



## Reader's Forum

# Comment on recently published article "Assessment of Knowledge, Behaviors, and Anxiety Levels of the Orthodontists about COVID-19 Pandemic"

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*The Turkish Journal of Orthodontics* recently published a research paper titled "The Assessment of Knowledge, Behaviors, and Anxiety Levels of the Orthodontists about COVID-19 Pandemic."<sup>1</sup> It was a well-written manuscript addressing one of the most pertinent contemporary issues in dentistry and orthodontics. The COVID-19 pandemic has had severe effects which might stay for a long time, if not forever. Because of their commendable research goals, we read this paper with great interest.<sup>1</sup> In the process, we could identify few methodological errors and paucities of this paper in the interest of qualitative research.

The study was conducted in one region only, which limits the generalizability of the results. Future researchers can target a better sampling frame with people from different regions of the same country or different countries. Similarly, ignoring the level of education of the participants and their clinical experience (in form of years in practice) can lead to bias.<sup>2,3</sup> The knowledge of orthodontists and hence their behavior and anxiety levels are bound to be affected by this aspect and must have been addressed in greater detail. Even the use of appropriate statistical methods such as meta-regression can be of some help.<sup>2</sup>

Additionally, according to the principles of qualitative research, a questionnaire is a tool for the assessment of one or more outcomes.<sup>2,3</sup> The questionnaire must first be developed using techniques and understanding of qualitative research, tested for its validity and reliability, and then administered.<sup>2</sup> Lack of these details is a major paucity in this paper and most of the papers of similar nature. In the absence of this methodological purity, the survey results cannot be considered as accurate and primarily reflect the trends regarding the subject.

In concluding, we would again thank the authors for igniting our minds with these novel aspects and would hope that future researchers address the points raised by us for the interest of science.

## REFERENCES

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## Author's response

### Response to Comment on recently published article "Assessment of Knowledge, Behaviors, and Anxiety Levels of the Orthodontists about COVID-19 Pandemic"

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First of all, we would thank to the authors for the letter to the editor for the research titled "The Assessment of Knowledge, Behaviours, and The Anxiety Levels of The Orthodontists about COVID-19 Pandemic". In response to the author's recommendation to involve orthodontists from different regions and countries for a better sampling frame, the questionnaire of the present study was sent to the all registered orthodontists among the country by Turkish Orthodontic Society. However, most of the participants were from Istanbul, Ankara and Izmir which were the most populous cities in Turkey. There were only sporadic participants from other cities, so all of them were grouped into one group named as "other" in the tables. It would be a better sample with people from different countries as the author suggested however the main aim and the target group of the present study was to evaluate the behaviors of the orthodontists in Turkey.

With regard to the clinical experience and education of the participants, the ages of the participants were included

and grouped in the questionnaire since the time spent in the profession and therefore the experience increases with increasing age. Additionally, as it was explained in the results section, the relation between the age of the participants and the behavior or anxiety levels was evaluated statistically however no statistically significant difference was found when the prevalence of anxiety was stratified by age. Considering the statistical analysis for the evaluation of that relation, the statistician selected and analyzed the method. Furthermore, you suggested meta-regression analysis as the statistical method. However, all the suitable analyzes selected and applied by a statistician.

Regarding the concerns about the principles of qualitative research, the Turkish version of the 7 items Generalized Anxiety Disorder (GAD-7) test was applied in the last part of the questionnaire to assess the anxiety levels of orthodontists and the validity and reliability of that version was already tested in a previous study.<sup>1</sup> The rest parts of the questionnaire were about demographic information, general questions about COVID-19, treatment strategies and the protective measures that were not thought necessary for testing of their validity and reliability.

Thank you again for your kind and valuable comments to the article, and also contributions to the literature which will be extremely beneficial for future studies.

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