

Other journals in brief

A selection of abstracts of clinically relevant papers from other journals.
The abstracts on this page have been chosen and edited by Paul Hellyer.

Irritable? Headaches? Lost your enthusiasm?

da Silva Moro J, Soares J P, Massignan C *et al.* Burnout syndrome amongst dentists: a systematic review and meta-analysis. *J Evid Based Dent Pract* 2022; DOI: 10.1016/j.jebdp.2022.101724. MacAulay R, Morash S, Kenwell S K, Haslam S K. Burnout in oral health students: a scoping review. *J Dent Educ* 2022; DOI: 10.1002/jdd.13143.

Low self-esteem? Overwhelmed? You may not be alone

Burnout syndrome is characterised by emotional exhaustion (loss of energy, lack of enthusiasm, increased tension, frequent headaches – EE), depersonalisation (irritability, emotional insensitivity to colleagues and patients – DP) and reduced personal accomplishment (low personal esteem, the tendency to self-deprecation at work or overwhelmed by academic expectations – PA). Dentists are at high risk and the consequences can be cognitive impairment, attention deficit and insomnia. Clinical errors may be frequent, negatively impacting patient care and safety. Symptoms of EE are considered the first stage of the syndrome, which may be triggered by increased workload.

Moro *et al.* found 37 relevant papers relating to burnout amongst dentists, mostly emanating from the Americas. Within a range of 4% to 32%, the overall prevalence of burnout syndrome in dentists was found to be 13% (lower than that found in doctors and paediatric nurses.) Measures of EE, DP and PA varied widely between studies. Strategies suggested to alleviate EE particularly include leisure activities, relaxation and emotion management.

MacAulay *et al.* found 18 relevant papers, almost half of which emanated from Europe, four from Asia and the Middle East, and the remainder from the Americas and Africa. Prevalence of burnout in dental students was found to vary between 7% and 70%. Those in the penultimate year of study, when clinical experiences are often added to academic requirements, and those with limited social support living away from home, were found to be more prone to burnout. Women reported higher scores for EE than men. The importance of early recognition of the signs of burnout is highlighted. Suggested preventive strategies include, again, leisure activities, relaxation and stress management. A suggested curriculum change was to improve student communication skills in preparation for patient contact. It has also been suggested that the earlier in the course patient contact occurs, providing an early sense of accomplishment, the potential effects of burnout may be decreased.

As in most reviews, the authors of both reviews highlight the lack of homogeneity between the many studies, making the drawing of definitive conclusions difficult. However, burnout syndrome is clearly a potential problem for both undergraduates and graduates of dentistry, with serious consequences for clinicians and patients. Early recognition of the symptoms by educators and fellow team members is a first step to reducing those consequences. Strategies should aim to reduce EE and improve stress management techniques.

<https://doi.org/10.1038/s41415-022-5408-y>

Women in dentistry

Fleming E, Neville P, Muirhead V E. Are there more women in the dentist workforce? Using an intersectionality lens to explore the feminization of the dentist workforce in the UK and the US. *Community Dent Oral Epidemiol* 2022; DOI: 10.1111/cdoe.12796.

It's complicated...

The number of male dentists registered in the UK fell by 289 between 2013 and 2021, but the number of female dentists rose by 3,596. Globally, 'the numerical increase of women into traditionally male professions continues to follow an upward trajectory.' These data imply that women are a homogenous group. However, other social identities such as race/ethnicity, age, socio-economic status and sexual orientation may intersect and hide important influences on career opportunities (or lack thereof).

Increases in numbers of women in dentistry are not seen equally across all ethnic groups. The largest increase in the UK for instance was seen in Asian and white female dentists. The number of Black female dentists rose by 63 as opposed to 1,695 Asian or Asian British female dentists between 2013 and 2020.

More women in the dental workforce does not therefore mean that all women have equal opportunities to access the profession or to progress. The relative invisibility of Black female dentists could indicate that dentistry is a privileged 'white space.' The place of women within the profession needs a more nuanced approach in order to achieve diversity at all levels.

<https://doi.org/10.1038/s41415-022-5409-x>

Minorities in dentistry

Haley C M, Macri D, Perez H L, Schwartz S B. LGBTQ+ and dental education: analysing the present and recommendations for the future. *J Dent Educ* 2022; DOI: 10.1002/jdd.13100.

Are they understood?

The LGBTQ+ descriptor covers a diverse range of individuals with differing sexual and gender identities, who interact with dental professionals as patients, colleagues and managers. Historically marginalised as a group, LGBTQ+ individuals are at increased risk of substance use disorder, STDs, certain cancers, bullying, anxiety, depression and suicide.

Barriers to care include a fear of discrimination, and on the part of providers, a lack of cultural sensitivity and understanding of their needs. LGBTQ+ content of US dental schools' curricula is limited to a small amount of lecture time. Some schools have no such content. Improving or increasing such teaching, including bias awareness training, may lead to a breakdown of the barriers to care. Both students and staff may benefit from mentorship from others who share their identity.

The authors recognise that there is limited research on this issue within dental education and that other personal characteristics such as race and age may modulate the experiences of those who identify as LGBTQ+.

<https://doi.org/10.1038/s41415-022-5410-4>