ABSTRACT

The overarching aim of this study was to contribute to the understanding of the input, process, and outcome features in prosthetic dentistry with focus on the role of communication. The specific aims were to adapt the Roter interaction analysis system for use in prosthodontics, to evaluate the method, to see how age and gender of dentists and patients and combinations thereof are related to the amount and type of clinical communication and to evaluate the communicative participation of the dental nurse. The aims were also to explore the dentist-patient verbal communication for underlying dimensions and to evaluate the influence of these dimensions on different concepts of satisfaction.

Two literature surveys were conducted. A linguistic and substantial revision of the RIAS manual was made from 10 pilot audio recordings of encounters. Sixty-one new audio recordings of encounters made in three specialist clinics for prosthetic dentistry were analyzed with The RIAS-dental. The patients, referred for fixed prosthodontics including the anterior teeth, were consecutively included. Questionnaires were distributed to dentists and patients twice during the treatment period at the beginning and at the end respectively and one questionnaire was mailed to the patients. Two concepts of patient satisfaction were developed from the questionnaires, one for the immediate perspective, the satisfaction with care, and one for the intermediate perspective, the satisfaction with treatment outcome. Factor Analysis was used to find underlying dimensions of communication.

It was found that theory of communication during clinical process in dentistry and methods for exploring this process were lacking. A theoretical model of the dentist-patient encounter was suggested that combined the input, process, and outcome features of the context. The translation and modification procedures were made without any major alterations of the origin RIAS manual. In a pilot study the RIAS-dental method was found suitable for use in prosthodontics in Sweden. Gender combinations of dentists and patients were related to the amount and type of communication. The dental nurses contributed slightly to the amount of communication during the encounters. The verbal communication patterns occurring in prosthetic dentistry could be identified in seven different communication dimensions. The "information exchange-dentist’s horizon" and the "information exchange-patient’s horizon" were found to influence the patient satisfaction concept in the intermediate perspective. The "amount of prosthetics" was found to positively influence the patient satisfaction in the intermediate perspective as well. The findings of the present study imply that it is possible and useful to study the communication process in dentistry as the connecting link between input and outcome characteristics of dental treatment. The suggested theoretical model is useful because of its framework formulation that contributes to a deeper understanding of this complex research field.