

## Perceptions of Dental and Unani Students towards Reproductive and Sexual Disorders Management in Western UP Districts of India

Anuradha Davey<sup>1</sup>, Sanjeev Davey<sup>2</sup>, S K Raghav<sup>3</sup>, N Singh<sup>4</sup>, Shobit Jain<sup>5</sup>, Sidhhant Jain<sup>5</sup>, Vasvi Mahajan<sup>5</sup>, Shrishti Gupta<sup>5</sup>, Rahul Siwach<sup>5</sup>, Suyash Vasudeva<sup>5</sup>, Prince Tyagi<sup>5</sup>

<sup>1</sup>Associate Professor, Community Medicine Department, Subharti Medical College, Meerut, Uttar Pradesh, India

<sup>2</sup>Associate Professor, <sup>3</sup>Lecturer cum Statistician, <sup>4</sup>Professor and Head, Community Medicine Department, Muzaffarnagar Medical College and Hospital, Muzaffarnagar, Uttar Pradesh, India

<sup>5</sup>MBBS Students, Subharti Medical College, Meerut, Uttar Pradesh, India

**Correspondence :** Dr. Sanjeev Davey, Email: Sanjeevdavey333@gmail.com

### Abstract:

**Introduction:** Correct perceptions of young Dental and Unani students towards Reproductive and Sexually Transmitted Infections (RTIs and STIs) Management are not only essential; for the prevention of Occupational Exposures to RTIs and STIs( including HIV/AIDS) to them from their Clinical Practice, but also for effective management of such cases in their future clinical practice as evident from their Improper attitudes currently existing in literature. **Objective:** To understand In-depth about perceptions towards RTI and STI Management among Dental Students and Unani Medical College students in their colleges study curriculums. **Method :** A Cross sectional Bi-centric Study was done at 2 Institutions on 1000 Students (500 Dental( BDS) and 500 Unani(BUMS) students of all batches for 7 months from Jan 2018 to July 2018. The Students Qualitative data was obtained by Semi-structured E-questionnaire sent to them via emails. Key RTIs and STIs were included in this study such as: HIV, Hepatitis B, Hepatitis C, Human Pappiloma Virus (HPV), Chlamydia, Gonorrhoea etc. The data were analyzed by software Epi-info(version 7.2.2.2). **Results:** The Dental students of (BDS) had significantly better knowledge and attitudes as to compared Unani (BUMS ) students(  $p < 0.001$ ) in both the understanding of importance of socio-cultural factors in RTI/STI causation and key diseases management strategy towards RTI/STI in their respective setups. **Conclusion:** RTI and STI management needs priority both in BDS as well as BUMS courses. However BUMS-Unani students needs improvement knowledge and proper attitudes towards RTI/ STI management from their Study Curriculum. This attitude issue needs more consideration in their clinical teaching.

**Key Words:** Deaths, Dengue, Incidence, Seropositivity, Trend

### Introduction:

According to World Health Organization (WHO), more than 1 million people every day suffer from sexually transmitted infection (STI) globally. WHO estimates that 500 million new cases of one of four curable STIs (chlamydia, gonorrhoea, syphilis and trichomoniasis) occur each year worldwide.<sup>[1]</sup> The irony is that a large proportion of new STIs occur amongst adolescents and young adults who may not be aware that they are infected, which has a negative impact upon their future sexual and

reproductive health.

Sexually transmitted infections and reproductive tract infections (STIs/RTIs) are important public health problems in India. Studies suggest that 6% of the adult population in India is infected with one or more STIs/RTIs and the prevalence of these infections is considerably higher among high risk groups ranging from 20-45%.<sup>[2]</sup> Individuals with STIs/RTIs have a significantly higher chance of acquiring and transmitting HIV. Moreover, STIs/RTIs are also known to cause infertility and reproductive

morbidity. Controlling STI/RTIs helps decrease HIV infection rates and provides a window of opportunity for counselling about HIV prevention and reproductive health.

