

RESEARCH ARTICLE

A Study on the General Public's Perceptions of Dental Fear Using Unstructured Big Data

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Background: This study used text mining techniques to determine public perceptions of dental fear, extracted keywords related to dental fear, identified the connection between the keywords, and categorized and visualized perceptions related to dental fear. **Methods:** Keywords in texts posted on Internet portal sites (NAVER and Google) between 1 January, 2000, and 31 December, 2022, were collected. The four stages of analysis were used to explore the keywords: frequency analysis, term frequency–inverse document frequency (TF–IDF), centrality analysis and co–occurrence analysis, and convergent correlations.

Results: In the top ten keywords based on frequency analysis, the most frequently used keyword was 'treatment,' followed by 'fear,' 'dental implant, ' conscious sedation,' 'pain,' 'dental fear,' 'comfort,' 'taking medication,' 'experience,' and 'tooth.' In the TF–IDF analysis, the top three keywords were dental implant, conscious sedation, and dental fear. The co–occurrence analysis was used to explore keywords that appear together and showed that 'fear and treatment' and 'treatment and pain' appeared the most frequently.

Conclusion: Texts collected via unstructured big data were analyzed to identify general perceptions related to dental fear, and this study is valuable as a source data for understanding public perceptions of dental fear by grouping associated keywords. The results of this study will be helpful to understand dental fear and used as factors affecting oral health in the future.

Key Words: Big data, Conscious sedation, Data mining, Dental anxiety, Perception

Introduction

1. Background

Dental phobia is used interchangeably with dental fear and is defined as avoidance of dental treatments owing to a feeling of loss of self-control during dental treatments regardless of whether treatments are simple or complex¹). A previous study showed that the prevalence of dental fear is 44.4% and 16.1% in children and adults, respectively^{2,3}). Another study demonstrated that approximately 5% to 10% had extreme dental feal⁴).

People with high dental fear have lack of cooperation during dental treatment and are much more likely to avoid dental visiting by postponing or canceling their appointments^{5,6)}. Missing regular dental care due to dental fear is

associated with poorer oral health⁷). Managing dental care is required for oral health in the interest of patients. Moreover, dental care providers should strive to understand patients' perception of dental fear in terms of patient management.

Since dental fear is related to cognition, people with dental fear seek information about how to reduce dental fear before dental visiting and can have power of subjective control over dental fear⁸. Therefore, investigating information sought by people with dental fear and analyzing the association between the information are expected to help investigating people's perception of dental fear. Previous studies reported that dental fear is associated with negative cognitive factors, such as past experiences, dental anesthesia, use of dental scaler, dental X-ray use, noise,

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pain, and cost^{9,10)}. Although these previous studies can be used to determine negative cognitive factors in patients with dental fear, there is a limitation in generalizing their findings to the public.

Text mining in big data analytics allows keyword extraction from various types of data, pattern recognition, and pattern analysis. Text mining, which categorizes and visualizes a relationship and connection between the extracted keywords, entails a quantitative approach to the analysis voluminous textual data¹¹⁾. However, little research, using unstructured data analysis technology, has been conducted in dentistry. In Korea, studies on dental hygienists' perception of work performance^{12,13)} and an online survey study that reviews patients having dental visits were reported¹⁴⁾.

2. Objectives

This study aims to extract keywords with dental fear, investigate the relationship and connection between the keywords, and categorize and visualize people's perception of dental fear. Future research will be conducted to establish the structures of perceptions related to dental fear based on the outcomes from numerous unstructured data that were quantitatively analyzed.

Materials and Methods

1. Ethics statement

Since data used in this study did not contain personally identifiable information, this study was granted exemption from review by the Institutional Review Board of Shinhan University (IRB No.: SHIRB-202309-HR-212-03).

2. Study design

This study analyzed people's perception of dental fear in Korea using the text mining technique in big data analytics that involves objectively analyzing further perception of dental fear in Korea.

