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Comparison of oral health behavior among dental students, students of other disciplines, and fashion models in Switzerland

KEYWORDS

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 Switzerland,
 students,
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SUMMARY

Self-reliant oral health behavior exert great influence on the oral health of our society. The aim of the present study was to find out whether there is an occupation-related difference in the oral health behavior between dental students, students of other disciplines, and fashion models in German-speaking Switzerland. The survey comprised 19 questions which were asked using a web-based anonymous questionnaire. The investigation particularly inquired about employed auxiliaries and their application for an improvement of oral hygiene. In addition, the satisfaction with the own teeth and smile as well as the influence of the occupation or the study on oral hygiene were examined. Included in this evaluation were 204 dental students, 257 students of other disciplines, and 117 fashion models aged between

21 and 25 years. The evaluation reveals that the state of knowledge and the professional relationship affect the practice of oral hygiene, in particular among dental students. Fashion models, however, are most intensively concerned with body care and oral hygiene. Their attention is directed particularly to means supposed to improve the smile as well as to ensure fresh breath. Dental students and fashion models constitute a selected minority clearly demarcated from students of other disciplines regarding a higher awareness of self-reliant oral hygiene. The comparatively minor rating of oral health in a group of basically well-trained individuals suggests great need of educational work in the general population.

Introduction

As future dentists dental students bear a social responsibility and exemplary function for their environment as well as in particular toward their patients (KOMABAYASHI ET AL. 2006). For this reason they are basically motivated to invest time and money in their oral hygiene (CORTES ET AL. 2002). There are marked differences in the oral health behavior between dental students in preclinical as opposed to clinical semesters, be-

cause comprehension for the subject and profession develops mainly during the clinical part of the study (POLYCHRONOPOULOU ET AL. 2002). When comparing various countries and cultures, considerable differences in oral health behavior exist both among dental students and in randomized study groups (KAWAMURA ET AL. 2001). However, the habits of dental students at Swiss universities have not been investigated so far (KOMABAYASHI ET AL. 2006).

Factors affecting among other things the adoption of good oral hygiene are socio-economic status, educational level, and family situation of an individual (FREEMAN 1999). It can be assumed that apart from dental students, fashion models also feature a high standard of oral hygiene, because an increased awareness of a beautiful and healthy appearance is commonly associated with this occupational group. The capital of a fashion model are the own body, clean, bright, and well-kept teeth as well as an attractive smile (VAN DER GELD ET AL. 2007). In comparison to the average population, students of diverse disciplines constitute a survey group with appropriate prerequisites for good oral health behavior (ÅSTRØM & RISE 2001). The aim of the present study was to find out whether there is an occupation-related difference in the oral hygiene behavior between dental students of clinical semesters, students of other disciplines, and fashion models in Switzerland. Conceivably a certain professional knowledge on the implementation of oral hygiene measures exerts just as much influence as the motivation to preserve clean, healthy, and beautiful teeth.

Materials and Methods

For the present investigation, a web-based anonymous questionnaire written in German was used (Questback GmbH, Cologne, Germany). The survey was addressed to dental students of clinical semesters (first and second year of the master study) enrolled at the dental schools of the Universities of Zurich, Berne, and Basel as well as to fashion models and students of other disciplines in German-speaking Switzerland. In total, 305 e-mails containing a link to the survey were sent to the dental students, 362 e-mails to the survey group of fashion models, and 512 e-mails to the study group comprising students of various disciplines.

The dental students of the Universities of Zurich and Basel were approached personally, while for privacy reasons the students of the University of Berne were informed about the study by their university. Included in the investigation as fashion models were persons residing in Switzerland, who were represented by a Swiss model agency. They were addressed via e-mail by their agencies (Option-Model, Scout-Model, Visage, Time-Model) in Switzerland. Students of various disciplines were selected at random and contacted mainly via student hostels in Basel, Berne, and Zurich. In this survey group, it was ensured that no dental students participated, although the specific field of study was not asked for.

