

**Dental Practice-Based Research Network**  
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**DPBRN 18: Persistent Pain and Root Canal Therapy**

**Results: Overall and by Region - Graphs**

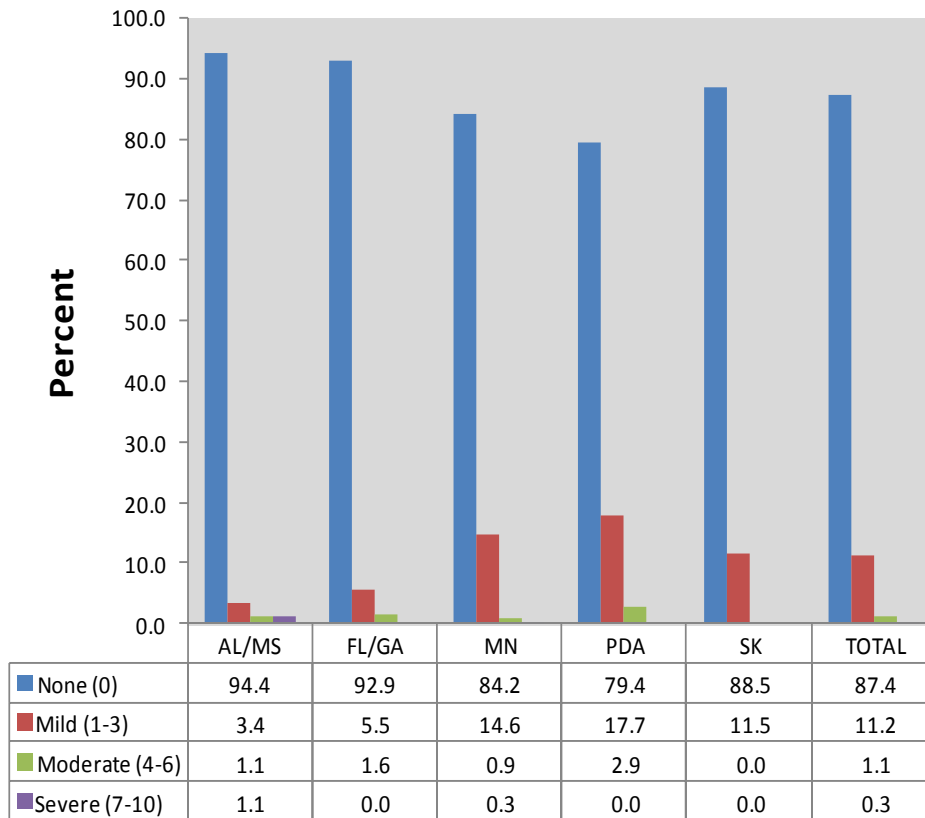
**Date prepared: January 28, 2012**

## Patient Survey — 3 Months After Treatment

1. How would you rate your tooth pain on a 0 to 10 scale at the present time, that is right now, where 0 is "no pain" and 10 is "pain as bad as could be"?

**No Pain**  
0123456789**Pain as bad as could be**  
10

### Question 1: Rating of pain at present time

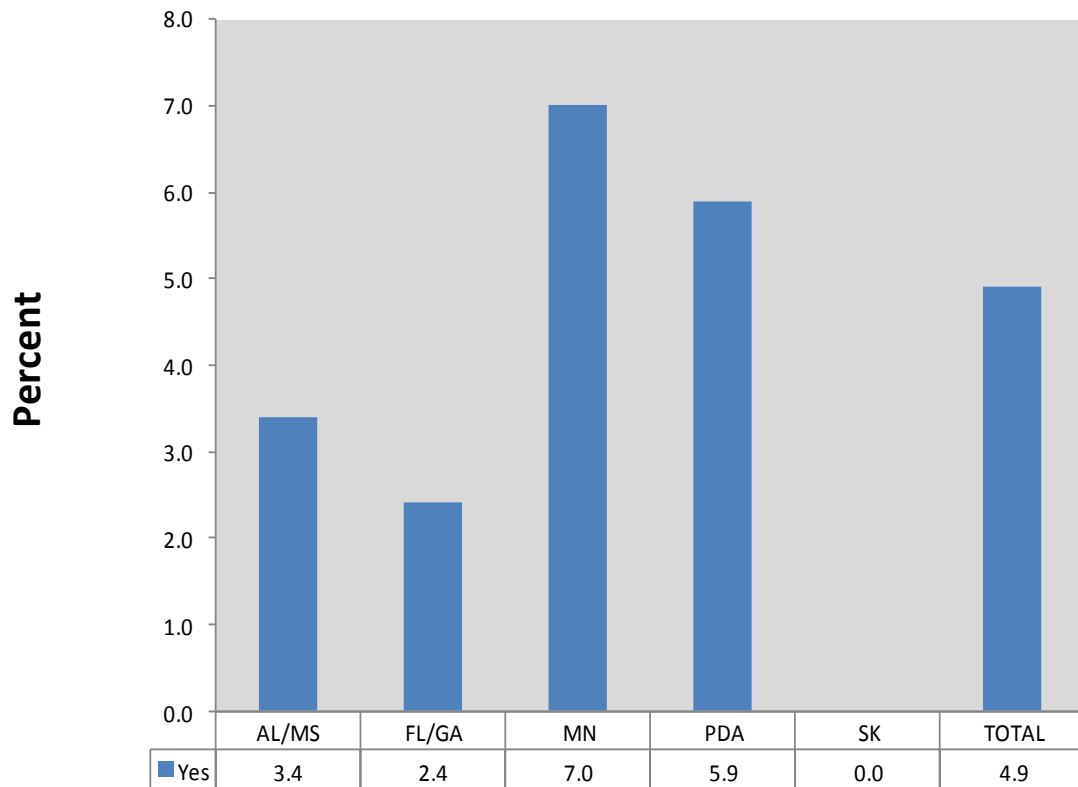


- Overall, about 13% of responding patients reported having any pain 3 months after treatment.