Currently, the available data from the STI/RTI control and prevention programme suggests a significant decline of bacterial STI (syphilis, gonorrhoea). Chancroid is almost on the verge of disappearance. On the other hand, viral STI (herpes, genital warts, hepatitis B) are showing an increasing trend. There is a significant burden of lower RTI (trichomoniasis, bacterial vaginosis and candidiasis) among women with no evidence to suggest a decline in their prevalence, thus affecting the quality of their reproductive health.<sup>[3]</sup>

Adolescence is a period of life ranging from age 10 to 19 years as per WHO Criteria. Currently there are more than 1.2 billion adolescents aged 10–19 years in the world accounting for more than 18% of the world's population. Reproductive health is an important area of concern in adolescent health especially among girls and is intimately connected with the issues such as RCH; population control, and HIV/AIDS prevention. It is also a sensitive area due to socio-cultural taboo of discussion about sexuality and reproduction in the Many societies across the Globe including India.<sup>[4]</sup>

Adolescents are at a significant risk of RTIs and STIs due to lack of knowledge on such issues and it has been reported that there is poor level of knowledge regarding STIs including HIV/AIDS in rural areas among Adolescents.<sup>[5]</sup> It has also been found from many studies<sup>[6-14]</sup> across the globe (e.g. Bangladesh, Ethiopia, Uganda, Thailand, Saudi Arabia and Italy) that knowledge regarding transmission and prevention of the RTI and STIs are not sufficient among students.

The Indian Adolescents and Young Women scenario is also not very good. One study<sup>[15]</sup> in Urban Slums of India revealed that even among Women very few people know about the STIs other than HIV.<sup>[15]</sup> Researchers have also shown that oro-dental hygiene is an important component of general health and also

a factor in sexual health. Oral inflammation controlling and regular dental check-ups in which both men and women are attending, particularly prior to conceiving, appears to be helpful in enhancing reproductive ability.<sup>[16]</sup>

Although the scenario of Medical and Dental students knowledge of RTIs and STIs is better as compared to Non- Medical students.<sup>[6-7,9-13,17,18-22]</sup> However study<sup>[23]</sup> from India reveals that although Dental students had adequate knowledge about HIV/AIDS and their attitude towards management HIV+ people was significantly negative. Another Study<sup>[17]</sup> in India on Medical and Allied Professionals emphasize the need and scope to provide correct and detailed information on HIV/AIDS for new entrants for helping them acquire adequate knowledge and develop appropriate attitudes towards HIV/AIDS.

Moreover many dental professionals think that even dealing with an infected person at the dental and Unani Clinics, they are safe from contracting a sexually transmitted disease (STD) there. The Infections can also occur to them through exposure to an infected person's blood, which can occur through splashes to unprotected eyes, nose or mouth, as well as percutaneous injuries. In the case of HSV2 and HPV, infections can occur through exposure to an infected person's saliva. In addition, Dentist may sustain exposure to many viruses including the other human herpes viruses (there are eight in all), influenza and Epstein-Barr.<sup>[24]</sup> Study<sup>[25]</sup> in Indian Context on Medical students has also emphasized that Effective measures needs to be taken to improve preventive practices of the students to prevent them from risk of Hepatitis transmission. Mandatory vaccination against Hepatitis B needs to be implemented. So there is a need for interventions to improve safe work practices, hepatitis B vaccination, HBV post-immunization serology and use of protective barriers. Also appropriate policies and procedures are needed for reporting and managing exposures.<sup>[21]</sup>

Moreover level of exposure and risk of acquiring such infections among Unani students are also not

evident clearly from existing Literature. Therefore studies specifically exploring and comparing the the perceptions of Dental and Unani Medical students towards RTIs and STIs Management carry a special importance.

#### **Method:**

#### **Research question:**

What are the comparative perceptions of Dental Students of Subharti University and Allama Iqbal Unani Medical College students in Muzaffarnagar as part of continuation of Problem Solving for Better Health (PSBH) Bi-centric Project towards RTI and STI Management in 2 colleges?

