered that dentist should explicate all possibilities and direct the patient to suitable one. 25.5% had opinion that option should be told and left to patient's decision. 6.3% of dentist said that a dentist should give opinion only if the patient requests. 1% told that it's entirely dentist decision about informing treatment options. (Table 1)

General information was sought regarding the source of ethical understanding and guidance of dentist. 42% obtain information from dentist and dental association. 28.7% of dentist get information from religion and 11.5% from family and friends. 9.6% get source of ethical knowledge from doctor or lawyer and 8.3% from self or no one.

The most common ethical issues encountered were asked to list. Out of treatment related issues, substandard care by the dentist were faced by 50.3% of dentist, correcting poor work of another dentist by 27.1 %. The other issues were disagreement with other dentists on treatment decisions (30.3%), discussing failures in the treatment (9%), breaking bad news (16.8%), practice inconsistent with standard care (20%), advertising (7.1%) and compromising the treatment due to fee issues (6%). In professional related issues, most common problems encountered were un professional behaviour of dentist (49%), criticism of other dentist (40.8%), over servicing (20.4%) and 7% had problem to deal with these professionalism issues.

Patient related issues included request for amalgam (11.8%), request for inappropriate treatment or refusal of treatment plan made by the dentist (48.4%), not maintaining the appointments (50.3%), and problem of altering the prescription given by the dentist (0.7%).

Regarding health insurance related issues, 64.9% faced cheating the health funds and 43.3% had criticism by health funds.

Discussion

The judgements made by dental professionals have a substantial impact on the oral health of the population. Thus, this study was piloted to gauge the ethical dilemmas come across by dental practitioners and to know about the difficulties confronted by them in treating their patients.

In scenario 1, half of the participants felt that if the dentist does not tell the anxious and uncooperative patient about the treatment going to provide, then the dentist is not being truthful to the patient. 35% think that doctor was right in his decision by not telling the truth and continued the treatment. The first scenario created a conflict between the principles of truthfulness and beneficence. So, to do good, the dentist has to say a lie and if he has to be truthful and avoid being a deceiver, dentist cannot deliver the treatment. In both cases, the dentist will be acting unethically. To overcome the dilemma, it is better to decide the breaching of which principle will provide more benefit to the patient.

For case scenario 2, there was two ethical principle mainly opposing each other, autonomy and beneficence. 71.3% were thinking that doctor was right by refusing the treatment. 7.6% had dilemma. By doing the treatment which patient insists, autonomy is followed but at the same time tooth which can be saved if extracted, then beneficence is not followed. Here again considering the benefit to the patient, most appropriate principle should be followed.

For case 3, accepting the patient based on priorities when others were in queue, 64.3% think that dentist did not follow justice. For case 4, treating the haemophiliac patient based on patient's request without taking physician's consent was subjected to discussion. Majority (81.2%) accepted that dentist should have taken consent and opinion. Still 8.3% had dilemma about this.

For case 5, around half the participants responded that the patient should be informed about his illness as it is the dentist's duty to inform the patient's medical condition. The dentist should inform the patient but not his relatives as this will breach principle of confidentiality. More than half think that this should not be informed to relatives. Whether or not to inform the patient or his relatives about a disease which is fatal is an ethical dilemma. In terms of promising suitable information provision to the patient, the concept of minimal risk will be useful to solve this ethical dilemma.

For case 6, the practising dentist faces the problem of deciding the right choice in treating a maltreated patient. Most dentists do not like to degrade their colleagues. As patient's benefit is a major consideration, it is prudent to act in benefit of patient and at the same time without defaming the colleague.

For case 7, patient's right to decide and paternalism in treatment choices were discussed and 68.2 % of dentists believed that the patient should be informed in detail of all possible options and he or she should be steered for the prime treatment.

Many of the Dentist get ethical information from dentist and dental association. 28.7% acquire from religion.

Major issues encountered by the dentist in Saudi Arabia were unprofessional behaviour of the dentist (49%), substandard care by other dentist (50.3%) and had faced criticism of another dentist (40.8%). 64.9% had health insurance related issues like cheating the health funds. In the dental profession, it is difficult at times to decide which principle to follow. Ethical principles are meant to guide the healthcare provider with the goal of serving humankind. As there is only a hairline difference between the various principles, following one can mean violating another. This can result in moral issues, which is a state of knowing the ethically right action yet unable to perform.⁶

Certainly, research proposes that behaving against one's own morality at work place can have serious significances for persons as well as associations. It can comprise tiredness, exhaustion in empathy which can result in moving back from patients, lessened quality of provision in case of patients' safety, experience of the patient and management efficiency, deterioration of overall healthiness and wellbeing of staff which can result in increased turnover rate of staff and their shortage⁷

Conclusion

It is realized from the study that principle of ethics is not well clear to dentist, though they are able to identify the appropriate decision in different case scenarios. Continuing education is essential to clear their dilemmas and thus help them to work more efficiently and with confidence. Ethics is taught in undergraduate level and is an essential part of curriculum. The weakness in the subject has to be addressed and to strengthen this matter at the undergraduate level itself, debate about the appropriate material for the curriculum and innovative methods have to be incorporated. Faculty who are teaching ethics must find a limited set of topics from the comprehensive grounds. This information will

contribute to discussion about how to homogenise ethics schooling in dentistry and permit individual trainers to shape the ethics project that is suitable for routine practice of dentistry.

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Questionnaire

1. A nine year old boy consulted a dentist for the intermittent severe pain in the upper molar tooth which found to be extracted. Boy was worried and asked the doctor what he was going to do. The doctor did not want to upset the child and said, “I am just going to examine all your teeth.”