2. Have you taken anything for the pain (over-the-counter or prescription medication, herbal, other) in the last 7 days?

- a.  Yes
- b.  No

### Question 2: Taken pain medication

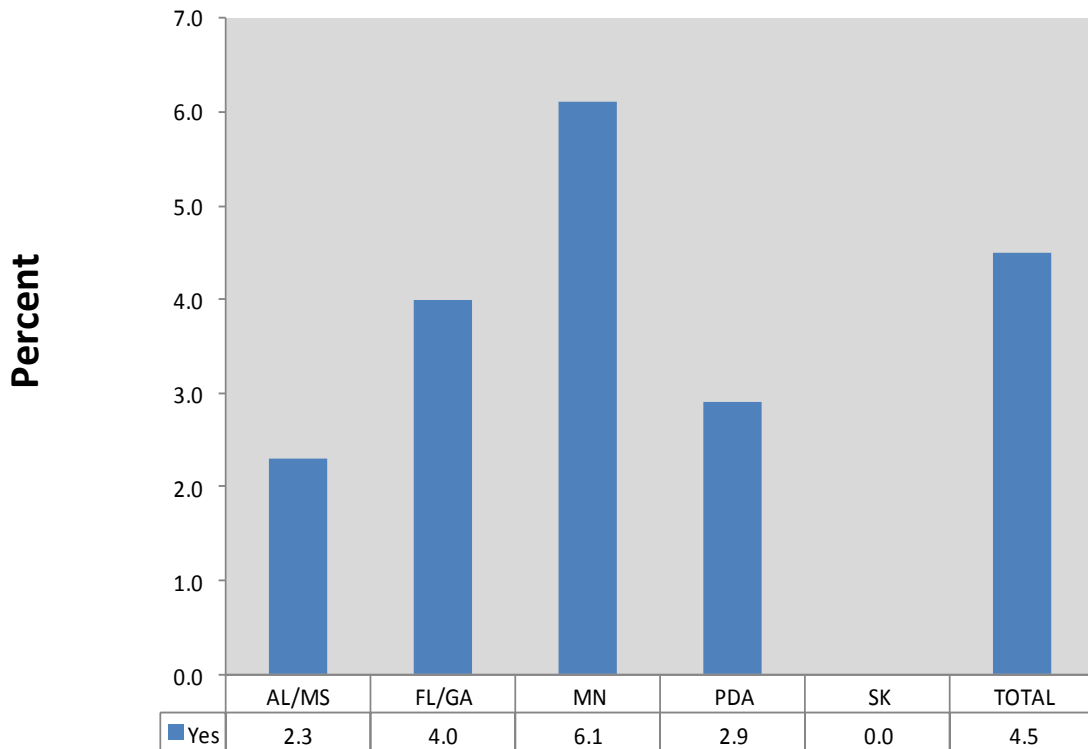


- About 5% of responding patients were continuing to take pain medication 3 months after treatment.

3. Has your tooth pain been present at least 8 hours a day, 15 days or more a month over the last 3 or more months?

- a.  Yes
- b.  No (If **No**, skip to question #5):

### Question 3: Pain present 8 hrs/day, 15 days/mo



- About 5% of responding patients reported continued pain during the 3 months following completion of obturation; none from SK reported having continued pain.

4. How many days ago did it go away?

- a.  Pain is still present.
- b.  Pain disappeared. Last pain was   days ago.

This question is not included in the report.

5. In the last 3 months, which of the following treatments have you sought to manage pain associated with your tooth that received root canal therapy? **(Mark all that apply and indicate the number of treatments in the last 3 months.)\***

**A. Additional dental treatment(s):**

- 1.  Additional root canal treatment(s): How many appointments?
- 2.  Extraction of the tooth (tooth was removed)
- 3.  Additional x-rays: How many appointments?

**B. Medication(s) or supplement(s):**

- 1.  Pain medication (prescription or over the counter)
- 2.  Antibiotics
- 3.  Herbal/botanical

C.  **Appointment(s) with a medical doctor:** How many appointments?

**D. Alternative, complementary, or non-traditional health therapies:**

- 1.  Chiropractic care: How many appointments?
- 2.  Acupuncture or acupressure: How many appointments?
- 3.  Other: (please list) \_\_\_\_\_