**Objective:** To understand In-depth about perceptions towards RTI and STI Management among Dental Students and Unani Medical College students in their colleges study curriculums.

#### **Ethical approval**

First approval of Ethical Committees of the Institutions were sought from both Subharti Medical College and Allama Iqbal Unani Medical College in Muzaffarnagar followed by U.G. Students consent for their participation in study followed by their final enlisting. The consent of all Dental( U.G) as well as Unani ( BUMS)Medical students were taken only after explaining the future importance of this study.

#### **Working Definition for RTI/STI<sup>[2]</sup>**

Reproductive tract infection(RTI) is a broad term that includes sexually transmitted infections as well as other infections of the reproductive tract that are not transmitted through sexual intercourse. In women, RTI includes infections of the outer genitals, vagina, cervix, uterus, tubes, or ovaries. In men, RTI involves the penis, testes, scrotum, or prostate. RTI are caused by bacteria, viruses, or protozoa that person gets either through sexual contact or by non-sexual route.

The term "Sexually Transmitted Infections" (STI) is a term used to indicate that infections caused by microbes may not manifest as symptoms and do not always result in a disease.

**Study design:** Our was a a Cross sectional Bi-centric Study at 2 Institutions

#### **Duration of study:**

1<sup>st</sup> Jan 2018 to 31<sup>st</sup> July 2018 ( 7 months) -as per study protocol approval.

#### **Place of study**

The study was done on 500 Dental Students of Subharti Dental College under Subharti University and 500 Allama Iqbal Unani Medical College students in Muzaffarnagar district of state Uttar Pradesh (India) in 2018. The respective Colleges were chosen for this study-because the RTI/STI Cases were seen both by dental and Unani UG students as per part of their Study curriculum. The E-questionnaire was first Pretested and pre-validated before sending them via email to respective Principals of Dental and Unani Medical College. All the Students were then given E-questionnaire to fulfil this and return it within 6 Months of Participating in the study.

Quantitative data in our study data collection in our study was done through Semi-structured E-questionnaire. The E- Questionnaire consisted of two parts:

Part A -To know Socio-Demographic-Cultural profile data of Dental Students (learning Dental Surgeries) and Unani ( BUMS students) both Studying RTI/STI Management as per their respective study curriculums.

Part B -Questions on Perceptions about RTI/ STI Management via semi-structured interviews.

#### **Sample Size calculation criteria for Quality Check and Representativeness**

Due to no clear-cut availability of prevalence of Perceptions towards RTI/ Management among dental and Unani students in India , in our study setting it was assumed that at least 50% DENTAL STUDENTS as well as 50% Unani Medical Students may be Knowing RTI /STI Management as per WHO guidelines. This was done to ensure that sufficient

students had got incorporated in terms of minimum sample size for this study.

#### Sample Size Calculation method:

$$N = \frac{Z^2 PQ}{L^2} = 4PQ/L^2$$

P=50% (assumed prevalence as per Biostatistics criteria)<sup>[26]</sup>

$$Q = 50\% (100 - P)$$

$$L = \text{Allowable error (10\% of P)} = 5$$

$$\text{So, } N = 400$$

But we Assumed that 25% rate of Non-response/ Attrition from study may occur as data collection was done via electronic mode and to get better representativeness for this study this criteria has also been indicated in literature.[27]

The Desired Sample size taken was:  $N + 25\%$  of  $N = 400 + 100 = 500$ .

So for both Colleges it was:  $N \times 2 = 500 + 500 = 1000$

So Final Sample Size was: 1000

#### Sampling Technique:

The study was done in 2 colleges i.e Subharti Dental College (Meerut) as well Allama Iqbal Unani Medical College in Muzaffarnagar simultaneously at same time by sending E questionnaire to 500 Dental Students (100 students from each year sampled randomly out of 5 Years BDS course ) and 500 Unani Medical Students (100 students sampled randomly from each year out of 5 and half years BUMS Course). The Consent was taken in Mass from Respective year students via help of Principals of Respective College.

