Dentists' Outlook on Advertising in their Line of Work in Bengaluru, India: A Cross-sectional Study

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ABSTRACT

Introduction: Dentistry, being one of the healing professions, has a commitment to society that its members will adhere to high ethical standards of conduct. Dental Council of India (DCI), the regulating body for dental professionals in the country, has also given certain guidelines and regulations on advertising issues. But, studies on dentists' opinion on the issues on advertising for dental professionals in India are very meager. Hence, the aim was to evaluate the opinion on advertising issues among practicing dentists from various dental colleges in Bengaluru, India.

Materials and methods: A descriptive cross-sectional survey was conducted among 258 practicing dentists attached to various dental colleges in Bengaluru city. Chi-square test was used to determine the association of independent variables with each of the main outcome of interest.

Results: Out of 258 practicing dentists, nearly three quarters of practitioners (68.2%) agreed that there is a need for some form of advertising. Among those who agreed that there is a need for advertising, more than half of the practitioners (63.6%) said that it is required for popularity, visibility, and good business. When asked about which form of advertising can largely benefit their dental practice, 29.1% agreed on the patient testimonials, and 25.2% thought ads in magazines and newspapers are useful.

Conclusion: Nearly equal number of practitioners agreed and disagreed on the issue of whether advertising may make dentistry seem more like a trade than a health care service. More than three quarters of them agreed with the use of global advertising and tourism.

Keywords: Advertising, Health care professionals, Professional ethics.

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INTRODUCTION

The definition of advertising has always been mystified. The most reasonable definition gives that "Advertising includes those activities by which visual or oral messages are addressed to public for the purposes of informing them and influencing them either to buy merchandise or services or to act or be inclined favorably toward ideas, institutions, or person's features." The purpose of advertising, then, is to sell goods, ideas, or services, with the objective of causing action and attitude change on the part of the consumer.¹

And, among dentists and other health care professionals, "advertising" has become a very controversial topic that focuses on two questions.^{2,3} First, what are the legal issues related to dental advertising in India and other countries? Second, what are the attitudes toward advertising among practicing dentists and how are these attitudes changing in recent times?

Legal Issues related to Advertising

In most of the countries, advertising by dental professionals has been made legal, with certain guidelines and regulations instilled on them. 4-6 In India, Dentists (Code of Ethics) Regulations Act, 1976 has specified certain rules on advertising by dental practitioners.⁷ According to which, any formal announcement in the press by dentists should be limited to advertisements on starting practice, change of type of practice, a change of address, on temporary absence from duty for a prolonged period of time, resumption of practice after a break or after a long time, on moving to another practice, or about the availability of a new equipment or services. Insertion in telephone directories or yellow pages or maintenance of websites of dentists or dental clinics where all information is factual will not be construed as unethical practice. Advertising otherwise is considered unethical as it may lower the dignity and honor bestowed on the profession, and furthermore, patients (and their families) experiencing health problems are often particularly vulnerable to persuasive influences, such as via unprofessional

advertising. In 2014, revised Dentists (Code of Ethics) Regulations Act was passed with relaxation given to certain rules like size of the signboard.⁸

Changing Dentists' Attitudes toward Advertising

Health professionals have long accepted the custom that health care professionals should refrain from self-promotion, not just because it is thought that they could create a bad public impression and mar the reputation of dentist, but also that the health care professional who is most successful in getting publicity may not necessarily be the most appropriate one to treat a patient. But, providers of dental care are now beginning to experiment with promotional activities as a means to increase business and to remain competitive in their practice. ^{9,10} Also, due to a rapid increase of unemployment among dentists in many countries, the interest in advertising as a means of stimulating the demand for dental care is increasing. ^{11,12}

Changing Dentists' Attitudes toward Advertising in India

For health care professionals in India, the notion of advertising to promote a professional practice is relatively new. And it is seen that advertising by health care professionals has increased discreetly during the past decade, and this trend seems likely to continue. Various modalities of advertising are prevalent in India. External communications like ads in magazines and newspapers, announcing comparatively low fees, free check-ups, and complimentary gifts as well as internal communications like practice brochures, business cards, in-house information centers, thank you notes, and direct mail to patients are prevailing. 2,3,13 But studies on dentists' opinion on the issues of advertising are very meager in India. Hence, the aim of this study was to evaluate the opinion on advertising issues among practicing dentists from various dental colleges in Bengaluru, India.