E.  **None of the above.**

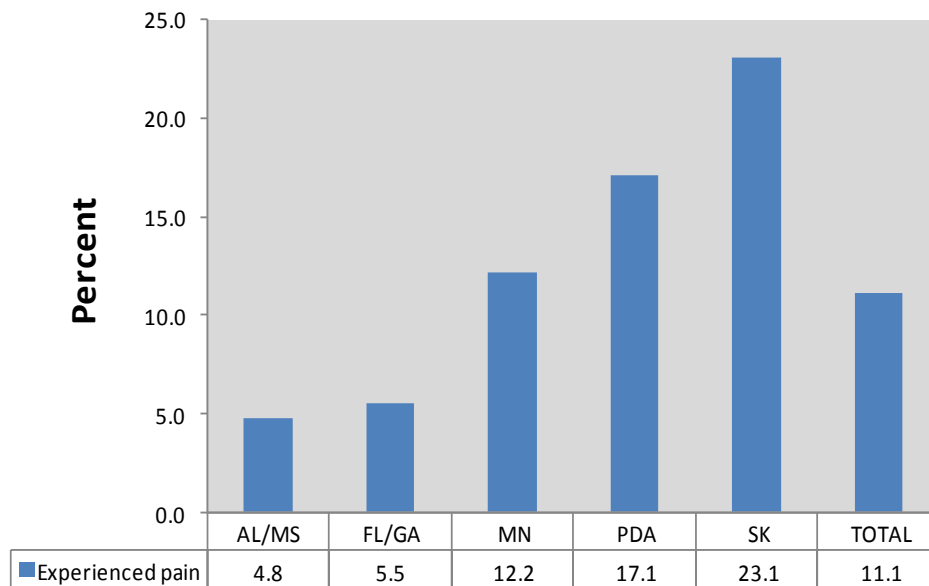
\*This question is not included in the graph version of the report.

## Patient Survey – 6 Months After Treatment

- How many days in the past month have you had pain in the area that was treated with a root canal?

Days (If no pain, please write "0/0")

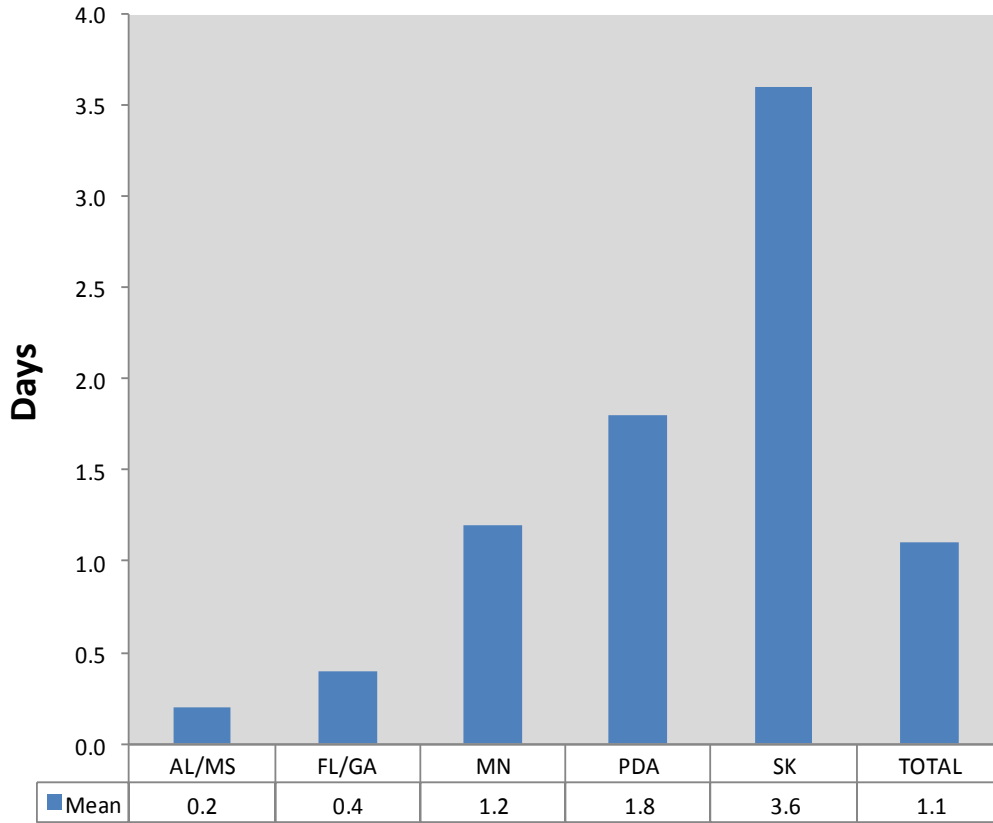
### Question 1(A): Patients having pain



- Six months after obturation was completed, 11% of patients reported having pain at least one day in the prior [6<sup>th</sup>] month. This varied considerably across region, from around 5% (AL/MS, FL/GA) to 23% (SK).

Note: This graph is a reflection of the percentage of patients reporting pain in the last month. The number of days patients reported pain is reflected in the next graph.