#### Inclusion Criteria:

Only students who were willing to participate in RTI and STI study were enrolled so that their follow up remains good. As more than 30 identified pathogens can transmit RTI/STIs but important ones such as syphilis, gonorrhoea, chlamydia, trichomoniasis, human immunodeficiency virus (HIV), human papilloma virus (HPV), herpes simplex virus (HSV), and hepatitis B virus (HBV) have the greatest incidence of illness.<sup>[3]</sup> Therefore key RTI and

STI were Included in this study such as : HIV, Hepatitis B, Hepatitis C, Human Pappiloma Virus (HPV), Chlamydia, Gonorrhoea, and Knowledge of students for above diseases management keeping in view of existing Syndromic management of RTI/ STI guidelines of NACO (India) were sought.<sup>[3]</sup>

#### Data Analysis:

The e -questionnaire data from students were first checked for completeness and accuracy and was finally analyzed by appropriate statistical software such as Epi-info (version 7.2.2.2) for 3 months from Aug 2018- Oct 2018 and results were given the shape of present article in next 2 months from Nov-Dec 2018.

#### Results:

The majority of Dental and Unani students belonged to 18-20 years (52.1%), male students (51.3%), General Caste (83.6%), Hindu Religion (51.9%) and belonged to Socio-economic class 1 (85.7%).

Majority of students from both Dental (BDS) and Unani (BUMS) colleges had good knowledge of modes of HIV causation [needle sharing (99%), Men having sex with Women (89%), HIV prevention by Condoms use (85%) but all these students were most confused in responding birth pill role in protection from HIV infection (39%, 32% and 29%) and Mother to baby transmission (62%, 24% and 14%) [table 1].

Majority of students from both Dental (BDS) and Unani (BUMS) colleges had good understanding of modes of Presentations of STIs such as no obvious symptoms in Men (82%) and Women (73%), but regarding causes and cure of STIs students responses were very varied with weak understanding of causes of specific STIs in majority of them (Chlamydia (26%), Gonorrhoea (65%) and Genital warts (53%) only (table 2).

Majority of Dental (BDS) and Unani (BUMS) students although had good understanding of modes of Presentations, but they had weak understanding of causes of Hepatitis B(73%). The majority of these students responses were also poor

**Table 1: Knowledge about Modes of transmission of Main STI (HIV- AIDS) among Students[ N=1000]**

<b>Opinions about HIV - AIDS Management [Multiple Responses] (In No. and %)</b>	<b>Do not Know</b>	<b>No</b>	<b>Yes</b>
Could a person get HIV (the AIDS virus) by sharing a needle and syringe with someone when injecting drugs?	01(10)*	09(90)	990(99)
Could a woman gets HIV (the AIDS virus) through having sex with a man?	10(1)	100(10)	890(89)
If someone with HIV coughs or sneezes near other people could they get the virus?	70(7)	850(85)	80(8)
Could a man get HIV through having sex with a man?	90(9)	110(11)	800(80)
Could a person get HIV from mosquitoes?	100(10)	820(82)	80(8)
If a woman with HIV is pregnant; could her baby become infected with HIV?	240(24)	140(14)	620(62)
Could a person get HIV by hugging someone who has it?	70(7)	880(88)	50(5)
Does the pill (birth control) protect a woman from HIV infection?	320(32)	390(39)	290(29)
Could a man get HIV through having sex with a woman?	60(6)	100(10)	840(84)
If condoms are used during sex does this help to protect people from getting HIV?	40(4)	110(11)	850(85)
Could someone who looks very healthy pass on HIV infection?	110(11)	190(19)	700(70)