MATERIALS AND METHODS

A descriptive cross-sectional study was conducted among 258 practicing dentists attached to various dental colleges in Bengaluru city. There are 16 dental colleges in Bengaluru city, registered under the Dental Council of India (DCI). Since, no reference is given on the total number of practicing dentists working in dental colleges in Bengaluru, the colleges were divided into four zones as north, south, east, and west zones and two colleges were selected from each zone by lottery method. There were about 400 practicing dentists working in these colleges, all of whom were included in the study. All the practicing dentists who were present on the day of interview and those who gave informed consent were included in

the study. There were 351 dentists present on the days of interview, of whom, 340 practicing dentists agreed to participate. Ethical clearance was obtained from the Institutional Ethics Committee of Bengaluru Institute of Dental Sciences, Bengaluru, where the study was conducted. Permission was taken from principals of dental colleges and written informed consent was obtained from the subjects, and the study objectives and questionnaire were briefly explained. The distributed questionnaires were collected back at the end of the day or on consecutive days. The examiner went over again to ensure maximum participation of respondents.

The questionnaire was developed based on the study objectives, taking guidance from previous literature.^{2,3} Study tool consisted of two sections. The first part consisted of five questions on the respondents' personal and professional background, such as age, gender, qualification, years of practice, and type of employment. Second part consisted of 12 questions on dentists' attitudes/opinions on advertising.

A pilot study was conducted to assess comprehension of the questionnaire and necessary modifications were done.

Statistical Analysis

The data collected were analyzed using the statistical package Stata 10 (Stata Corp. 2005; Stata Statistical Software: Release 9. College Station, TX: Stata Corp LP, USA). Statistical significance was set at 5% level of significance (p<0.05). Chi-square test was used to determine association of each of the independent variables (gender and qualification) with each of the main outcome of interest.

RESULTS

Out of 340 questionnaires distributed to practicing dentists, 274 questionnaires were returned (response rate=81%). Among these, only the completed questionnaires (n=258) were considered for analysis.

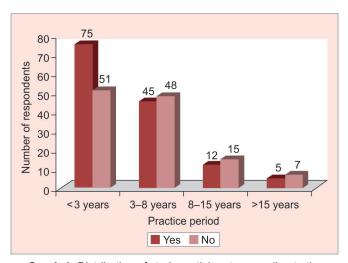
Out of 258 practicing dentists, 121 (46.9%) were males and 137 (53.1%) were females; 50 (19.4%) were graduates and 207 (80.6%) were specialists. Most of them were practicing for less than 3 years (48.4%), followed by 36.4% practicing for 3 to 8 years. Around half of them had solo type of practice (47.3%), followed by group practice by 31.8%, and 20.9% were available for consultations (Table 1).

Nearly three quarters of practitioners (68.2%) agreed that there is a need for some form of advertising. Proportion of dentists agreeing with advertising decreased with age, which was statistically significant (Chi-square value = 8.22, p < 0.05) (Graph 1). Among those who agreed that there is a need for advertising, more than half (63.6%) said that it is required for popularity, visibility, and good

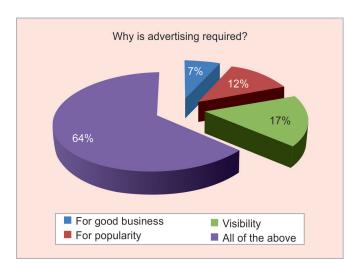


Table 1: Distribution of study participants according to sociodemographic details

Variable		n (%)
Gender	Male	121 (46.9)
	Female	137 (53.1)
Qualification	BDS	50 (19.4)
	MDS	207 (80.6)
Practice period	<3 years	125 (48.4)
	3–8 years	94 (36.4)
	8-15 years	27 (10.5)
	15 years and above	12 (4.7)
Practice type	Private solo	122 (47.3)
	Private group	82 (31.8)
	Consultation	54 (20.9)



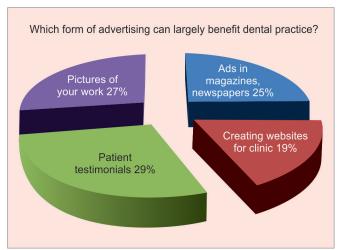
Graph 1: Distribution of study participants according to the need for advertising according to practice period



Graph 2: Distribution of study participants according to the reason for advertising

business (Graph 2). When asked about which form of advertising can largely benefit their dental practice, 29.1% agreed on the patient testimonials, and 25.2% thought ads in magazines and newspapers are useful (Graph 3).

