

Afraid of Dental Care?... You're Not Alone

Transcending Your Fear

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Can you imagine experiencing a toothache so severe that you wanted to die – yet resisting professional dental care in spite of the pain?

From a physical standpoint, the sensitive nature of the oral environment is well-recognized. The rich supply of nerves and blood in the oral cavity is surpassed by no other area of the human body. This article addresses oral health from a psychological standpoint. In all respects, dental practitioners must treat this area with a delicate touch.

Because an estimated 40 million Americans suffer from fear of dental treatment and over twenty percent of the population experience true dental phobias, the prudent and sensitive dental practitioner remains aware of the psychological parameters associated with the oral environment. The mouth is a highly responsive and intimate area of the human body. As dental patients, we must permit (often reluctantly) other human beings to enter this complex area of personal space. For the true “dental phobic” this is a devastating thought.

Dental phobias can set even the most intelligent and rational individual into a full-blown panic attack, or at the very least, an unhealthy avoidance of routine preventive dental care. Male or female, young or old, virtually anyone at any age can be affected. The fear of dental treatment remains the primary reason for avoidance of professional care, even beyond financial concern. Fears are exacerbated when, due to years of neglect, the patient imagines the magnitude of dental needs. **Most dental phobics exist in denial of their needs for long periods until severe pain or life-threatening infection forces them to seek care.** Even excruciating pain will be endured in order to avoid confrontation of the dental environment. Because dental needs are constant and universal, going without care inevitably causes oral disease processes that may seriously impact general systemic health with life-threatening consequences.

A complex series of life events creates the formation of true phobias. With regard to dental phobias, the origin of fear is often related to a history of trauma in childhood, often, but not always specific to a dental experience. According to Dr. Leonard Horowitz, a leading expert in the treatment of dental phobias, irrational fear of dental treatment develops as a result of actual or

vicarious learning experiences that involve pain, loss of control and/or consciousness, or a real or imagined threat to survival. In the minds of truly phobic patients there exists an unreasonable fear that something catastrophic will occur if dental care is allowed. As Horowitz explains, and consistent with Freudian philosophy, all related physical, mental, emotional, imaginative, social, and environmental experiences are stored in our subconscious. Events or stimuli reminiscent of traumatic experiences trigger a re-emergence of these stored memories. Dental fears specifically may be related to emotional indifference on the part of a previous dentist, especially in childhood. They may be related to a physically traumatic dental experience, particularly common when treatment techniques were more invasive and local anesthetic technology was unavailable. The non-dental origins of dental fears may be related to a single incident of generalized childhood trauma or ongoing abuse, which creates feelings of panic when the patient is placed in a position associated with a high level of physical and emotional vulnerability, as is the case with dental treatment. Very specifically, a history of childhood sexual abuse, particularly with an oral-sexual component to it, may contribute to the formation of a dental phobia, as the patient subconsciously re-lives the helpless experience and vulnerability of oral invasion and the justifiable fear of not being able to escape the situation.

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A multitude of treatments have been used to eliminate dental fears. Standard methods of mental health therapy have been proven successful including a variety of relaxation techniques, desensitization, behavior modification, biofeedback, guided visual imagery and hypnosis. Today, many of these methods are implemented in the standard practice of dentistry, as practitioners are increasingly aware of meeting the needs of their fearful patients' concerns.

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The most significant concerns of phobic dental patients are pain, vulnerability, feelings of being

trapped, embarrassment, and shame. Identifying these issues is important. A heightened sensitivity to light, noise, taste, smells, medications, and an increase in the gag reflex are common to many dental phobias. According to Dr. Robert Gatchel, **an increased sensitivity to pain occurs due to heightened anxiety.** Therefore, pain perception and fear in general can be decreased by employing methods to decrease patient anxiety. Perhaps the most significant means of lessening anxiety in the dental environment rests on the shoulders of the dental team. They must consistently attempt to provide an experience with the least amount of pain. They must remain sensitive relaxed, positive, compassionate, empathetic, and attentive to their patient's verbal cues and body language. The team must be non-judgmental, encouraging the patient to remain open and honest with his/her emotional and physical needs. Permitting the treatment at each appointment to be “patient-paced” is also helpful. Once treatment is begun, the patient must continue to consistently return for care (preferably on a weekly basis) until dentally stable. **The dental phobic patient must continue doing the thing he/she fears, as avoidance exacerbates the fear and promotes a return to previous levels of anxiety.**

A variety of relaxation techniques are often successfully employed with the fearful dental patient, ranging from paced breathing to progressive muscle relaxation. Guided visual imagery also may aid relaxation and distraction. Other distraction techniques such as the use of a head set with relaxing music, books on CD, stress reduction CDs, etc., are also helpful. However, many phobic patients wish to remain aware of the procedures being performed, rather than distracted. This is when it is helpful that the dental team relay information regarding sights, sounds and sensations that can be expected, combined with a running commentary of events as they are performed. Regardless if there will be discomfort, patients need to know what it will be like and, most importantly, how long it will last. Phobic dental patients desire a sense of control over what is happening at their dental visit – they need choices whenever possible. Even details about the flavor of certain medications can be significant in reducing patient fears. Perhaps most critical is that the patient has an immediate and

agreed-upon method of signaling the dentist to stop treatment at any time. Combined, such methods provide virtually guaranteed opportunities to safely reduce anxiety and pain in most patients without the side-effects of hypnotic or sedative medications. The development of successful coping skills for everyday life also occurs.

When a patient is psychologically unable or unwilling to learn techniques to master their fear, sedation dentistry is available by dentists who have trained extensively enough to be allowed to perform such procedures. A variety of levels of sedation are safely available depending upon the dentist's skill and comfort level and the patient's desires.

The maintenance of healthy oral structures during a lifetime is important for physical and psychological reasons. **Dental health most certainly affects how we feel physically and emotional. It can even reflect how we feel about ourselves.** If you have been avoiding dental care due to fear, find a professional dental health team who will respond to your concerns in a sensitive and compassionate way. Help is available.



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