In total, the questionnaire comprised 19 mandatory questions, which had to be answered to get from one question to the next and thus to complete the form. Most questions required a single answer; if multiple answers were allowed, this was indicated explicitly at the outset of the question. Another four complementary questions required rating on a numeric scale from 1 to 10 (Tab. I). A statistical evaluation was made using Fisher's exact test and the Mann-Whitney U-test available in the program R. The level of significance α was set at 0.05. Below, the study group comprising the students of other disciplines will be referred to as control group.

Results

Evaluation of personal data

Answers obtained from 204 dental students, 117 fashion models, and 257 individuals of the control group were included in the evaluation. However, only the questionnaires from 198 dental students (completion quota 84%), 108 fashion models (comple-

tion quota 38%), and 255 participants of the control group (completion quota 68%) were fully answered. Hence, over the course of the survey, the number of respondents decreases from question to question (Tab. II and III). Overall, 41% of the participants were male and 59% female. In groups, 74% of the questioned fashion models, 63% of the dental students, and 49% of the controls were female. The median age of the respondent fashion models, dental students, and control individuals was 21, 24, and 25 years, respectively.

Evaluation of the questions

Regarding the answers to the question how often study participants attended professional tooth cleaning, no statistical difference between the three examined groups was found ($p=0.060$). By contrast, a clear difference became apparent with respect to their smoking behavior (Tab. II). In comparison to dental students, fashion models as well as members of the control group smoked more than twice as frequently ($p<0.01$). Answers to the question if participants had already undergone tooth bleaching did not differ between the fashion models and the dental students ($p=0.502$), whereas individuals of the control group were significantly less experienced with respect to bleaching of teeth ($p=0.001$).

Assuming that respondents did not employ more than two different brush types, 46% of the dental students, 15% of the control group, and only 11% of the fashion models utilized various tooth brushes ($p<0.01$). Marked differences between the examined groups were also evident regarding the preference of electric and ultrasonic/sonic tooth brushes. Nearly all respondents similarly used a manual toothbrush. While the prospective dentists frequently utilized this in parallel with a sonic brush, a majority of fashion models and control individuals preferred an electric toothbrush ($p<0.01$).

There were substantial differences between the groups regarding the frequency of self-reliant tooth cleaning ($p=0.007$). Overall, control individuals brushed their teeth markedly more rarely. Concerning the duration of tooth cleaning, dental students contrasted positively with the fashion models ($p<0.001$). Mouth rinsing with water after tooth cleaning was carried out most frequently by the models, whereas dental students rinsed significantly less ($p<0.01$). The use of toothpaste was similar in all three groups ($p=0.395$), but fashion models employed whitening-toothpaste distinctly more often ($p<0.01$), while dental students were characterized by a higher use of so-called supplementary toothpastes or gels ($p<0.01$). Also mouthwash was employed more regularly and more frequently by the fashion models ($p<0.05$; Tab. II).

Comparatively more dental students involved in this survey indicated that they were employing dental floss ($p<0.01$), whereas comparison groups differed only marginally ($p=0.820$). Dental floss was used also more frequently by dental students than by participants of the other groups ($p<0.01$). Toothsticks for interdental care were mostly used by control individuals (16%), followed by the fashion models (11%; $p=0.170$) and the dental students (4.5%), who used them most rarely. On the other hand, interdental brushes were particularly employed by dental students ($p<0.01$). Cleaning of the tongue was indicated by over 70% of dental students and fashion models. Hence, these two groups differed significantly from the control group ($p<0.01$). For tongue cleaning, 41% of the dental students utilized special tongue scrapers and thus contrasted with the fashion models and the participants in the control group, who employed normal