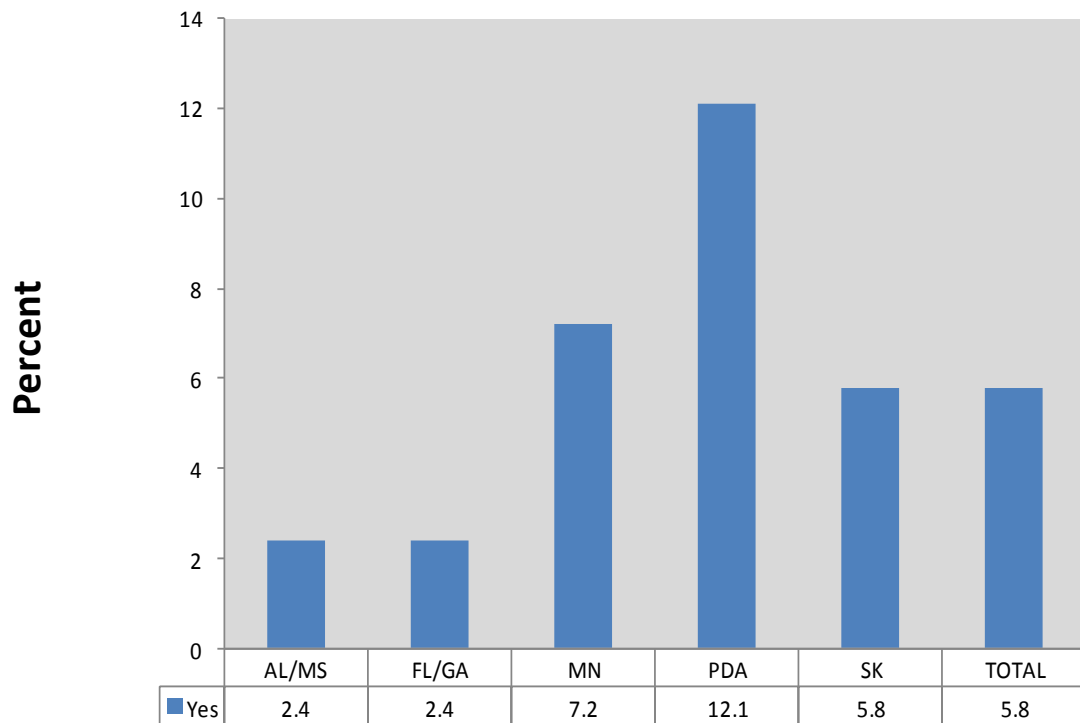
### Question 1(B): Number of days pain was present Average (Mean)



- Among the 11% reporting pain on any day in prior month, the average number of days patients had pain was 9.2; this also differed by region, from 3.2 (AL/MS) to 15.6 (SK).

2. Have you taken anything for the pain (over-the-counter or prescription medication, herbal, other) in the last 1 month?
- a.  Yes
- b.  No

### Question 2: Taken pain medication



\*Note: 3 patients who reported zero days having pain in past month, took something for pain in prior month.

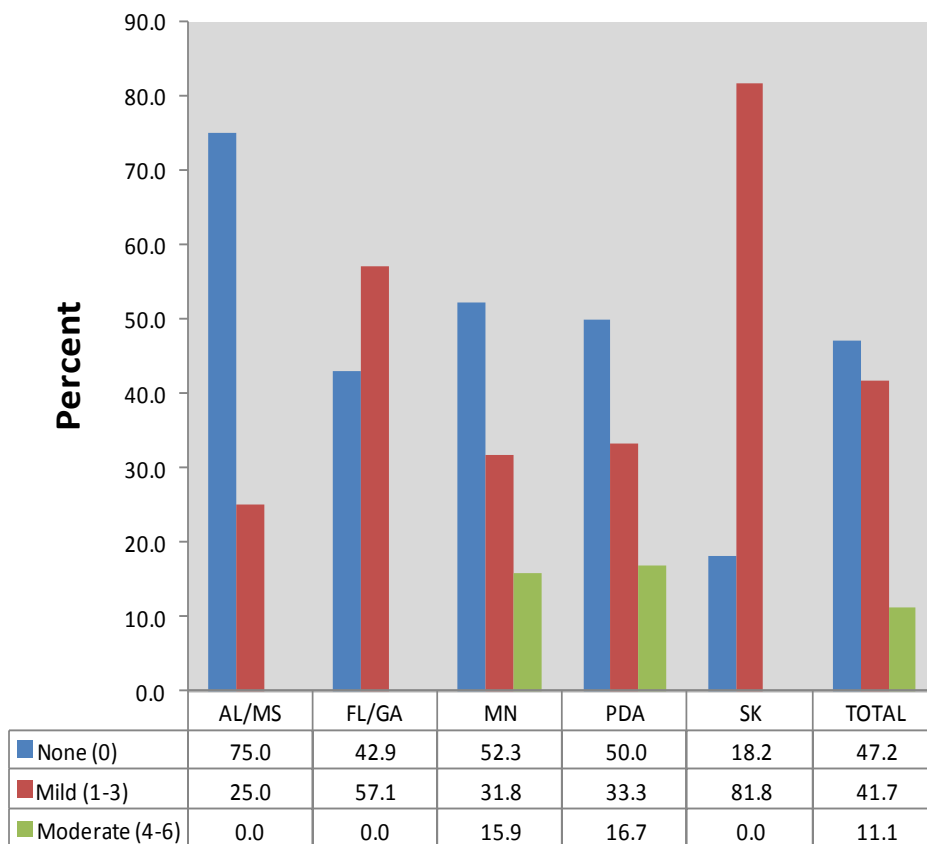
- Approximately 6% of patients overall were still taking pain medication 6 months after treatment; ranged from 2% (AL/MS, FL/GA) to 12% (PDA).



3. How would you rate your tooth pain on a 0 to 10 scale at the present time, that is right now, where 0 is "no pain" and 10 is "pain as bad as could be"?

