



Knowledge, Attitude and Practice of Dentists towards Prophylaxis after Exposure to Blood and Body Fluids: Could e-Learning Help?

Dear Editor,

Shaghaghian, *et al*, have presented a perceptive and useful study into the knowledge, attitude and practice of dentists towards prophylaxis after exposure to blood and body fluids.¹ The results are unambiguous—there are clear gaps in all of these components and these gaps could ultimately endanger the health of dental practitioners and in turn, their patients. It is worth considering how this situation could be improved; however, there are a number of subtle barriers that could impede this much needed improvement. As the authors outlined, the “dentists who had attended infection control seminars had higher levels of knowledge.” However, the problem was that only a minority attended. And the learning needs were greatest amongst those with more years of practice—largely because infection control has only relatively recently been incorporated into dental curricula.

With all these factors to be taken into account, it is likely that new modalities of education need to be instituted to address gaps in knowledge, attitudes and behaviors. An ideal educational intervention would have effect on all these components of good practice.

It may be that online learning could

make a real difference. Online learning has been shown to make a difference to knowledge, attitudes and behaviors and to appeal to a wide range of different types of users.²⁻⁴ Importantly, it is also readily accessible and can be low cost.⁵ The rapid advancement of technology means that simulation-based multimedia online learning resources can really engage learners. They could make a real difference in this important area and as importantly could help overcome barriers to improvement.

Conflicts of Interest: None declared.

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References

1. Shaghaghian S, Pardis S, Mansoori Z. Knowledge, attitude and practice of dentists towards prophylaxis after exposure to blood and body fluids. *Int J Occup Environ Med* 2014;**5**:146-54.
2. Masic I. E-learning as new method of medical education. *Acta Inform Med* 2008;**16**:102-17.

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3. Walsh K, Rafiq I, Hall R. Online educational tools developed by Heart improve the knowledge and skills of hospital doctors in cardiology. *Postgrad Med J* 2007;**83**:502-3.
4. Walsh K. Interprofessional education online: the BMJ Learning experience. *J Interprof Care* 2007;**21**:691-3.
5. Sandars J. Cost-effective e-learning in medical education. In: Walsh K. *Cost effectiveness in medical education*. Radcliffe. Oxford, **2010**.

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