Tab.I Catalogue of questions and options of answers		
Question	Predefined answer	Findings
1. Gender Age	a) Male b) Female	Tab. II
2. How often do you attend dental hygiene (tooth cleaning)?	a) > twice per year b) 1–2 times per year c) Every 2 years, never	Tab. II
3. Do you smoke?	a) Yes b) No	Tab. II
4. Did you ever bleach your teeth?	a) Yes b) No	Tab. II
5. What toothbrush(es) do you use? (multiple answers possible)	a) Manual b) Electric c) Sonic/ultrasonic	Tab. II
6. How often per day do you clean your teeth?	a) Once b) Twice c) > twice	Tab. II
7. How long do you clean your teeth each time?	a) 1 minute b) ≤ 2 minutes c) > 2 minutes	Tab. II
8. Do you use a mouthwash solution? 8.1. If yes: How often per week do you use it?	a) Yes b) No	Tab. II
9. Do you rinse your mouth with water after tooth cleaning?	a) Yes b) No	Tab. II
10. Do you use dental floss? 10.1. If yes: How often per week?	a) Yes b) No	Tab. II
11. Do you use toothsticks? 11.1. If yes: How often per week?	a) Yes b) No	Tab. II
12. Do you use interdental brushes? 12.1. If yes: How often per week?	a) Yes b) No	Tab. II
13. Do you clean your tongue? 13.1. If yes: How often per week? 13.2. If yes: Using what?	a) Yes b) No a) Toothbrush b) Tongue scraper	Tab. II
14. What kind of toothpaste do you use? (multiple answers possible)	a) Sensitive b) Normal c) Whitening d) Fluoride-free e) No toothpaste	Tab. II
15. Do you use supplementary toothpaste? 15.1. If yes: Which ones? (multiple answers possible)	a) Yes b) No a) Elmex Gel b) BioRepair c) Tooth Mousse d) ApaCare e) Others	Tab. II
16. How important are own beautiful teeth to you?	Num. scale 1–10	Tab. III
17. How pleased are you with the color of your teeth?	Num. scale 1–10	Tab. III
18. How pleased are you with your smile in photographs?	Num. scale 1–10	Tab. III
19. How wide is the influence of your occupation/study on your oral hygiene?	Num. scale 1–10	Tab. III

Tab. II Results of the online survey with single and multiple answers

Question	Fashion models	Dental students	Control group	p-value
1. Age/gender	n=117 (%)	n=204 (%)	n=257 (%)	
Median age	21	24	25	<0.01
Gender				
a) Male	30 (25.64)	75 (36.76)	131 (50.97)	<0.01
b) Female	87 (74.36)	129 (63.24)	126 (49.03)	
2. Professional dental hygiene	n=116 (%)	n=204 (%)	n=257 (%)	0.060
a) > twice per year	18 (15.52)	4 (1.96)	16 (6.23)	
b) 1–2 times per year	65 (56.03)	133 (65.20)	159 (61.87)	
c) Every 2 years	22 (18.97)	42 (20.59)	56 (21.79)	
d) Never	11 (9.48)	25 (12.25)	26 (10.12)	
3. Smoking	n=116 (%)	n=204 (%)	n=257 (%)	<0.01
a) Yes	33 (28.45)	24 (11.76)	61 (23.74)	
b) No	83 (71.55)	180 (88.24)	196 (76.26)	
4. Bleaching	n=116 (%)	n=204 (%)	n=257 (%)	0.002
a) Yes	31 (26.72)	46 (22.55)	32 (12.45)	
b) No	85 (73.28)	158 (77.45)	225 (87.55)	
5. Toothbrush	n=116 (%)	n=204 (%)	n=257 (%)	
a) Manual	80 (70.80)	135 (66.83)	170 (66.41)	0.965
b) Electric	35 (30.97)	42 (20.79)	79 (30.86)	0.054
c) Sonic/ultrasonic	10 (8.85)	124 (61.39)	47 (18.36)	<0.01
6. Tooth cleaning per day	n=113 (%)	n=202 (%)	n=256 (%)	0.007
a) Once	2 (1.77)	10 (4.95)	30 (11.72)	
b) Twice	65 (57.52)	107 (52.97)	143 (55.86)	
c) > twice	46 (40.71)	85 (42.08)	83 (32.42)	
7. Tooth cleaning (duration each time)	n=113 (%)	n=202 (%)	n=256 (%)	<0.01
a) 1 minute	18 (15.93)	8 (3.96)	18 (7.03)	
b) ≤2 minutes	45 (39.82)	68 (33.66)	132 (51.56)	
c) >2 minutes	50 (44.25)	126 (62.38)	106 (41.41)	
8. Mouthwash solution	n=113 (%)	n=202 (%)	n=256 (%)	0.044
a) Yes	63 (55.75)	85 (42.08)	111 (43.36)	
b) No	50 (44.25)	117 (57.92)	145 (56.64)	
8.1. If yes: How often per week (median)?	3	3	5	<0.01
9. Mouth rinsing	n=113 (%)	n=202 (%)	n=256 (%)	<0.01
a) Yes	98 (86.73)	133 (65.84)	215 (83.98)	
b) No	15 (13.27)	69 (34.16)	41 (16.02)	
10. Dental floss	n=110 (%)	n=201 (%)	n=256 (%)	<0.01
a) Yes	56 (50.91)	143 (71.14)	134 (52.34)	
b) No	54 (49.09)	58 (28.86)	122 (47.66)	
10.1. If yes: How often per week (median)?	2	3	2	<0.01