No Pain Pain as bad as could be  
 0 1 2 3 4 5 6 7 8 9 10

### Question 3: Pain level at present time

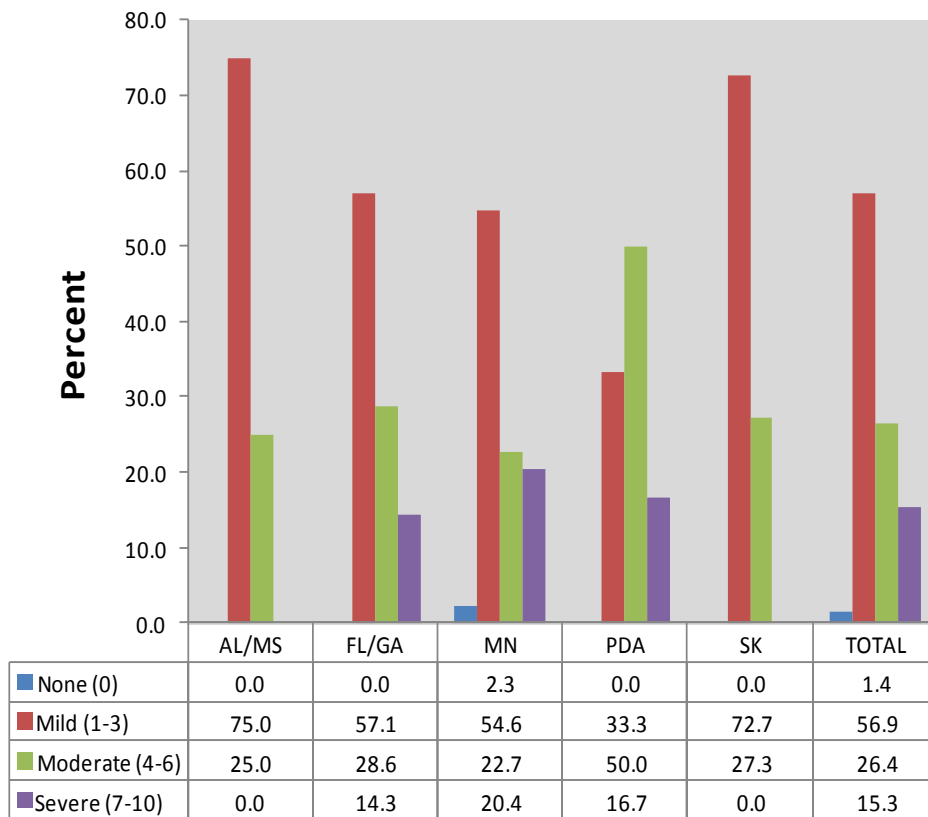


- Among patients who indicated any pain in the past month, namely, the 6<sup>th</sup> month after treatment completed, 47% reported no current pain, 42% pain of mild intensity, 11% of moderate and none of severe intensity.

4. In the past month, how intense was your worst tooth pain rated on a 0 to 10 scale where 0 is "no pain" and 10 is "pain as bad as could be"?

No Pain Pain as bad as could be  
**0** **1** **2** **3** **4** **5** **6** **7** **8** **9** **10**

### Question 4: Intensity of worst tooth pain

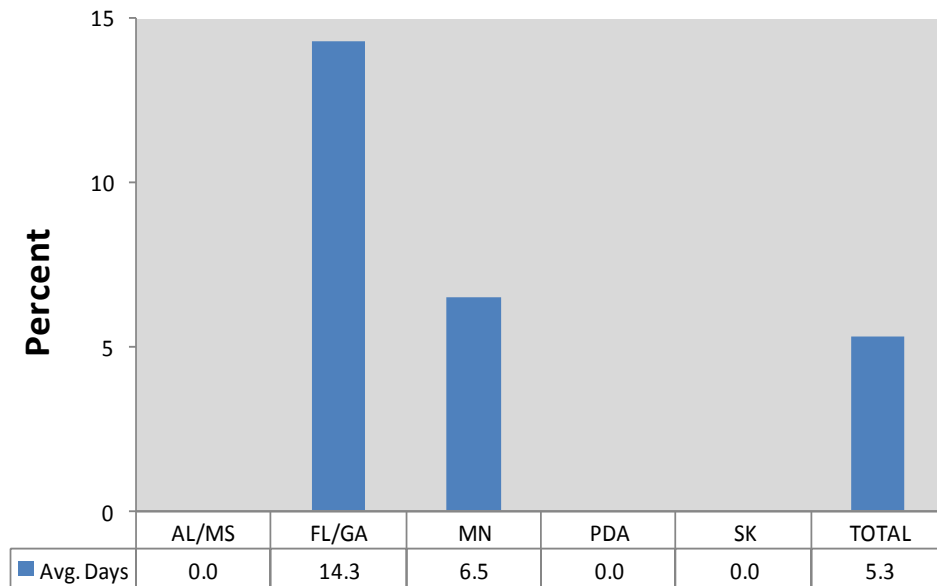


- Overall, about 57% of patients who indicated any pain in the past month reported their worst pain in the past month as being mild, 26% as moderate, and 15% as severe.