Distribution of study participants according to their response to advertising-related questions is given in



Graph 3: Distribution of study participants according to the preferred type of advertising

Table 2. A vast majority of them (62%) did not agree that those who do not advertise are seen as inferior. Nearly half (48.1%) of the study participants did not agree including advertising along with education in TVs and magazines, while there were proportionally many practitioners who thought that there is a need for DCI to consider and relax this restraint (32.9%). About 44.6% of them did not agree using attractive pictures, wordings, or symbol other than the name, qualification, and address. A majority of the practitioners, i.e., 166 (64.3%), said that they did not agree in affixing any signboard in pharmacist's shop or in other places where the dentist does not work.

Nearly half of them (122, 47.3%) agreed that advertising and marketing by dental professionals can serve the community by ensuring better quality services and approach. Nearly equal number of practitioners agreed and disagreed on the issue of whether advertising may make dentistry seem more like a trade than a health care service. Most of them (81%) agreed with the use of global advertising and tourism. Analogous to their opinion on the need for advertising, 149 (57.8%) of them disagreed with Indian government's restrictions on advertising by health care professionals.

DISCUSSION

The revised Dentists (code of ethics) Act, 2014 also gives that: "... A dentist or a group of dentists may advertise provided that they maintain decorum, keeping in mind the high moral obligations and the value that the society places on the important nature of their work and the moral character and integrity expected of them." Accordingly, in the present study, more than half of the respondents are in favor of advertising by dental professionals. Most of them thought that patient's testimonials can largely benefit dental practice, followed by the pictures of their work, as compared with website creation and ads in magazines

Table 2: Frequency distribution of study participants according to responses to advertising-related questions

	Responses			Yes			Yes		
			Don't know/			Chi- square	General		Chi- square
	Yes	No	not sure	Males	Females	value	practitioners	Specialists	value
Are the dental practices that do not advertise seen as inferior?	54 (20.9%)	160 (62.0%)	44 (17.1%)	28 (23.1%)	26 (19.0%)	3.65	17 (34.0%)	37 (17.8%)	7.05*
Do you agree the inclusion of advertisement along with education in TVs and magazines?	85 (32.9%)	124 (48.1%)	49 (19.0%)	54 (44.6%)	31 (22.6%)	23.29*	13 (26.0%)	72 (34.6%)	2.51
Do you agree using attractive pictures, wordings, or symbol other than name, qualification, and address?	92 (35.7%)	115 (44.6%)	51 (19.8%)	57 (47.1%)	35 (25.5%)	13.82*	22 (44.0%)	70 (33.7%)	5.38
Do you agree fixing of a signboard on pharmacist's shop or in places where you do not work?	54 (20.9%)	166 (64.3%)	38 (14.7%)	27 (22.3%)	27 (19.7%)	0.55	12 (24.0%)	42 (20.2%)	7.61*
Can advertising and marketing by dental professionals serve the community by ensuring better quality services and approach?	122 (47.3%)	75 (29.1%)	61 (23.6%)	61 (50.4%)	61 (44.5%)	3.77	21 (42.0%)	101 (48.6%)	5.43
Advertising may make dentistry seem more like a trade than a health care service and this could be hazardous to the reputation of the dentistry being a noble profession.	118 (45.7%)	120 (46.5%)	20 (7.8%)	52 (42.9%)	66 (48.2%)	1.77	20 (40.0%)	98 (47.1%)	2.77
Do you agree with the use of global advertising and dental tourism?	209 (81.0%)	26 (10.1%)	23 (8.9%)	65 (53.7%)	71 (51.8%)	2.35	43 (86.0%)	166 (79.8%)	6.27
Do you agree with the Indian government's restrictions on advertising by health care professionals?		91 (35.2%)	45 (17.4%)	65 (53.7%)	71 (51.8%)	1.83	20 (40.0%)	116 (55.8%)	4.02*