\*Values in Parenthesis indicate Percentages

**Table 2: Knowledge about Myths and Transmission modes of Common STIs among Students [N=1000]**

<b>Opinions about cause of STIs [Multiple Responses] (In No. and %)</b>	<b>TRUE</b>	<b>FALSE</b>	<b>Do Not Know</b>
A man can have a sexually transmissible infection without any obvious symptoms?	820(82)*	140(14)	40(4)
A woman can have a sexually transmissible infection without any obvious symptoms?	730(73)	200(20)	70(7)
Apart from HIV, all sexually transmissible infections can be cured	320(32)	500(50)	180(18)
People who always use condoms are safe from all STIs	590(59)	350(35)	60(6)
<b>Opinions about Cause of Common STDs [Multiple Responses] (In No and %)</b>	<b>TRUE</b>	<b>FALSE</b>	<b>DO NOT KNOW</b>
Chlamydia is a sexually transmissible infection that affects only women	260(26)	340(34)	400(40)
Chlamydia can lead to sterility among women	230(23)	370(37)	400(40)
Gonorrhoea can be transmitted during oral sex	650(65)	190(19)	160(16)
Genital warts can only be spread by intercourse	530(53)	290(29)	180(18)

\*Values in Parenthesis indicate Percentages



**Table 3: Knowledge about Modes of transmission and treatment of Hepatitis and HPV Infection among Students [N=1000]**

<b>Opinions about management of Hepatitis Band C</b>	<b>TRUE</b>	<b>FALSE</b>	<b>DO NOT KNOW</b>
Hepatitis C has no long-term effects on patients health	270(27)*	490(49)	240(24)
It is possible to be vaccinated against hepatitis C	400(40)	280(28)	320(32)
Hepatitis C can be transmitted by tattooing and body piercing	490 (49)	270(27)	240( 24)
Hepatitis B can be transmitted sexually	730(73)	70(7)	200(20)
All people who have hepatitis C can be cured	240(24)	260(26)	500(50)
Hepatitis C can be transmitted by sharing razors or toothbrushes	160(16)	370(37)	470(47)
<b>Opinions about HPV Infections</b>	<b>TRUE</b>	<b>FALSE</b>	<b>DO NOT KNOW</b>
Using condoms when you have sex gives complete protection against HPV?	510(51)	300(30)	190(19)
You can tell if you have HPV?	250(25)	440(44)	310(31)
Being infected with HPV always leads to cervical cancer?	500(50)	300(30)	200(20)
Vaccinating young people against HPV would encourage them to become sexually active?	180(18)	530(53)	290(29)
The vaccination won't work if a person is already sexually active?	140(14)	530(53)	330(33)
The vaccine gives you HPV?	250(25)	420(42)	330(33)
<b>A person can get infected with HPV from:</b>	<b>TRUE</b>	<b>FALSE</b>	<b>DO NOT KNOW</b>
(1) Sexual contact	830(83)	169(16.9)	01(0.1)
(2) Genital skin to genital skin contact	600(60)	130(13)	270(27)
(3) Skin to skin contact e.g. fingers/feet	420(42)	270(27)	310(31)
(4) Blood transfusions.	480(48)	140(14)	380(38)
(5) Toilet seats.	290( 29)	200(20)	510(51)
<b>Opinions about HPV Infection</b>	<b>TRUE</b>	<b>FALSE</b>	<b>DO NOT KNOW</b>
1. Affects Only or mainly men	100(10)	410(41)	490(49)
2. Only or mainly women	320(32)	270(27)	410(41)
3. Both men and women	460(46)	170(17)	370(37)
4. HPV is the virus that causes genital warts	270(27)	320(32)	410(41)
5. HPV is an infection associated with cervical cancer in women.	660(66)	170(17)	170(17)

\*Values in Paranthesis indicate Percentages

in terms of causation, modes of transmission and preventive steps for Hepatitis C virus (49% and 24% respectively) and HPV virus (27% and 51% respectively) (table 3).

