

Natural tooth preservation versus extraction and implant placement: patient preferences and analysis of the willingness to pay

SCIENCE

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Key Take-Away:

Surgeries like root canal therapy and tooth extraction; implant insertion and crown positioning are common dental treatment options. This research article depicted a reasonable agreement between previous experience and current therapeutic choice for dental treatment.

The aim of this study was to evaluate the patients' willingness to pay (WTP) values and preference for the treatment of a tooth with very poor prognosis, among two options: root canal therapy and crown positioning or tooth extraction, implant insertion and crown positioning.

ABSTRACT:

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Methods:

A total of 103 patients were recruited from a private dental clinic and interviewed.

A questionnaire measured individuals' preferences among the two alternative treatments for a tooth with poor prognosis and the maximum amount of money they would be willing to pay for their choice with a starting bid of 2,000 in 100 increment/decrement. Demographic data, patient choice, median values and WTP association with socio-demographic factors (Student t test and one-way ANOVA) and correlation between variables (Pearson chi-square test) were revealed.

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Results:

Seventy-six percent of patients expressed a preference for root canal therapy, while the remaining 24% chose the dental surgery.

A fair agreement between previous experience and current therapeutic choice was found ($P = 0.0001$). The WTP median value was 2,000 and 46% of participants would pay an additional sum of money for the therapy (median:300). The preferred treatment was influenced by previous experience, but no association was found between WTP values and socio-demographic factors.

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Conclusion:

Patients tend to prefer a conservative approach for the treatment of a tooth with poor prognosis and are willing to pay an additional fee to receive their treatment choice.

Source: British Dental Journal

Link to the source: <http://www.nature.com/bdj/journal/v222/n6/full/sj.bdj.2017.271.html>

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