Tab. II Results of the online survey with single and multiple answers (continued)				
Question	Fashion models	Dental students	Control group	p-value
11. Toothsticks	n=110 (%)	n=201 (%)	n=256 (%)	<0.01
a) Yes	12 (10.91)	9 (4.48)	41 (16.02)	
b) No	98 (89.09)	192 (95.52)	215 (83.98)	
11.1. If yes: How often per week (median)?	3	3	2	0.170
12. Interdental brushes	n=110 (%)	n=201 (%)	n=256 (%)	<0.01
a) Yes	11 (10 / 2)	63 (31.34 / 4)	23 (8.98 / 5.5)	
b) No	99 (90)	138 (68.66)	233 (91.02)	
12.1. If yes: How often per week (median)?	2	4	5.5	<0.01
13. Tongue cleaning	n=110 (%)	n=201 (%)	n=256 (%)	<0.01
a) Yes	78 (70.91)	141 (70.15)	125 (48.83)	
b) No	30 (27.27)	60 (29.85)	131 (51.95)	
13.1. If yes: How often per week (median)?	7	7	7	0.628
13.2. If yes: Using what?				
a) Toothbrush	48 (43.64)	54 (26.87)	78 (30.47)	<0.01
b) Tongue scraper	18 (16.36)	82 (40.80)	36 (14.06)	<0.01
14. Toothpaste (kind)	n=109 (%)	n=201 (%)	n=256 (%)	0.497
a) Sensitive	26 (23.64)	71 (35.32)	92 (35.94)	0.055
b) Normal	57 (51.82)	150 (74.63)	147 (57.42)	<0.01
c) Whitening	47 (42.73)	18 (8.96)	58 (22.66)	<0.01
d) Fluoride-free	4 (3.64)	6 (2.99)	9 (3.52)	0.936
e) No toothpaste	3 (2.73)	7 (3.48)	14 (5.47)	0.395
15. Supplementary toothpaste	n=109 (%)	n=201 (%)	n=256 (%)	<0.01
a) Yes	32 (29.36)	112 (55.72)	79 (30.86)	
b) No	77 (70.64)	89 (44.28)	177 (69.14)	
15.1. If yes: Which one?				
a) Elmex Gel	23 (71.88)	106 (94.64)	68 (86.08)	<0.01
b) BioRepair	6 (18.75)	1 (0.89)	0 (0.00)	<0.01
c) Tooth Mousse	1 (3.12)	4 (3.57)	2 (2.53)	0.921
d) ApaCare	1 (3.12)	1 (0.89)	0 (0.00)	0.287
e) Others	6 (18.75)	14 (12.50)	11 (13.92)	0.667

toothbrushes ($p < 0.01$). The median frequency of tongue cleaning was once per day in all three groups ($p = 0.628$).