6. About how many days in the past month have you been kept from your usual activities (work, school or housework) because of tooth pain?   Days (If none, please write "0/0")

### Question 6: Days kept from usual activities



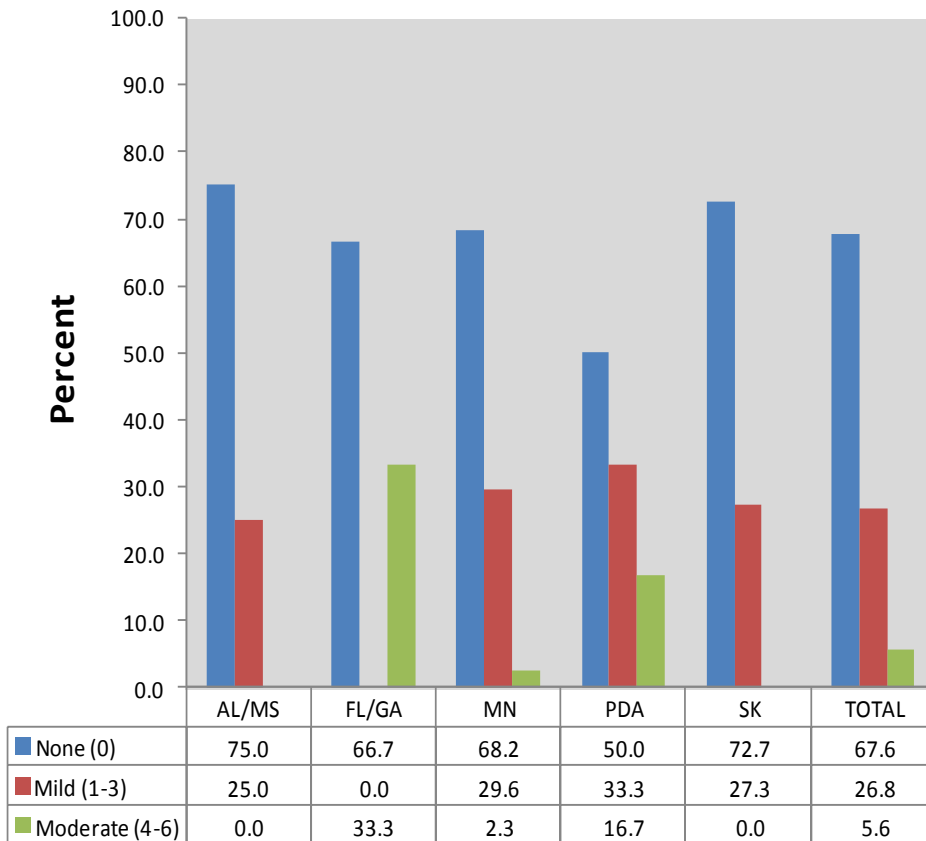
- Among patients who indicated any pain in the past month, 5% of patients (n=4) reported that the pain kept them from their usual activities for at least one day in the past month.

Note: The graph reflects the percentage of patients being kept from usual activities due to pain.

7. In the past month, how much has tooth pain interfered with your daily activities rated on a 0 to 10 scale where 0 is "no interference" and 10 is "unable to carry on any activities"?

**No interference** 0 1 2 3 4 5 6 7 8 9 10 **Unable to carry on any activities**

### Question 7: Pain interfered with daily activities

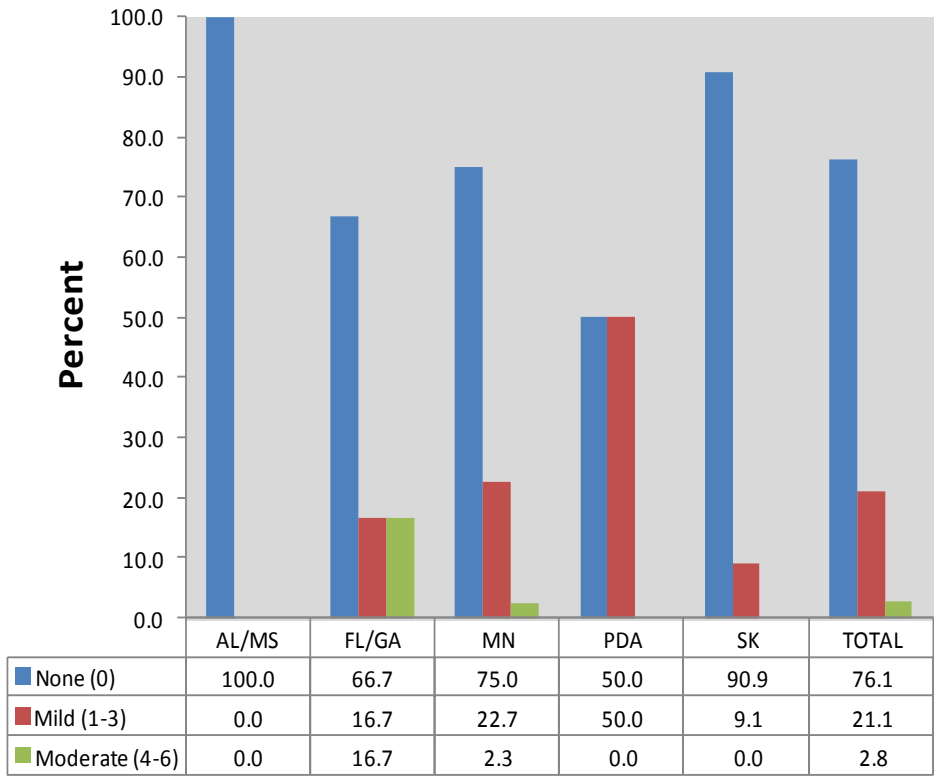


- For patients reporting any pain in the past month, about 68% reported no interference with daily activities due to pain, 27% reported minimal interference, and nearly 6% reported moderate interference.

