

# Assessment of the Lifestyle Changes Experienced by Dental Professionals before and during COVID-19 Lockdown: A Comparative Pilot Study

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## ABSTRACT

**Aim:** This pilot study was conducted to assess the impact caused to dental professionals of Tamil Nadu before and during the lockdown period toward lifestyle, psychological, and financial aspects.

**Materials and methods:** An online cross-sectional survey among the dental practitioners of Tamil Nadu was done using Google Form for 2 weeks from 1st to 3rd week of June 2020. Totally 26 questionnaire comprising about routine activities, family time, work related, psychological, and financial aspect were asked and their responses in relation to before and during the lockdown period were obtained. Snowball sampling technique was used to collect the data. The obtained results were statistically analyzed using Chi-square and McNemar tests with a significance level of 95% ( $p < 0.05$ ).

**Results:** Prolonged lockdown has resulted in a delay in wake-up time (44.7%), more indoor activities (60%), and improved bonding with family (64.4%). Financially, most of them (62%) relied on previous savings during the lockdown period and 41.3% were confident about meeting their financial needs after lockdown. Majority of them (59.4%) did not expect support from government as they were self-confident about their practice. About 66.3% used this lockdown period to develop new hobbies such as cooking, painting, yoga, and meditation.

**Conclusion:** COVID-19 has impacted dental professionals substantially. The effects caused by COVID-19 were not confined only to their professional life but also influenced them personally and psychologically. This pilot study gives an insight about how COVID-19 has changed the lifestyle of dentists in Tamil Nadu before and during lockdown.

**Clinical significance:** The impacts caused due to lifestyle changes of dentists in Tamil Nadu have been discussed in this pilot study. The results of this study was useful to predict and propose the lifestyle changes experienced by dentists before and during the lockdown period. Majority of the dentists were ready to continue the positive habits developed during the lockdown. Hence, it is important to publish these results to understand the psychosocial well-being of the dentists in such situations.

**Keywords:** COVID-19, Dentist, Lifestyle, Lockdown.

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## INTRODUCTION

Lifestyle is defined as a way of life that incorporates the interaction of living situations and individual habits, with sociocultural variables and personal qualities playing a key role.<sup>1</sup> As COVID-19 became pandemic and posed a widespread hazard to the public health, lockdown was imposed by the Government of India from March 2020 onward. This lockdown had reshaped everyone's lifestyle, either directly or indirectly. The lifestyle changes that happened during this pandemic is not a natural one, which was welcomed by humans, but due to a forced condition caused by COVID-19.

Sudden change in pattern of work, continuous stay at home, frequent snacking, financial losses, continuous usage of mobile phones, and increase in watching television coupled with less productive activity have been associated with deleterious effects on the human race. On the other hand, lockdown has also resulted in spending more time with family, learning new skills, developing new habits which helped in rejuvenating the individual in this pandemic. It is accepted that these lifestyle changes have strong physiological and psychological implications in the lifestyle of the common man.<sup>2</sup>

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But, lifestyle changes are not the same and uniform for everyone. During this pandemic era, dentists and their medical colleagues were in charge of COVID-19 ward tasks in a number of locations. Their proximity to risk is higher than that of other health care providers.

Dentists, as frontline health care providers, are at a significant risk of transmitting the SARS-CoV-2 virus through droplets created during procedures and inhaled salivary particles.<sup>3,4</sup>

In these pandemic hours, dentistry has seen significant modifications. Because of the risk of viral transmission, several dentists have decreased their working hours and some have entirely shut down their practices since March 2020. During the first and second lockdown periods, the situation generated by an unusually extended period of restricted working hours/complete shutdown had a significant impact on dentists' lifestyles. Long-term confinement (at home) due to lockdown can have an impact on every element of their lives, including everyday activities, family time, economic and psychological aspects.<sup>5</sup>

Dentists' mental health is not well investigated or reported because of their lifestyle choices. The findings of this pilot study will aid in understanding dental surgeons' mindsets and problems during stressful days. The findings of such research would also aid statutory entities such as the Indian Dental Association and the Dental Council of India in making recommendations to state and federal governments. As this was a pilot study, it was decided to conduct the survey in Tamil Nadu. The aim of this research is to learn more about the lifestyle changes the dentists in Tamil Nadu have gone through before and during the lockdown.