^{*}p-value < 0.05, Significant

and newspapers. This can be explained by the realism that patients' testimonials are more trustworthy to the clientele/patients. These results are similar to other studies which have shown that dentists should consider the use of internal communications as effective alternatives to advertising. ^{2,11} The aim should be to communicate the clinic's services in a patient-specific caring tone, rather than an impersonal message directed at a mass of consumers. ^{13,15}

Majority of them said that practitioners who do not advertise are not seen as inferior, as many believed that good work and dedication by dentists are sufficient to advance their practice. This shows that most of them believed that advertisement is helpful, but not an obligation that ought to be done "... to indulge in surrogate advertisements in the garb of educating the public through TV programs, magazines or periodicals. Any

public information disseminated to the public in good faith and intention should not carry addresses, telephone numbers, email addresses, etc., of the dental surgeon or the clinic...."⁸ Accordingly, more than half of them did not agree on including advertising along with education in TVs and magazines, yet, there were many, who thought that there is a need for DCI to consider and relax this restraint. Earlier, the DCI had defined the clinic board size to be 3×2 feet, which has now been relaxed.^{7,8}

"... to use or exhibit any disproportionately large sign, other than a sign which in its character, position, sign and wording is merely, such as may reasonably be required to indicate to persons seeking the exact location of, and to, the premises at which the dental practice is carried on, and nowhere else..." Likewise, a majority of them did



not agree fixing a signboard on pharmacist's shop or in places where they do not reside or work.

When asked on their opinion on using attractive pictures, wordings, or symbol other than name, qualification, and address, mixed response was noticed, wherein approximately equal number of dentists agreed and disagreed. In a study conducted by Sabarinath and Sivapathasundharam,³ a majority of the dental practitioners used disproportionately large signs or pictures or symbols in their signboards. This points to the fact that, in the present-day digital banner era, simple signboards of a dental clinic may become camouflaged near the more colorful and glamorous embellishments of present-day store/establishment. Hence, there is need for the DCI to relax this regulation.

A great majority of practitioners agree with the use of global advertising and dental tourism. Since India has an abundance of qualified and skilled doctors who can provide state-of-the-art medical and dental care at a fraction of the cost which doctors in the West charge, there is a tremendous scope to export our medical and dental services. If we learn to advertise Indian medical services worldwide effectively, we will be able to attract patients from all over the world, and these services can become a big foreign exchange earner for India.

A significant majority viewed that advertising and marketing by dental professionals serve the community well again by ensuring better quality services and approach. This implies that practitioners view advertising as a mode to increase the visibility of the dental health care and in turn improving the awareness and eagerness for improving oral health in the society.

In today's world of web connectivity, there is a need for improving visibility of dental practice through this media as well. But, the DCI guidelines on Internet/online advertising by dental professionals are still a bit hazy.

The present study had certain limitations. It assessed the dental practitioners' opinion on advertising using a self-structured questionnaire limited to a sample size of 258 using convenience sampling. This study would have been more convincing if the sample size was more.

CONCLUSION

Nearly three quarters of practitioners agreed that there is a need for some form of advertising. Proportion of dentists agreeing with advertising decreased with age. Nearly equal numbers of practitioners agreed and disagreed on the issue of whether advertising may make dentistry seem more like a trade than a health care service. More than three quarters of them agreed with the use of global advertising and tourism.

We need to look at the realism for the need of advertising carefully. Without advertising, young doctors who have

just started practice might find it difficult to get patients since patients will never know of their existence, skills, and expertise. Many young professionals, who have spent long years to qualify and have taken loans to start practice, cannot afford to sit back and wait. But, advertising has a downside too. Advertising may cause practitioners to start treating their patients as clients or customers, rather than as patients. Hence, there is a need to advertise, provided they do not bring any dishonor to the profession. That is why, dentists, especially the young budding professionals, need to be educated on the dos and don'ts in their BDS curriculum as well as continue doing so via professional development programs and association meetings.

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