

Problem Statement

Older adults are identified as one of the fastest growing segments of the United States population and the proportion of women comprising this older population is increasing rapidly.¹ Similarly, the need for healthcare professionals to understand unique health needs experienced by women in the later stages of life has also increased. It is well known that a larger proportion of women also seek more health care services than men and view healthcare providers as significant information resources for a variety of health conditions. Women's health in the later stages of life reflects changes and conditions that are unique to females in that age group. Since women's oral health and general health affect each other, adopting strategies for maintaining and improving women's oral and systemic health across the lifespan is critical to maximizing quality of life as women age.

Menopause is a phenomenon that usually affects women at approximately 45 to 55 years of age and has many unique manifestations that can impact a woman's well-being. The oral manifestations of menopause are progressive, cumulative and become more complex over time. Most often, physicians and nurses are identified as the patients' resources for information regarding menopause. On the other hand, oral health professionals, specifically registered dental hygienists, are not as likely to be consulted. The role of the dental hygienist in providing accurate information regarding preventive medical conditions, managing oral health needs, and contributing to the overall well-being of patients also has not been fully explored. Importantly, professional isolation of dental healthcare providers from the medical community may contribute to the pervasive lack of communication about oral health's relationship to general health.

However, recent scientific evidence linking oral and systemic health is beginning to change that gap in interaction among the medical and dental communities. It is important to assure that medical and dental healthcare providers are equally knowledgeable about general and oral health manifestations of menopause. This would ensure that information-seeking patients would have sufficient access to professional resources, regardless of the healthcare delivery source. Integration of medical providers and their dental colleagues through increased communication and research regarding the link between oral and overall health are also critical to this goal. All healthcare professionals need to be familiar with the signs and symptoms of menopause that may compromise overall health. A foundational goal guiding this proposed research suggests healthcare providers identify factors negatively impacting quality of life, therefore, helping to prevent conditions associated with hormonal changes that accompany menopause.

The advantages of improving the general knowledge, as well as the knowledge of oral manifestations of menopause are twofold. The deficits in women's receipt of comprehensive care would be eliminated and there would be an identification of practice behaviors that needed to be employed to improve the ability of healthcare professionals to counsel patients. An excellent opportunity for triage exists among healthcare providers if they are informed about both the general and oral aspects of menopause. Prior to this study there has been no exploration of the relationships between medical and dental healthcare providers' ability to identify oral manifestations of menopause, address unhealthy oral and general health behaviors, and suggest healthier practices to improve their female patients' overall well-being and oral health. Lack of widespread

professional collaboration led researchers to narrow the design of this study to assess the knowledge, opinions, and practices of one state's dental hygienists, nurses and physicians regarding menopause and associated oral manifestations. Information from this study could result in curriculum changes that address concerns specific to women's health, signify the need for additional continuing education courses, and identify the need for further multi-regional research. This study may also serve as a model for other states or regions wishing to assess the collaborative efforts of multiple professions in addressing the ability of the healthcare providers to render comprehensive care to their female patients.

Research Hypotheses/Research Questions

The investigators' hypotheses are: 1) do Maryland nurses and physicians have greater general knowledge of menopause than dental hygienists, but less knowledge regarding oral manifestations associated with menopause; 2) are Maryland nurses and physicians more likely to identify and counsel patients about general knowledge of menopause than dental hygienists; and, are dental hygienists more likely to identify and counsel patients about oral manifestations of menopause; 3) are Maryland nurses and physicians, as compared to dental hygienists, more likely to agree that their entry-level program adequately prepared them, in general knowledge of menopause; however, are dental hygienists more likely to agree that their entry-level program more adequately prepared them, in knowledge of oral manifestations associated with menopause; 4) will the overall interest in obtaining additional information on menopause and/or its associated oral manifestations be high among Maryland dental hygienists, nurses and physicians ; 5) is the health professional's gender, advanced professional degree(s), date