## MATERIALS AND METHODS

An online cross-sectional survey among the dental practitioners of Tamil Nadu was done using Google Form. The form was left open for 2 weeks from 1st to 3rd week of June 2020, during which time the author and crew evaluated the responses. Convenience sampling technique was used in this study and through snowball sampling method the study was conducted. As this was a pilot study, sample size estimation was not done. Since the questionnaire was distributed through social media, there were no restrictions on the number of participants. Instead, time limitation was followed to get the responses. With the support of the Tamil Nadu IDA forum, the form was distributed among dentists *via* social media platforms including as Whatsapp, Facebook, and Instagram.

Four investigators were involved in the study. The framed questions were subjected to validation before uploading to Google Form. The content validity was checked with relevance to its aim by three experienced research scholars/professionals of this field. The face validity was checked using "Reverse Translation" method. The questionnaire developed in English was translated to Tamil by two professional translators and again from Tamil to English. A pilot study was conducted with 30 respondents.

The final validated questionnaire had 26 structured questionnaires (20 closed and six open-ended) in relation to the study's goals and objectives. To enable the desired findings, the questions were categorized into six sections, taking into account all aspects of living style between before and during the lockdown period. The key factors that were assessed included questionnaire related to their routine activities, family time, work related, psychological aspects, finance, and lifestyle (Table 1). The online survey link was provided. The respondents who were willing to participate in the study were asked to give their consent for participation after reading

the objectives of the study and declaration from investigators about confidentiality of their responses.

Responses from those dentists who willingly participated in the study were included. The responses obtained only from Tamil Nadu state were included in the study. Those forms which were incompletely filled and those with experience of less than a year were excluded from the study. Six hundred and five responses were obtained. Comparison to the before and during the lockdown period, as well as the data that were statistically analyzed using Chi-square and McNemar tests with a significance level of 95% ( $p < 0.05$ ).

## RESULTS

There were a total of 605 respondents, and 41 were removed from the study following final evaluation due to incomplete submissions. In the end, 564 samples were used in the research. The response rate was 93.2% for this study.

Section 1: basic demographic information of the 564 participants, males (318, 56%) outnumbered females (246, 44%). Nearly 80% of the participants (434, 82%) were married, 344 (61%) were MDS graduates, and 222 (39%) were BDS graduates. Participants ranged in age from 40 to 50 years old, 33% from 30 to 39 years old, 23% from less than 30 years old, and the oldest group was more than 50 years old (6%). These graduates were divided into three groups: 48% worked in private practice, 22% worked in academia, and the remaining 30% worked in both private practice and academia. Around 40% of the participants had more than 15 years of expertise in the field.

The responses in relation to key factors (routine activities, family time, work status, psychological aspects, financial status, and lifestyle related) were given in Table 1. Based on the given responses by respondents, the results are summarized below.

### Routine Activities

This section comprised of four questionnaires—wake up time, fitness activity, activity at home, and recreation.

In relation to wake up time among 564 (100%) participants, only 88 (15.6%) woke up by 5–6 am during the lockdown. It was also revealed that majority about 80% of the participants woke after 5–6 am. Among 183 participants who woke up by 5–6 am before lockdown, only 69 of them woke up in the same time. Among 269 members who woke up by 6–7 am before lockdown, only 122 participants woke up at 6–7 am during lockdown. The difference between before and during lockdown was found to be statistically significant (0.000).

Fitness activity revealed that 242 (42.9%) of participants were involved in doing exercises in home. When compared with respect to outdoor activities like cycling or walking, 168 were involved before lockdown whereas only 67 were involved during lockdown. However, the differences between before and during lockdown were not found to be statistically significant.

Responses pertaining to activities at home like cooking, buying vegetables/groceries, and cleaning the house/washing vessels or clothes options were compared before and during lockdown. One hundred and ninety (33.7%) were involved in all the activities at home during the lockdown. 31.6% were involved in at least any one type of home activities in which buying vegetable and groceries predominated followed by cooking. The differences were not found to be statistically significant.