To what degree own beautiful teeth matter to the study participants was recorded using a numeric analogue scale from 1 (very pleased) to 10 (dissatisfied; Tab. III). On the average, fashion models and dental students scored this question similarly, whereas beautiful teeth were less important to the members of the control group ($p < 0.01$). Dental students (mean 2.95) and fashion models (mean 3.22) taking part in this survey were very pleased with the color of their teeth ($p = 0.889$). In contrast, participants of the control group were

comparatively less satisfied with the own tooth color ($p < 0.01$). A similar result was obtained when study participants were asked how pleased they were with their smile in photographs. Overall, fashion models as well as dental students were more satisfied with their smile than the control group ($p < 0.01$). The effect of the profession or the study on the oral hygiene of the respondents was rated very variably. As revealed by Table III, dental students in particular perceived that their study exerted great influence on the self-reliant oral hygiene behavior. Similarly, the survey group of the fashion models felt compelled to a better oral hygiene due to their occupation.

Tab.III Results of the complementary questions concerning the satisfaction with the own teeth and smile as well as concerning the influence of the occupation on oral health. Questions were answered using a numeric scale from 1 to 10

16. How important are own beautiful teeth to you?														
	Important					Unimportant					Overall	Mean	Median	p-value
	1	2	3	4	5	6	7	8	9	10				
														<0.01
Fashion models	65	28	8	4	0	0	1	0	1	1	108	1.73	1	
Dental students	112	55	17	10	1	0	1	1	1	0	198	1.73	1	
Control group	104	75	38	24	2	4	2	3	2	1	255	2.21	2	
17. How pleased are you with the color of your teeth?														
	Pleased					Dissatisfied					Overall	Mean	Median	p-value
	1	2	3	4	5	6	7	8	9	10				
														<0.01
Fashion models	12	34	27	15	7	5	4	2	2	0	108	3.22	3	
Dental students	37	56	47	28	11	9	6	4	0	0	198	2.95	3	
Control group	12	56	55	50	35	21	19	5	1	1	255	3.85	4	
18. How pleased are you with your smile in photographs?														
	Pleased					Dissatisfied					Overall	Mean	Median	p-value
	1	2	3	4	5	6	7	8	9	10				
														<0.01
Fashion models	22	32	23	12	7	2	4	2	2	2	108	3.07	2.5	
Dental students	31	58	48	26	15	8	3	6	3	0	198	3.10	3	
Control group	23	61	69	41	31	15	7	5	3	0	255	3.44	3	
19. How wide is the influence of your occupation/study on your oral hygiene?														
	Wide					No influence					Overall	Mean	Median	p-value
	1	2	3	4	5	6	7	8	9	10				
														<0.01
Fashion models	15	13	14	11	13	7	6	6	11	12	108	5.03	5	
Dental students	35	48	41	20	22	12	7	8	2	3	198	3.42	3	
Control group	25	12	17	26	27	15	12	12	27	82	255	6.56	7	

Discussion

The evaluation shows that there are considerable differences in the oral health behavior of the three survey populations, which are subsequently discussed in groups. For the benefit of a distinct differentiation of the study groups, findings will be presented based on the occupation.

Dental students

Tobacco is a significant risk factor for diseases of the oral cavity and the periodontium (WINN 2001). In addition, smoking entails discolorations of teeth and gingiva (ALKHATIB ET AL. 2005). Therefore it is hardly surprising that among dental students in clinical semesters participating in the survey, only 12% smoked.

