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Evaluation of the ability of dental clinicians to rate dental anxiety
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Introduction: Only a small percentage of dental clinicians use any form of assessment technique to rate dental anxiety. If no assessment technique is used, we must assume that the dental clinicians rely on their experience and intuition, usually called ‘the clinical eye’, to rate the patient’s level of dental anxiety.

There is a knowledge gap concerning the ability of the dental clinicians to identify patients with dental anxiety without the use of any assessment technique.

Aim: to evaluate dental clinicians’ ability to rate dental anxiety using only their “clinical eye” and to identify factors affecting the rating.

Methods: A total of 104 clinicians from 24 public dental clinics in the Region of Östergötland, Sweden examined 1128 adult patients returning for annual examination. The patients rated their dental anxiety using the Modified Dental Anxiety Scale and a Visual Analogue Scale. After the examination, the clinicians rated the patients’ levels of dental anxiety on a Visual Analogue Scale.

Results: The correlation (r_s) between the clinicians’ and patients’ ratings of dental anxiety was 0.45. Among highly dentally anxious patients there was no correlation between clinicians’ and patients’ ratings. Dental clinicians rated dental anxiety lower than their patients, especially if the patients were highly anxious. The clinicians’ ability to rate dental anxiety was better with increased age of clinician and patient. The clinician’s ability to rate dental anxiety is negatively associated to an increase in the clinician’s confidence.

Conclusions: Clinicians are unsuccessful in identifying the dentally anxious patient without the use of patient self-assessment tools. A patient rated Visual Analogue Scale is a suitable screening tool in general practise for the detection of dental anxiety.