Regarding recreation practiced the options like reading books, watching movies, playing outdoor/indoor games were suggested,

Lifestyle Changes among Dentist before and during COVID-19 Lockdown

**Table 1:** Assessment of the lifestyle changes experienced by dental professionals before and during COVID-19 lockdown: a comparative pilot study

*Assessment of the lifestyle behavioral, psychological, and economical changes among the dental professionals before and during COVID-19 lockdown—a comparative study* *p-value*

<i>Section 1 (basic information)</i>		<i>Options</i>				
1	Age	20–30 years	30–40 years	40–50 years	50 plus years	
2	Sex	Male	Female			
3	Marital status*	Single	Married			
4	Working status*	Confined to college only	Private practice/consultation only	Both		
5	Year of experience*	1–5 years	5–10 years	10–15 years	More than 15 years	
<i>Section 2 (routine activities)</i>						
<i>Sl. no.</i>	<i>Questions</i>	<i>Options</i>				
1	What was your regular routine wake up time?	Before 5 o' clock	5–6 am	6–7 am	After 7 am	
	Before lockdown	36 (6.3%)	183 (32.4%)	269 (47.6%)	76 (13.4%)	0.000
	During lockdown	25 (4.4%)	88 (15.5%)	199 (35.3%)	252 (44.7%)	
2	Name the fitness activities you were involved in	Outdoor walking/cycling	Gym/yoga	Exercising at home	Nil	
	Before lockdown	186 (32.9%)	97 (17.3%)	118 (20.9%)	163 (28.9%)	>1
	During lockdown	95 (16.8%)	102 (18.1%)	242 (42.9%)	125 (22.2%)	
3	Name the activity/activities you were involved in at home	Cooking	Buying vegetables/groceries	Cleaning the house/washing (vessels/clothes)	Nil	
	Option chosen	Any one	Any two	Any three		
	Before lockdown	165 (29.2%)	158 (28%)	121 (21.5%)	120 (1.3%)	
	During lockdown	67 (11.9%)	130 (23.1%)	170 (30.1%)	197 (34.9%)	
4	Mention any recreation practice that you indulge in	Reading novels	Watching movies	Outdoor games	Indoor games	
	Option chosen	Any one	Any two	Any three	All four	
	Before lockdown	71 (12.5%)	249 (44.2%)	187 (33.16%)	57 (10.2%)	>1
	During lockdown	127 (22.5%)	283 (50.2%)	29 (5.14%)	125 (22.2%)	
<i>Section 3 (family time)</i>						
5	How many hours of quality time you spend with your children at home?	1/2–1 hour	1–2 hours	More than 2 hours	Not applicable	
	Before lockdown	95 (16.8%)	150 (26.5%)	144 (25.5%)	175 (31.02%)	0.000
	During lockdown	8 (1.4%)	31 (5.5%)	363 (64.4%)	162 (28.7%)	
6	How many hours of quality time you spend with your spouse in a day?	1/2–1 hour	1–2 hours	More than 2 hours	Not applicable	
	Before lockdown	123 (21.8%)	153 (27.1%)	141 (25%)	147 (26.1%)	0.000
	During lockdown	28 (5%)	45 (8%)	343 (60.8%)	148 (26.2%)	
7	How will you rate the bonding you share with your spouse?	Remains the same	Improved	Deteriorated	Not applicable	
	Before lockdown	351 (62.23%)	62 (10.99%)	10 (1.77%)	141 (25%)	0.000
	During lockdown	226 (40.1%)	181 (32.1%)	25 (4.4%)	132 (23.4%)	

Contd...



Lifestyle Changes among Dentist before and during COVID-19 Lockdown

Table 1: Contd...