8. In the past month, how much has tooth pain interfered with your ability to take part in recreational, social and family activities where 0 is "no interference" and 10 is "unable to carry on any activities"?

No interference 0 1 2 3 4 5 6 7 8 9 10 Unable to carry on any activities

### Question 8: Pain interfered with recreational activities

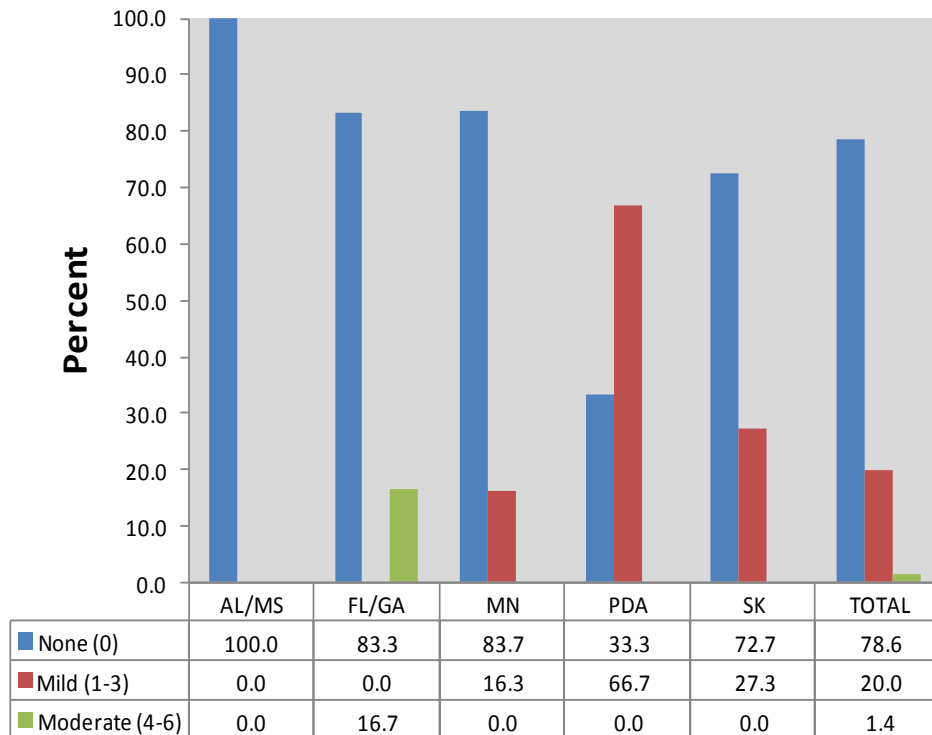


- Among patients who indicated any pain in the past month, 76% reported no interference with recreational activities, 21% reported the pain had minimal interference, and about 3%, indicated moderate interference.

9. In the past month, how much has tooth pain interfered with your ability to work (including housework) where 0 is "no interference" and 10 is "unable to carry on any activities"?

No interference Unable to carry on any activities  
 0 1 2 3 4 5 6 7 8 9 10

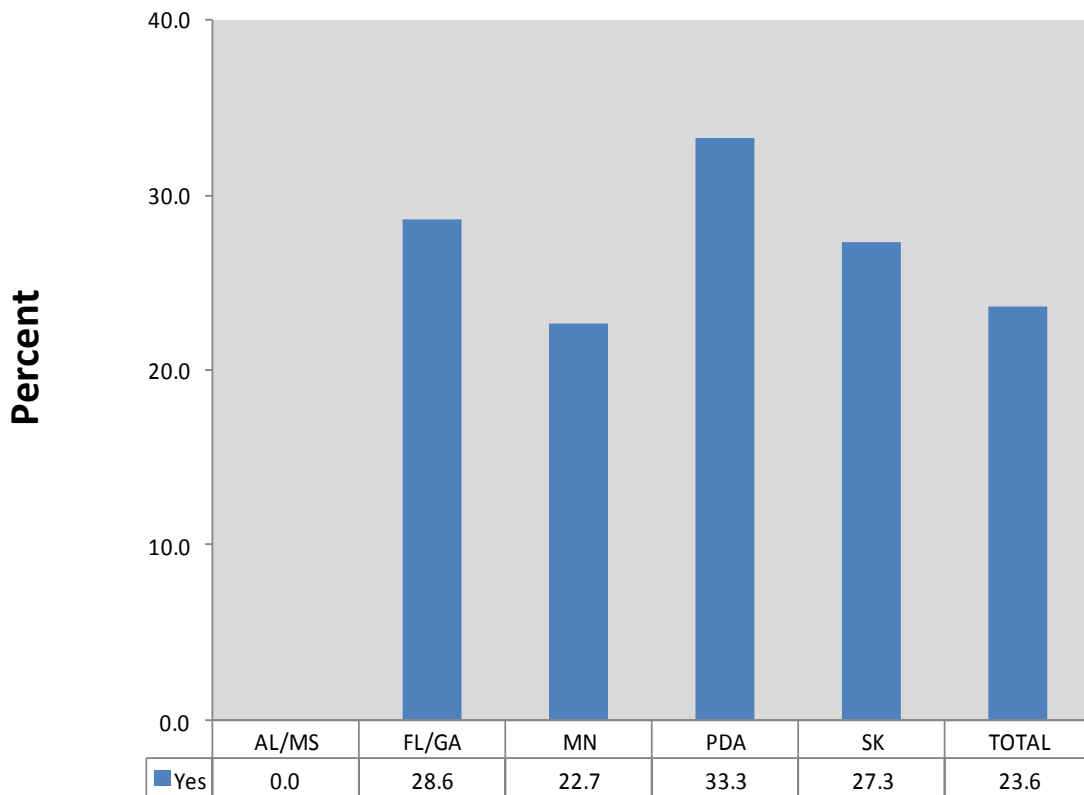
### Question 9: Pain interfered with work