The knowledge of Dental students of (BDS) were significantly ( $p < 0.05$ ) better than Unani (BUMS) students not only in role of socio-cultural factors in

RTI/STI causation [Unprotected Sex (51.8%) and Entertainment from Films and TV (54.8%) but also regarding key diseases (HIV(67.5%), Gonorrhoea, Chlamydia-53% each) treated in Syndromic management RTI/STI in their respective setups (table 4)

**Table 4: Comparative knowledge of Modes of Causation of RTI and STI among Dental and Unani Medical Students [N=1000]**

Types of Student	Responses on role of Socio-cultural factors in causation of RTIs and STI							
	Entertainment (Films/TV) (n=290)		Unprotected Sex (n=370)		Kissing (n=201)		Lack of Knowledge (n=139)	
	No.	%	No.	%	No.	%	No.	%
<b>Dental Students (n=500)</b>	159	54.8	192	51.8	98	48.7	51	36.6
<b>Unani Students (n=500)</b>	131	45.2	178	48.2	103	51.3	88	63.4
<b>TOTAL</b>	<b>290</b>	<b>29.0</b>	<b>370</b>	<b>37.0</b>	<b>201</b>	<b>20.1</b>	<b>139</b>	<b>13.9</b>
<b>Chi- Square test: <math>\chi^2=13.2</math> , d.f= 3 , p=0.004 ( &lt;0.05) Significant</b>								
<b>Knowledge of key diseases treated in Syndromic Management of RTIs and STIs as reported by Students</b>								
Type of Students	CHLAMYDIA Infection (n=280)		Gonorrhoea Infection (n=360)		Hepatitis Band C (n=200)		All other STDs (including HIV (n=160))	
	No.	%	No.	%	No.	%	No.	%
<b>Dental Students (n=500)</b>	149	53.2	192	53.3	51	25.5	108	67.5
<b>Unani Medical Students(n=500)</b>	131	46.8	168	46.7	149	74.5	52	32.5
<b>TOTAL</b>	<b>280</b>	<b>28.0</b>	<b>360</b>	<b>36.0</b>	<b>200</b>	<b>20.0</b>	<b>160</b>	<b>16.0</b>
<b>Chi- Square test: <math>\chi^2=70.3</math> , d.f= 3 , p=0.00001( &lt;0.05) Significant</b>								

**Discussion:**

Majority of students in our present study from both Dental (BDS) and Unani (BUMS) colleges had good knowledge of modes of HIV causation and these results were almost similar to findings to other studies<sup>[6,12-14,18-19,25]</sup> on female adolescents across the whole world.

On same level of questions the Dental (BDS) and Unani (BUMS) students understanding of pills role in protection from HIV infection was weak and they had also less understanding of Mother to baby transmission (this was more in entry level students of 1st and 2nd year). This reflects that despite presence of RTI and STI management in their course they are not understanding RTIs and STIs management (even at level of 4th or 5th Year students) as also indicated by few studies<sup>[8,10-12,17,23]</sup> on

poor attitudes of Adolescent female students as well as women towards understanding of RTIs and STIs.

Literature also points towards these mixed issues existing across many countries of the world from many studies.<sup>[8-15]</sup> Study in Uganda on Adolescents has found that there was a serious gap in knowledge and understanding of ‘dual protection’ against sexually transmitted diseases, including HIV/AIDS, and against pregnancy.<sup>[8]</sup> Study in Thailand on young people reveals that current programs for adolescent sexual and reproductive health focus on education and counselling and do not provide appropriate privacy or clinical care.<sup>[9]</sup> Study in Saudi Arabia reveals that STDs knowledge was inadequate among non-medical university students and School education, peer groups, internet and mass media are the main ways of learning about STDs.<sup>[11]</sup> Study among