Assessment of the lifestyle behavioral, psychological, and economical changes among the dental professionals before and during COVID-19 lockdown—a comparative study						p-value
8	How often did you communicate with your friends/family members?	Daily	Every alternate days	Once in a week	Rarely	
	Before lockdown	211 (37.3%)	84 (14.9%)	154 (27.3%)	115 (20.4%)	0.000
	During lockdown	269 (47.7%)	124 (22%)	120 (21.3%)	51 (9%)	
<i>Section 4 (work related)</i>						
9	How frequently were you able to attend online discussions/courses in a month?	Nil	1 or 2 in a month	2–5 in a month	More than 5 in a month	
	Before lockdown	346 (61.3%)	179 (31.8%)	22 (3.9%)	17 (3%)	0.000
	During lockdown	52 (9.2%)	141 (25%)	142 (25.2%)	229 (40.6%)	
10	What kind of online discussions/webinars you attended?	Related to dentistry/specialty	COVID-19 guidelines and post-COVID practice	Health related like yoga/meditation	Lifestyle impact related talks. Inspirational/finance	
	Before lockdown	417 (74%)	102 (18%)	28 (5%)	17 (3%)	0.000
	During lockdown	95 (17%)	351 (62%)	67 (12%)	51 (9%)	
11	How many hours a day do you work daily?	Less than 6 hours	6–8 hours	8–10 hours	More than 10 hours	
	Before lockdown	52 (9.2%)	193 (34.2%)	200 (35.4%)	119 (21.09%)	0.000
	During lockdown	329 (58.3%)	122 (21.6%)	62 (11%)	51 (9%)	
12	How do you assess your daily workload?	Manageable	Increased	Stressful	Not applicable	
	Before lockdown	320 (56.7%)	109 (19.32%)	135 (23.9%)	320 (56.7%)	0.012
	During lockdown	374 (66.3%)	88 (15.6%)	102 (18.1%)	374 (66.3%)	
<i>Section 5 (psychological aspects)</i>						
13	How do you rate your stress level?	Normal	Mild	Moderate	Severe	
	Before lockdown	171 (30.3%)	142 (25.1%)	178 (31.5%)	73 (12.9%)	0.017
	During lockdown	162 (28.7%)	134 (23.8%)	150 (26.6%)	118 (20.9%)	
14	What was the reason for the stress you experienced?	Managing practice/workplace	Managing finance/loans	Managing family	Maintaining good health	
	Before lockdown	186 (33%)	299 (53%)	56 (10%)	23 (4%)	0.000
	During lockdown	28 (5%)	39 (7%)	153 (27%)	344 (61%)	
15	How did you manage your stress before lockdown?					
16	How did you manage your stress during lockdown?					
<i>Section 6 (finance related)</i>						
17	How do you manage your financial needs every month?	Private practice/monthly salary	Other business/rental income	Parents/spouse help	Previous savings	
	Before lockdown	113 (20%)	293 (52%)	102 (18%)	56 (10%)	>1
	During lockdown	130 (23%)	349 (62%)	34 (6%)	51 (9%)	
18	Do you think that you will be able to manage your financial needs postlockdown?	Yes	No	Somewhat	Not sure	
		233 (41.3%)	45 (8%)	213 (37.8%)	73 (12.9%)	

Contd...

**Table 1:** *Contd...*

<i>Assessment of the lifestyle behavioral, psychological, and economical changes among the dental professionals before and during COVID-19 lockdown—a comparative study</i>			<i>p-value</i>	
19	Do you expect any kind of support from the Government to support your financial needs?	Yes 229 (40.6%)	No 335 (59.4%)	
20	If yes, please mention what kind of support you expect.			
<i>Section 7 (lifestyle related)</i>				
21	Did you develop any new hobbies during the lockdown period?	Yes 245 (43.4%)	No 319 (56.6%)	
22	If yes, kindly mention			
23	Did you experience any lifestyle changes during the lockdown period?	Yes 374 (66.3%)	No 190 (33.7%)	
24	If yes, kindly mention them.*			
25	In future, do you wish to adhere to the same lifestyle changes you developed even after the lockdown ends?*	Yes 360 (63.8%)	No 204 (36.2%)	
26	Kindly justify your answer for above question			

for which 57 (10.2%) indulged in all the four activities, 187 (33.1%) any three activity, 249 (44.2%) in only two, and 71 (12.5%) in only one before lockdown, whereas during lockdown almost 125 (22.2%) indulged in all four, 29 (5.14%) in three activities, 283 (50.2%) in two, and 127 (22.5%) in at least one activity.

### Family Time

This study has revealed that majority of them can spend more than 2 hours of meaningful time with their children and spouse during lockdown, which was not possible before the lockdown period. However, majority of them gave their responses that their bonding with spouse improved during lockdown period as they could spend more time with them. However, 40% have told that their bonding remained the same. Regarding communication with friends daily and in every alternate days have showed difference when compared to once in a week or rarely.

### Work Status

Before lockdown 74% had chance to attend only one webinar, but during lockdown 62% of members attended at least two webinars in a day. Before lockdown there was a tendency to attend webinars in relation to dentistry followed by yoga/meditation and lifestyle activities which changed during lockdown that most of them—229 (40.6%) were keen about listening to COVID guidelines. Secondary

importance was given to webinars related to dentistry and health with equal weightage which signified their priorities.

### Psychological Aspects

Before lockdown 73 (12.9%) had severe, 178 (31.5%) had moderate, and 142 (25.1%) had mild stress, while during lockdown 118 (20.9%) had severe, 150 (26.6%) had moderate, and 134 (23.8%) had mild stress, which revealed that the stress level was considerably increased for various reasons like managing practice and financial commitments 153 (27%) and most importantly maintaining the good health of self and family 344 (61%) was the main concern.