A. Which ethical principle did the doctor violate?

- i) Beneficence: 22.9%
- ii) Autonomy: 24.2%
- iii) Truthfulness: 52.9%

B. Do you think that the doctor was right?

- i) Yes: 35%
- ii) No: 47.1%
- iii) dilemma: 17.8%

2. A 35-year-old man visited dentist due to pain in a deep carious first molar. The patient requested the dentist to extract the tooth. The surgeon knew that extraction of molar was unnecessary which actually can be endodontically treated and saved and the doctor decided not to extract the tooth.

A. Which ethical principle did the doctor breach?

- i) Beneficence: 54.1%
- ii) Justice: 14.6%
- iii) Autonomy: 31.2%

B. Do you think that doctor should have gone ahead with the extraction of tooth?

- i) Yes : 21%
- ii) No: 71.3%
- iii) Dilemma/not able to decide: 7.6%

What do you think about the dentist's decision?

- i) Dentist has right to reject treatment: 59.2%
- ii) Dentist is unresponsive to the choice of patient: 29.3%
- iii) Dentist is irrationally stubborn or tenacious: 8%

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| iv) Dentist is financially impractical: 2% |
| <p>3. Many patients were waiting to see the dentist Dr 'X' for a long time. A friend of his visited his clinic for treatment and entered Dr X's chamber first.</p> <p>A. Was Dr 'X' correct in giving his friend priority over the other patients waiting in line?</p> <p>i) Yes: 16.6%</p> <p>ii) No: 79%</p> <p>B. Which ethical principle did Dr breach?</p> <p>i) Beneficence: 15.9%</p> <p>ii) Confidentiality: 19.7%</p> <p>iii) Justice: 64.3%</p> |
| <p>4. A known haemophiliac patient went to a dentist complaining of tooth mobility. He revealed his medical condition to the doctor and requested to extract the tooth. The doctor knew the complications but without taking a physician's opinion extracted the tooth which had grade III mobility.</p> <p>A. Do you think dentist should have taken a physician's opinion before extracting the tooth?</p> <p>i) Yes: 81.55%</p> <p>ii) No: 10.2%</p> <p>B. Which ethical principle did dentist violate?</p> <p>i) Non-maleficence: 46.2%</p> <p>ii) Truthfulness: 21.8%</p> <p>iii) Autonomy: 6.4%</p> |
| <p>5. A patient visited Dr X's clinic for the treatment of decayed teeth. Based on the examination findings patient was advised investigations and Dr 'X' discovered that patient was HIV-positive. He did not reveal this to patient and denied him further dental treatment.</p> <p>A. A dentist should explain the details of the investigations if the patient insists, otherwise he should remain silent.</p> <p>i) Yes: 37.6%</p> <p>ii) No: 47.8%</p> <p>iii) Dilemma/not able to decide: 14.6%</p> <p>B. Should Dr 'X' has informed patients' relatives about the illness and not him?</p> <p>i) Yes: 37.6%</p> <p>ii) No: 51.6%</p> <p>iii) Dilemma/not able to decide: 10.8%</p> |
| <p>6. A patient is on regular check up with a dentist for all her treatments. She developed pain in a tooth which was restored a few weeks before. As her dentist was on leave she went to another dentist and he discovered overhanging margins with periodontal involvement in the restored tooth.</p> <p>A. The new dentist should</p> <p>i) Tell no one: 9.6%</p> <p>ii) Inform the patient about the maltreatment by the previous dentist: 21%</p> <p>iii) Re-contour the overhanging restoration without informing the patient: 37.6%</p> <p>iv) Discuss the matter both with the patient and the previous dentist: 28%</p> <p>v) dilemma/not able to decide: 3.8%</p> |
| <p>7. A dentist who knows all possible treatment options, inform the patient only one option for treatment.</p> <p>Do you think which should be followed by the dentist?</p> <p>i) Choices should be explicated and the patient is left to decide: 25.5%</p> <p>ii) Dentist should mention all possible treatments and lead the patient to proper choice: 68.2%</p> <p>iii) Dentist can give opinion only if the patient asks, otherwise he or she can be quiet: 6%</p> <p>iv) It's entirely a dentist's decision about informing the treatment options: 0.3%</p> |

Annexure

| Common Ethical Issues Encountered By Dentists | |
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| a) Treatment associated issues | <ul style="list-style-type: none"> ✓ Poor care by another dentist: 50.3% ✓ Altering low quality work of other dentists: 27.1% ✓ Disagreement with other dentists on treatment: 30.3% ✓ Giving explanation about own treatment failures: 9% ✓ Breaking bad news: 16.8% ✓ Practice inconsistent with standard care (failure to follow universal precaution, over prescription of antibiotics): 13.5% ✓ Advertising: 20% ✓ compromising the treatment due to fee issues: 7.1% ✓ Others (specify) |
| b) Professional behaviour related issues | <ul style="list-style-type: none"> ✓ Unprofessional behaviour of dentist: 49% ✓ Critic comments of other dentists: 40.8% ✓ Over-servicing: 20.4% ✓ dealing the professional issues: 0.7% |
| c) Patient associated issues | <ul style="list-style-type: none"> ✓ Demanding for amalgam-free treatments: 11.8% ✓ Demanding for unsuitable treatment/refusal of treatment plan by the patient: 48.4% ✓ Patients not maintaining the appointments: 24.8% ✓ Patient altering the prescription given by the dentist: 0.7% |
| d) Health Insurance linked issues | <ul style="list-style-type: none"> ✓ Cheating the health insurances: 64.9% ✓ Critic comments by health insurances: 43.3% |

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