3. Sample size

In this study, TEXTOM 6.0 was used to collect data from NAVER (www.naver.com; blogs, news, web documents, NAVER IN, and academic information), Google (www.google.com; web documents, news, and Facebook), and Daum (web documents, blogs, news, and cafes), as the spatial range, to identify public perception of dental fear. The temporal range was set from 1 January, 2000, to 31 December, 2022, for 13 years. This range was set based on the increasing pattern that studies on dental fear survey had increased in Korea and other countries since 2000¹⁵.

4. Data collection and preprocessing process

Fig. 1 illustrates the three stages of the data analysis process. At the first stage, Textom 6.0 was used to collect data. Textom, a program that can efficiently analyze unstructured big data, utilizes text mining techniques to collect significant keywords from numerous unstructured data. It is a useful collecting and analyzing tool to perform centrality analysis through frequency and semantic network¹⁶. It identifies core keywords from various types of texts, selects essential keywords, and develops a matrix to investigate the frequency of co-occurrence of keywords. Textom can delete data unrelated to the study subject from the collected data and performed cleaning process to combine words with spaces and without spaces if they have the same meaning¹⁷). The core keyword was set as 'dental fear' to collect text. Large amounts of relevant data were extracted from web pages (NAVER and Google) using a mechanical method, and crawling was used to extract a total of 14,087 keywords. To analyze the collected data, text preprocessing was performed to segment morpheme and remove stopwords¹⁸⁾. To minimize the impacts of dupli-



Fig. 1. Analysis process. TF-IDF: term frequency-inverse document frequency, CONCOR: CONvergence of iteration CORrealtion.

cates, keywords were removed by performing URL deduplication. Mecab, a morpheme module for efficient analysis of Korean language, was used to extract consistent outcomes.

5. Data analysis

UCINET 6 was used for frequency analysis and term frequency-inverse document frequency (TF-IDF) analysis. TF-IDF measures how important a keyword appears in a document, and the higher the frequency, the more important that word is¹⁹⁾. Degree centrality and eigenvector centrality were used for centrality analysis. Degree centrality measures the number of connections between keywords, and an influence between the connected nodes increases when the value is larger²⁰. Eigenvector centrality measures the importance of a node connection to reflect it to weighted node connection, which expands the concept of degree centrality²⁰⁾. At the third stage, co-occurrence analysis was conducted using the UCINET 6 Netdraw tool to demonstrate the connectivity between the top 30 keywords collected by Textom. In co-occurrence analysis, study subjects expressed by two words are considered related each other if the two words are used in the same document²¹⁾. CONCOR (CONvergence of iteration CORrealtion) analysis considers the correlation between the keywords which are in a similar structural location among the total network structure and is a clustering analysis that classifies keywords with high connection into one cluster²².

Results

Frequency of the top keywords and TF-IDF analysis

Among the keywords collected for analysis, the top 30 core keywords used for analysis are listed in the Table 1 with their frequency and TF-analysis results. In the top 10 keywords, the most frequently used keyword was 'treatment,' followed by 'fear,' 'dental implant,' 'conscious sedation,' 'pain,' 'dental fear,' 'comfort,' 'taking medication,' 'experience,' and 'teeth.' In the top 10 keywords based on TF-IDF analysis, 'dental implant' had the highest value, followed by 'conscious sedation,' 'teeth,' 'endodontic treatment,' and 'comfort.' The keywords took third (dental

implant), fourth (conscious sedation), and sixth (dental fear) place in the frequency analysis were in the top three of the TF-IDF analysis, demonstrating that there are differences in the frequency and importance between the keywords used in the texts. Keywords ranked by TF-IDF analysis differed from the keywords ranked by frequency analysis, and this shows that the public was more likely to perceive the word, dental fear, negatively.

2. Centrality analysis

Table 2 shows the results of centrality analysis that was performed to identify connections between the keywords for dental fear in terms of characteristics between the networks.