### Financial Status

Regarding financial needs, before lockdown, 113 (20%) managed with only one source, whereas 130 (23%) managed with a single source during lockdown. Two hundred and ninety-three (52%) managed with any of the two sources before lockdown whereas 349 (62%) did with double sources during lockdown. Fifty-six (10%) managed with all the four sources (private practice, other business, parents help, and previous savings) before lockdown and 51 (9%) during lockdown.

About managing their financial needs, 233 (41.3%) were able to do that postlockdown, whereas 213 (37.8%) felt as somewhat

okay and 23 (12.9%) was not sure about that. Majority of them, 335 (59.4%) did not want support from the government regarding financial aspects.

### Lifestyle Related

Three hundred and seventy-four (66.3%) experienced lifestyle change during lockdown whereas 245 (43.4%) developed new hobbies. Majority of the participants 360 (63.8%) out of 564 had said that they wanted to continue the same lifestyle they developed during lockdown.

## DISCUSSION

During any pandemic, the role of health care providers is unavoidable. Changes in lifestyle have a direct impact on physical, mental, and emotional health.<sup>6</sup> According to Brooks et al., health-care workers expressed higher anger, fear, and despair, implying the significance of psychological support for health care workers, including dentists, during pandemics.<sup>7</sup> During the SARS epidemic in Hong Kong in 2003, Lau et al. found greater social and family support as well as favorable lifestyle modifications among Hong Kong people.<sup>8</sup>

By comparing the parameters between before and during the lockdown period that began in March 2020, the current cross-sectional survey gives a glimpse of the lifestyle changes and economic situation of dental practitioners of Tamil Nadu.

The questions on routine activities were divided into four categories, as shown in Table 1: wake-up time, fitness activity, activity at home, and recreation. Questions about family time covered time spent with the spouse, children, their bonding and communication with friends. Online discussions, webinars, working hours, and workload were all mentioned as work related topics. Psychological factors were used to assess stress-related questions. Before and during the lockdown, financial needs were investigated. During the lockdown, new hobbies were also investigated.

Before lockdown, 47.6% of dentists woke up between 6 and 7 am but during lockdown only 35.3% of them could maintain the same time. Before lockdown, only 13.4% of dentist woke up after 7 am but, during lockdown, the percentage increased to 44.7% which implies that many of them became lethargic during lockdown. Prior to the lockdown, the majority of members (32.9%) participated in outside activities, but due to the influence of the lockdown, this has changed to exercising at home (42.9%). In addition, when compared to the prelockdown period, we saw a significant favorable influence on dental professionals' health concerns, as they spent more time engaging in physical activities (60%) such as exercising, yoga, and meditation. However, the percentage of members who do not engage in physical activity has also increased. This was contradictory with the study conducted by Chopra et al. which showed that there has been a decline in physical activity levels, despite the recommendations that COVID-19 preventive measures should not hinder people from being physically active.<sup>9</sup> A reduction in engagement in physical activity at all levels coupled with increase in daily sitting and screen time due to confinement was prominently found across the literature.<sup>10,11</sup>

According to the findings of our survey, it was found that, the majority of the dentist (64.4%) spent more than 2 hours of meaningful time with their children and spouse during lockdown, which they could not do before the lockdown. The majority of them stated that their bonding with their spouse enhanced during the lockdown period since they were able to spend more time with them. However, 40% of respondents said their bonding stayed the

same. When it comes to communicating with friends, everyday and alternating days have shown a difference when compared to once a week or maybe once in a while. These results were in line with the findings of Lau et al. who looked at the pandemic phase that occurred during the year.<sup>12,13</sup>

Shacham et al. investigated the relationship between COVID-19 variables and psychological factors in dental professionals with increased psychological distress.<sup>14</sup> Their findings revealed that those with a history of sickness, those who feared catching COVID-19 from a patient, and those with higher subjective overload all had higher psychological discomfort. Being in a committed relationship and having stronger self-efficacy were linked to lower psychological discomfort.

Laureano et al. suggested the importance of psychological attention to health professionals, including dentists, during pandemics in their review article, which corroborates findings from a recent review on the effects of quarantine in previous outbreaks, which found that health professionals were more psychologically affected, reporting more anger, fear, and sadness.<sup>15</sup>

In this study, stress, which is the root cause of psychological and physiological disorders, was examined and compared between before and during the lockdown period. Prior to the lockdown, it was discovered that the majority of the stress was caused by two factors: managing practice and financial demands (31.5%). However, during the lockdown, the same level of stress was shifted to a variety of reasons, including concerns about managing dental practices (due to long-term clinic closures) and financial needs (26.6%), as well as the fear of maintaining good health (26.7%) and family members (28.7%).