- Among patients who indicated any pain in the past month, 79% reported no interference with work, 20% reported minimal interference, and 1% reported moderate interference.

10. Has your tooth pain been present for at least 8 hours a day, 15 days or more a month, over the last 3 or more months?
- Yes
  - No [If no, skip to Question 12.]

### Question 10: Pain present 8 hrs/day, 15 days/mo



- Among patients who indicated any pain in the past month, about 24% of patients reported pain being present 8 hours per day, 15 days per month (persistent pain).

11. If yes, what do you think was the cause of this tooth-type pain (please mark **only ONE** response)?
- dental disease / infection (e.g., toothache)
  - dental treatment (e.g., root canal therapy)
  - trauma (e.g., traffic accident, injury, fall)
  - illness (e.g., cold, sinus infection, ear infection)
  - other pain(s) (e.g., headaches, TMJ/TMD)
  - stress
  - don't know

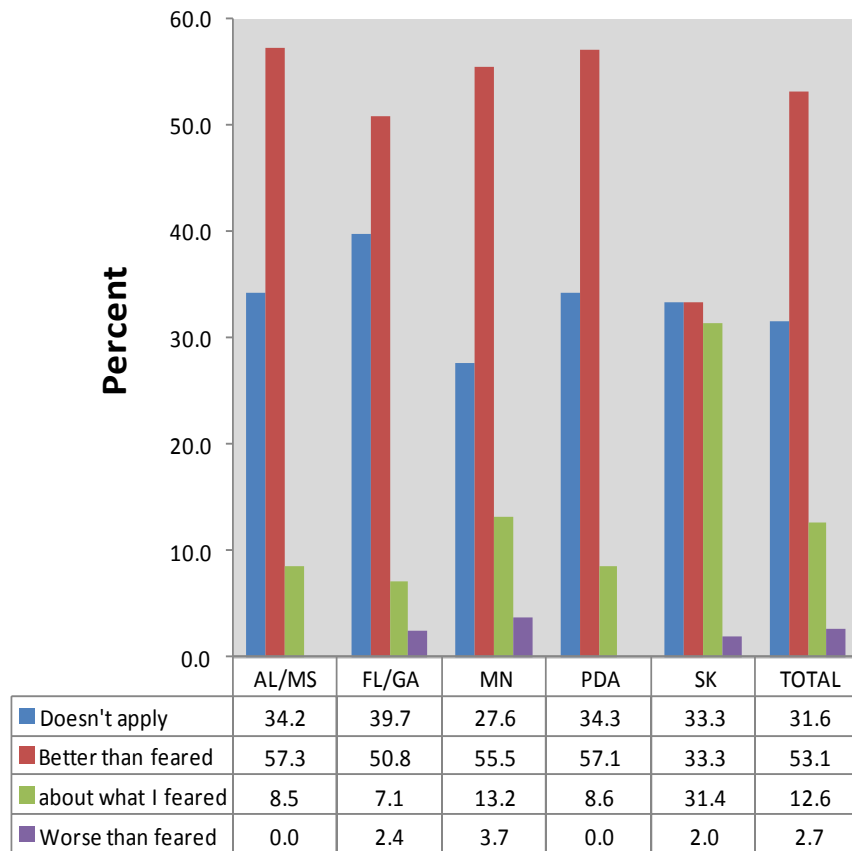


\*This question is not included in the graph version of the report.

12. Please rate how your feelings of fear about having a root canal compared to the actual experience.

- a.  does not apply – I was not afraid.
- b.  the experience was *better* than I feared.
- c.  the experience was about what I feared.
- d.  the experience was *worse* than what I feared.

### Question 12: Feelings of fear



- When comparing feelings of fear to the actual experiences, overall more patients reported better than feared at 53%; SK was lower with 33% indicating better than feared.

13. In the last 3 months, which of the following treatments have you sought to manage pain associated with your tooth that received root canal therapy? **(Mark all that apply and indicate the number of treatments in the last 3 months.)\***

**A. Additional dental treatment(s):**

1.  Additional root canal treatment(s): How many appointments?
2.  Extraction of the tooth (tooth was removed)
3.  Additional x-rays: How many appointments?

**B. Medication(s) or supplement(s):**

1.  Pain medication (prescription or over the counter)
2.  Antibiotics
3.  Herbal/botanical

C.  **Appointment(s) with a medical doctor:** How many appointments?

**D. Alternative, complementary, or non-traditional health therapies:**

1.  Chiropractic care: How many appointments?
2.  Acupuncture or acupressure: How many appointments?
3.  Other: (please list) \_\_\_\_\_

E.  **None of the above.**

\*This question is not included in the graph version of the report.