non-medical students in Thailand indicates that they need more information on STDs. Their attitudes have shown many misconceptions regarding these issues, although many have shown a positive attitude toward learning more about STDs.<sup>[12]</sup> Study from Nigeria also reveals that although the majority of the students had an objective knowledge on STIs transmission and prevention and overall attitude was positive but their practices were not satisfactory, especially for the males and Females were more careful and health conscious than their male counterpart.<sup>[13]</sup> Study<sup>[10]</sup> on female adolescents in Saudi Arabia although reveals unsatisfactory knowledge, inadequate hygiene practices, but focus is required to improve adolescents' knowledge regarding Reproductive Health issues and also involve their parents and teachers to provide appropriate education related to this issue. Study<sup>[14]</sup> in Italy has also revealed that knowledge about human fertility and legal rules regulating assisted reproduction is rather poor among University Students, regardless of sex and type of education.

In our present study although majority of students from both colleges had good understanding of modes of Presentations of STIs such as no obvious symptoms in Men and Women, but regarding causes and cure of STIs students responses were very varied with weak understanding of causes of specific STIs such as Chlamydia, Gonnorrhoea and Genital warts due to HPV infections. This might be happening due to Poor attitudes towards learning Management of RTIs and STIs in their studies. This aspect was similar other studies<sup>[24-28]</sup> carried out in different parts of world. Study In Malaysia has found the no association of Dental students' knowledge was with their attitude towards HIV Management as well as no association was found between age and knowledge and between age, gender, or ethnicity and attitude towards HIV Management.<sup>[24]</sup> The results of another study in Pakistan however indicates that there is a also lack of knowledge about HIV, especially about the modes of transmission and prevention techniques.<sup>[25]</sup> Another study in India indicates that active student's collaboration for treatment compliance of HIV/AIDS

patients should be directed towards comprehensive training in the dental colleges.<sup>[26]</sup>

Majority of students from both Dental( BDS) and Unani(BUMS) colleges although had good understanding of modes of Presentations of causes of Hepatitis B(73%) but in majority of them the responses were poor in terms of causation, modes of transmission and preventive steps such as less understanding of causes and cure of Hepatitis C virus and HPV virus this Indicates that Indepth Knowledge of Dental and Unani students is lacking. This finding was similar to the other studies[16, 23-30] in literature. Study of Shaghaghian S (2015) also reveals that Blood and body fluid exposure in dental setting is common and a lot of them are not reported. To reduce the hazards of these exposures, infection control authorities should design interventions especially for mentioned high-risk conditions. They should change dental students' behavior especially regarding not recapping injection needles and using eyewear. Dental schools seem to need a management center and a standard protocol for following up the exposures.<sup>[20]</sup>

The significantly better knowledge of Dental students of (BDS) as compared Unani ( BUMS ) students( $p < 0.001$ ) not only in terms of role of socio-cultural factors in RTI/STI causation; but also in terms of understanding key diseases( such as HIV Gonorrhoea, Chlamydia) Syndromic management approach towards RTI/STI in their respective setups indicates that RTI STI Management is not an important priority in BUMS courses. This may be due to the fact that the good socio-demographic, economic and disciplinary factors of Dental students might be operating in good understanding of RTI and STI management.

### Conclusion:

Both, Unani and Dental students need to focus more on positive attitude towards Sexual and reproductive health disorders management related to their course. They must understand the importance of management of sexual and reproductive health problems of their patients. They



must also know how to get rid of Occupational Exposure risk of RTIs and STIs in their future Clinical Practice. Moreover, there is also a need and scope to provide correct and detailed information on all Major STIs for both dental and Unani student from their respective courses. The key shapers of students' such as Dental and Unani faculties, also needs to provide better training and knowledge on RTI and STI-related topics.

### Recommendations:

Unani Medical Students need regular interactive workshops and seminars, besides teaching sessions, focused lectures on positive attitudes towards all major RTIs as well as STIs such as HIV/AIDS, Gonorrhoea etc. This can form a basis for provision of appropriate, optimal dental and Unani care improving oral and Sexual cum Reproductive health related Information.

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