This percentage is markedly lower than the proportions obtained from the control group (24%) or the models (28%). Internationally, a trend to non-smoking among dental professionals has been noted for several years, although there are significant differences between various countries. Female students tend to smoke less than male ones (SMITH & LEGGAT 2007). The type of tooth brush can affect the reduction of supragingival biofilm and gingivitis. Regarding their capacity to remove plaque, sonic and electric toothbrushes tend to be superior to traditional manual toothbrushes (HAFFAJEE ET AL. 2001, PELKA ET AL. 2011). This view explains why 61% of the surveyed dental students employ a sonic toothbrush. By comparison, only 18% of the control group and 9% of the model group choose this

form of tooth cleaning. This difference is remarkable, even assuming that the precise distinction between an electric and a sonic toothbrush is not known among the respondents. In contrast to dental students, fashion models (71%) and control individuals (66%) largely clean their teeth using a manual brush ($p < 0.01$). In addition, the prospective dentists clean their teeth considerably longer than fashion models and the control group ($p < 0.01$). There are indications that extensive rinsing of the mouth with water following tooth cleaning with fluoride-containing toothpaste is associated with an increased caries risk (SJÖGREN & BIRKHED 1993). Newer studies correspondingly recommend rinsing of the mouth with only little water (MACHIULSKIENE ET AL. 2002). Nevertheless, 66% of the dental students still rinse their mouth with water after tooth cleaning. Seventy-five percent of the dental students clean their teeth using normal toothpaste, while 35% utilize a gentle sensitive-toothpaste. Only 9% employ a whitening-toothpaste. Owing to their abrasive properties many of these products effectively remove dental plaque and discolorations. However, whitening-toothpastes can exert their effect also by means of chemical additives such as peroxides, enzymes, citrates, and phosphates (JOINER 2010). Interdental tooth cleaning with the aid of dental floss actively prevents gingivitis, periodontitis, and caries, if it is applied regularly (LÖE 2000). The consistent use of dental floss is associated with motivation and self-control (SCHWARZER ET AL. 2014). These arise as a result of professional knowledge on the positive effect of interdental cleaning and account for the finding that particularly many dental students (71%) particularly frequently (median three times per week) utilize dental floss. This exceeds the Swiss average of 44% by far (STAEHLE 2004). Also interdental brushes are efficient aids for cleaning of the interdental spaces. As to usage they are less technique-sensitive than dental floss and therefore advisable for elderly patients as well (POKLEPOVIC ET AL. 2013). Thirty-one percent of the dental students, but only 9% of the control group resort to them. Dental students in the clinical part of their training have a considerable advance in knowledge regarding oral hygiene and also know the possible side effects of bleaching (CAREY 2014). Irrespectively they give in to the temptation to bleach almost as frequently as fashion models, possibly to satisfy the expectations of beholders who associate pearly-white teeth with dental health.

Fashion models

In their study, DUMITRESCU ET AL. (2012) describe the positive effects of a strong self-esteem as well as of self-confidence on the oral health behavior. In public life, fashion models are exposed to certain social requirements, constitute an example particularly for adolescents, and tend to have an elevated self-confidence (HALLBERG & HAAG 2007). Therefore it is not surprising that the interviewed fashion models set great value on their oral hygiene behavior and beautiful teeth. It can be assumed that this survey group expends great self-reliant efforts for oral hygiene. Tooth color is an essential feature of a smile seen as beautiful (TIN-OO ET AL. 2011, VAN DER GELD ET AL. 2007). In the literature, the potential and presumably transient side effects of bleaching are still discussed controversially and depend, among other things, on the concentration of the bleaching agent and the duration of bleaching (CAREY 2014). In comparison with the control group, proportionately more bleached fashion models (26%) are smokers ($p < 0.01$). It is noted that in particular products for a fresh breath and a radiant tooth-

white are utilized more intensely by fashion models. Mouthwash solutions and whitening-toothpaste are exemplary for these products ($p < 0.01$). A correlation between smoking and the usage of rinsing solutions by fashion models is evident ($p < 0.01$). Toothbrushes and tongue cleaning devices are established means against halitosis (VAN DER SLEEN ET AL. 2010). Therefore it is not surprising that most of all fashion models clean the tongue. For this purpose they prefer the toothbrush, although tongue scrapers are superior (PEDRAZZI ET AL. 2004). Fashion models implement oral hygiene at a high level. Certainly the occupation with its requirements is a contributory cause of this. Commercially placed advertising for mouthwash solutions, a radiant tooth-white, specific types of toothbrushes, and an immaculate bleaching smile appear to have a challenging bearing on the success of professional dental education.

