

Treating Anxious Patients

By Dr. CJ Henley



Treating anxious patients is nothing new to dentists. However, I have always been astonished by how much a patient's anxiety affected *me* while treating *them*. Despite my best efforts, it is difficult to separate my anxiety from theirs when a patient is rude, short, squirming or crying while undergoing treatment. I believe that part of our humanity is in our ability to be empathetic. Because of this, I would imagine (and hope) that many clinicians feel their own anxiety as they treat scared and fearful patients. We need to have a strong understanding of what anxiety is, how a patient's anxiety can affect us and the efficacy of our treatment, how it can affect our practice economically and how it can impact our own stress level.

Steps should be taken to mitigate the stress in both the clinician and the patient, as the emotional states of both parties can be interdependent.

Anxiety is defined as a feeling of worry, nervousness or unease, typically about an imminent event or something with an uncertain outcome. While anxiety is a normal and valuable emotion, with some dental patients, anxiety regarding dental procedures can become an excessive and persistent fear about routine procedures. As a result, many patients cope with this anxiety through avoidance behavior. Dental fear or phobia that leads to avoidance of treatment affects 5-10 percent of the population.¹ Avoidance behavior can increase appointment cancellations, thus having a detrimental impact on production.

Nearly 60 percent of patients have moderate to severe anxiety about certain dental procedures and perhaps, more importantly, nearly all patients that proceed with treatment have low anxiety. In order for patients to accept treatment, they need to have little fear regarding the proposed treatment.² This is essential to understand case acceptance in practice. Assessing a patient's anxiety level can help dentists understand how to present treatment to patients in an appropriate manner. Likewise, managing a patient's anxiety can increase their trust and confidence in the practitioner. Trust and confidence in the dentist and his/her staff is critical. Patients who trust their dentist are more likely to be pleased with treatment, regardless if there were any complications.³

A study completed in 1981 investigated the effects of fear and anxiety on the productivity of dental practice. The findings showed that patients with significant fear required about 20 percent more chair time than patients with little fear. The time required to prepare the teeth basically was the same for both groups — as measured by drilling time — but the fear group

was shown to have more frequent interruptions during treatment.⁴ This additional time required to manage an anxious patient ultimately results in increased stress and anxiety for the dentist as our schedule gets behind and productivity drops.

Since we work in a field that involves so many anxious patients, it is imperative that we spend time understanding how a patient's anxiety can cause us to be anxious. Psychologists refer to this as mirroring. Mirroring is the behavior in which one person subconsciously imitates the gesture, speech pattern or attitude of another. In most situations, mirroring is a beneficial reaction that can help people relate to one another in social situations. However, in the situation of a nervous or frustrated patient, mirroring can be disastrous. It can be difficult to overcome our "pre-programmed" need to mirror others.

It is paramount that dentists focus on their own stress level during treatment; failure to do so can contribute to the patient's anxiety. The inability to understand when a patient is suffering from severe anxiety before, during or after treatment, and failure to address the problem can allow the patient to incorrectly believe that chaos is about to unfold.

Two critical considerations must be addressed when treating patients with significant dental anxiety:

1. Remind patients that they are in control of the situation and/or symptoms.
2. Help patients interpret their symptoms as nervousness, or a normal and explainable physiologic change that should be present.

Helping patients with significant dental anxiety develop cognitive-behavioral measures, such as relaxation and cognitive-restructuring techniques, can help reduce a patient's anxiety to a manageable level.⁵ Reducing a patient's anxiety level can reduce the anxiety level of the dentists and ultimately, provide greater job satisfaction.⁶

When we care about our patients and the quality of treatment we provide, dentistry can be both an extremely rewarding and stressful profession. Steps should be taken to mitigate the stress in both the clinician and the patient, as the emotional states of both parties can be interdependent. Taking the time to assess the anxiety level in patients and yourself can make a dental practice more productive, improve the satisfaction of patients and improve your quality of life.

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