

Unconscious racial bias may affect dentists' clinical decision on tooth restorability

Submission date 04/06/2018	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 20/06/2018	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 25/09/2020	Condition category Other	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Bias is an inclination for or against a person or a group, as it allows for one's personal opinions to influence judgement. It is defined in the Oxford dictionary as an 'inclination or prejudice, for or against one person or group, especially in a way considered unfair.' There are many forms of bias, which are generally one sided and have the ability to affect everyday social interactions. The aims of this study are to determine whether explicit and implicit racial bias predicts the recommendation of root canal therapy or extraction for White and Black patients suffering from irreversible pulpitis (inflammation of dental pulp tissue), and to determine whether different treatment decisions are made for Black vs White patients and to determine whether such differences (if any) are related to the presence of explicit or implicit racial bias.

Who can participate?

Qualified dentists

What does the study involve?

Participating dentists are given a clinical scenario in combination with a patient's relevant clinical photographs and radiographs depicting either a Black or White patient presenting with a decayed tooth and the associated symptoms of irreversible pulpitis. Explicit bias is measured through a questionnaire, which evaluates the recommended course of treatment, the strength of the recommendation and their perception of the patient's dental cooperativeness. Implicit bias is evaluated through brief implicit association tests.

What are the possible benefits and risks of participating?

The possible benefits are to create early awareness and active prevention. Although it might not be likely to completely eliminate the effects impact biases can have upon decision making, a reduction in the occurrence is a worthy result. Ultimately by creating awareness, bias can be recognised and reduced. The risks of participation are that during the tests participants may feel uncomfortable and may not want to continue further.

Where is the study run from?

The University of Cagliari (Italy)

When is the study starting and how long is it expected to run for?
January 2017 to November 2017

Who is funding the study?
Investigator initiated and funded

Who is the main contact?
Dr Neha Patel

Contact information

Type(s)
Public

Contact name
Dr Neha Patel

Contact details
Flat 1, Holmefield Court
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Additional identifiers

Protocol serial number
BCAG2017

Study information

Scientific Title
Unconscious racial bias may affect dentists' clinical decision on tooth restorability

Study objectives
The race of a patient does not affect dental clinicians recommendation for root canal treatment.

Ethics approval required
Old ethics approval format

Ethics approval(s)
Azienda Ospedaliero Universitaria Di Cagliari, 12/12/2017, ref: PG/2017/7126

Study design
Single-center cross sectional survey

Primary study design
Observational

Study type(s)

Other

Health condition(s) or problem(s) studied

Implicit and explicit bias and its influence on clinical treatment planning decisions

Interventions

Dentists were given a clinical scenario in combination with a patient's relevant clinical photographs and radiographs depicting either a Black or White patient presenting with a decayed tooth and associated symptoms of irreversible pulpitis.

Explicit bias was measured through a questionnaire, which evaluated participants' course of treatment, strength of recommendation and their perception of patient's dental cooperativeness.

Implicit bias was evaluated through brief implicit association tests.

Intervention Type

Other

Primary outcome(s)

Recommendation for root canal treatment (RCT) is measured using a dichotomous scale (yes or no)

Key secondary outcome(s)

Recommendation for extraction is measured using a dichotomous scale (yes or no)

Completion date

01/11/2017

Eligibility**Key inclusion criteria**

Qualified dentist

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Total final enrolment

57

Key exclusion criteria

1. Dental student or nurse
2. Any health professional without a BDS

Date of first enrolment

01/10/2017

Date of final enrolment

01/11/2017

Locations**Countries of recruitment**

Italy

Study participating centre

The University of Cagliari

Italy

09124

Sponsor information**Organisation**

Guy's and King's College London

ROR

<https://ror.org/0220mzb33>

Funder(s)**Funder type**

Other

Funder Name

Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Dr Neha Patel. Type of data - questionnaire responses and IAT results (raw, tabulated), accessed over email (.doc).
Consent was provided by each individual participant, and all data was anonymised

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/01/2019	25/09/2020	Yes	No
Basic results		13/11/2018	13/11/2018	No	No
Participant information sheet	Participant information sheet	11/11/2025	11/11/2025	No	Yes