Control group

Owing to its educational level the control group constitutes a study population with good prerequisites for a useful oral hygiene (ÅSTRØM & RISE 2001). Regular dentist visits including dental hygiene are crucial points of oral hygiene and cornerstones of preventive dentistry (RICHARDS & AMEEN 2002). In this respect, the present study does not reveal a relevant difference between the control group and the other two survey groups. Irrespective of the type of toothbrush used, the frequency of tooth cleaning is an essential component of self-reliant oral hygiene. In the literature, tooth brushing done at least twice per day is recommended for optimal cleaning (LÖE 2000). This minimum requirement is largely met by both the control group and the other interviewed groups. In a public survey of the SSO from the year 2000, 15- to 74-year-old individuals in Switzerland were questioned regarding oral health behavior. A proportion of 87% of the respondents at that time declared that they cleaned their teeth at least twice daily (KUSTER ET AL. 2000). This value approximately corresponds to the finding in the control group (88%). Also in regard to questions about professional tooth cleaning and the frequency of tooth brushing, the participants of the control group are comparable to the fashion models and dental students. However, beautiful teeth matter less to them ($p < 0.01$).

Conclusion

According to the findings of the investigation, advance in knowledge and occupational relation clearly affect the expertise on and intensity of oral hygiene. As a consequence, dental students in German-speaking Switzerland contrast with fashion models and students of other disciplines. The group of the fashion models devotes itself intensely to body care and oral hygiene. Particular attention is directed to means supposed to improve the smile and to ensure fresh breath. Owing to their occupational motivation, models accomplish an oral health behavior almost at the level of the dental students. Although students of other disciplines are characterized by a high educational background, they have lower knowledge on the practice of tooth cleaning and are less motivated for self-reliant oral hygiene. The often substantial differences concerning expertise on and practice of oral hygiene allow deriving that there is great need of educational efforts in the general population. Apart from professional information, priority should be given to the motivation to preserve white and healthy looking teeth, as is demonstrated by the fashion models.

Résumé

La responsabilité personnelle concernant les habitudes d'hygiène buccale joue un rôle primordial dans la santé bucco-dentaire de notre société. Le but de la présente étude fut de trouver s'il y a une différence professionnelle marquante dans la manière de procéder à l'hygiène buccale entre étudiants en médecine dentaire, mannequins et étudiants d'autres facultés en Suisse alémanique. L'enquête comportait 19 questions sous forme d'un sondage anonyme basé sur internet. 204 étudiants en médecine dentaire, 117 mannequins ainsi que 257 étudiants d'autres facultés entre 21 et 25 ans ont pris part à cette évaluation. C'est tout particulièrement parmi les dentistes que l'on

constate l'influence de leurs connaissances et de leur lien professionnel direct aux soins qu'ils consacrent à l'hygiène buccale. Apparemment les mannequins se préoccupent tout particulièrement de leur hygiène corporelle et buccale. Ils vouent une attention spéciale à tous les moyens leur permettant d'embellir leur sourire et d'obtenir une haleine fraîche. Les dentistes et les mannequins font partie d'une minorité sélectionnée et se délimitent clairement des membres du groupe de contrôle. Ces résultats font apparaître une différence marquante concernant la responsabilité personnelle des habitudes d'hygiène buccale et montrent un besoin imminent d'information à l'ensemble de la population.

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