However, for a small percentage of our participants, the dread of not practicing, as well as the limitations on patient visits and clinic opening, increased stress levels and caused habitual behavior changes (12%).

It was predicted that during the lockdown period, spending would be reduced and the family's financial needs would be managed more effectively.<sup>16,17</sup> When asked about their financial needs and how they would meet them, the majority of our participants (52%) said they would meet them with other sources of income such as monthly salaries, rental income, and, most importantly, their previous savings (62%) would keep them afloat during the lockdown period.

When financial needs were assessed prior to the lockdown, it was discovered that the majority of the members relied on at least two sources of income: revenue from private practice or college salaries, and rental income. During the lockdown, however, because private practice was slowed down, this was the last choice to be chosen. Participants who worked in colleges were paid on a monthly basis by their employers, while other private practitioners believed that it was their previous savings that rescued them during the lockdown. Some of the participants (18%) were fortunate enough to have their parents assist them as well.

When asked if they are confident in their ability to manage their financial demands following the lockdown, 41.3% of the dentist agreed with the above statement. When asked if government assistance was required to manage their financial needs, the majority of the dentists said no (59.4%) since they were self-sufficient with other resources. The responses of the dentists pertaining to the financial needs were coherent showing their honesty of participation in this survey.

This conclusion contradicted the findings of Gasparro et al. and Ghani, who claimed that public health policies and government

funding allocation should be blamed because their findings revealed high levels of employment insecurity among dentists due to fear of COVID-19.<sup>18,19</sup>

Another plus is that the majority of our participants (66.3%) used the lockdown period to develop new hobbies (cooking, managing household chores, indoor games, yoga, and meditation) and make new healthy lifestyle changes (spending quality time with spouse and children, following a physical fitness routine, saving money, updating knowledge). And, most crucially, they all felt compelled to maintain the same lifestyle shift they had made for the rest of their lives, even when the lockdown ended.

To our knowledge, this is one of the first studies to analyze and compare the influence of the COVID-19 shutdown on lifestyle modifications and economic status among dental practitioners of Tamil Nadu. The study's most notable strength is the inclusion of a few open-ended questions, allowing participants to record their perspectives or personal experiences that cannot be represented through closed-ended questions. This was particularly helpful in gathering information about stress management, new hobby development, and lifestyle change ideas before and during lockdowns, which was then collated into Table 2.

Despite the fact that various lifestyle recommendations are practiced during pandemics on an international and national level, our findings shed light on possible ideas and innovations that we can be aware of in order to effectively handle the current situation and implement the same more effectively to minimize the negative impact of the COVID-19 pandemic.<sup>20-23</sup>

The sole restriction mentioned in this study is that we limited the survey population to dental practitioners of Tamil Nadu alone, whereas it was possible to obtain more data using the social

**Table 2:** New hobbies/habits developed by dentists during lockdown based on the open ended questions

<i>Habits that can be developed</i>		
<i>To manage stress</i>	<i>As new hobbies</i>	<i>To have a change in lifestyle</i>
Playing musical instruments keyboard, flute, piano, drums, guitar	Glass painting	Agriculture, farming, crop cultivation, carpentry
Reading books— spiritual, novels	Stitching and gardening	Gardening, terrace gardening
Baking, cooking, arts and crafts, YouTube channel	Pencil sketching, craft, sewing, painting, and knitting	Preparing e-content for students
Writing poems	Bottle painting, pencil sketching, shuttle cock and exercises	Spending time with nature... feeding birds
Outdoor games, shuttle, cycling, badminton	Photography, learned new software	Playing indoor games—carom, chess
Yoga, meditation	Culinary skill	Exploring YouTube channels, self improvement blogs
	Trying to learn a new language, carnatic music	

network in the current scenario. Since this is a pilot study and limited to dental practitioners of Tamil Nadu alone, the current study's findings cannot be considered as conclusive and representative of dental practitioners on a national level. However, the findings of our pilot study, can act as a base for conducting further studies of similar kind in a larger scale.

## CONCLUSION

The lockdown and its attendant balancing of everyday work and family life routines was a welcome adjustment. The participants were also financially secure because they had a greater educational background than the rest of our country's populace. More research is needed to determine whether the observed improvements will stay overtime, even after the pandemic has ended, and how these healthy changes will affect the emotional and physical health of the dental practitioners of Tamil Nadu in the long run.

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