Table 1. Keyword Frequency and TF-IDF Analysis on Dental Fear

| Keyword | Frequency | Rank | TF-IDF | Rank |
|-------------------------|-----------|------|---------|------|
| Treatment | 6,288 | 1 | 2,001.3 | 5 |
| Fear | 5,779 | 2 | 1,484.0 | 14 |
| Dental implant | 4,779 | 3 | 4,400.6 | 1 |
| Conscious Sedation | 2,749 | 4 | 2,477.8 | 2 |
| Pain | 2,016 | 5 | 1,984.4 | 6 |
| Dental fear | 1,504 | 6 | 2,252.8 | 3 |
| Comfort | 1,409 | 7 | 1,754.7 | 10 |
| Taking medication | 1,275 | 8 | 1,973.6 | 7 |
| Experience | 1,166 | 9 | 1,701.2 | 11 |
| Teeth | 1,045 | 10 | 1,843.7 | 8 |
| Patient | 1,004 | 11 | 2,006.9 | 4 |
| Reservation | 991 | 12 | 1,587.2 | 12 |
| Expectation | 965 | 13 | 1,559.4 | 13 |
| Endodontic treatment | 721 | 14 | 1,780.5 | 9 |
| Dentist | 712 | 15 | 1,457.6 | 15 |
| Anxiety | 644 | 16 | 1,338.2 | 19 |
| Children | 583 | 17 | 1,409.3 | 18 |
| Dental caries | 582 | 18 | 1,420.5 | 17 |
| Recommendation | 577 | 19 | 1,440.6 | 16 |
| Anesthesia | 486 | 20 | 1,230.7 | 20 |
| Cost | 405 | 21 | 1,092.7 | 22 |
| Wisdom tooth | 397 | 22 | 1,102.7 | 21 |
| Surgery | 392 | 23 | 1,060.1 | 23 |
| Overcome | 368 | 24 | 1,058.0 | 24 |
| Adult | 310 | 25 | 869.4 | 25 |
| Relieve | 241 | 26 | 742.5 | 27 |
| Advantages | 233 | 27 | 779.7 | 26 |
| Noise | 211 | 28 | 673.0 | 28 |
| Worry | 196 | 29 | 654.7 | 29 |
| Burden | 195 | 30 | 652.5 | 30 |

TF-IDF: term frequency-inverse document frequency.

| | Centra | lity | Eigenvector | | |
|----------------------|---------|------|-------------|------|--|
| Keywords | degre | e | degree | | |
| | Index | Rank | Index | Rank | |
| Treatment | 822.288 | 1 | 0.482 | 1 | |
| Fear | 659.729 | 3 | 0.413 | 3 | |
| Dental implant | 769.339 | 2 | 0.465 | 2 | |
| Conscious | 459.542 | 4 | 0.321 | 4 | |
| Sedation | | | | | |
| Pain | 349.593 | 5 | 0.247 | 5 | |
| Dental fear | 146.949 | 11 | 0.094 | 13 | |
| Comfort | 273.373 | 6 | 0.2 | 6 | |
| Taking medication | 239.271 | 8 | 0.182 | 7 | |
| Experience | 242 | 7 | 0.181 | 8 | |
| Teeth | 139.661 | 12 | 0.096 | 11 | |
| Patient | 124.576 | 13 | 0.096 | 12 | |
| Reservation | 214.678 | 9 | 0.161 | 9 | |
| Expectation | 212.034 | 10 | 0.159 | 10 | |
| Endodontic treatment | 86.237 | 17 | 0.058 | 18 | |
| Dentist | 83.966 | 18 | 0.059 | 17 | |
| Anxiety | 90.525 | 15 | 0.062 | 15 | |
| Children | 54.136 | 22 | 0.035 | 22 | |
| Dental caries | 87.898 | 16 | 0.06 | 16 | |
| Recommendation | 96.254 | 14 | 0.071 | 14 | |
| Anesthesia | 62.881 | 20 | 0.044 | 20 | |
| Cost | 74.254 | 19 | 0.055 | 19 | |
| Wisdom tooth | 49.39 | 23 | 0.034 | 23 | |
| Surgery | 54.915 | 21 | 0.038 | 21 | |
| Overcome | 39.644 | 25 | 0.025 | 25 | |
| Adult | 40.305 | 24 | 0.025 | 26 | |
| Relieve | 34.237 | 27 | 0.024 | 27 | |
| Advantages | 36.881 | 26 | 0.028 | 24 | |
| Noise | 31.644 | 28 | 0.022 | 28 | |
| Worry | 23.847 | 30 | 0.017 | 30 | |
| Burden | 27.814 | 29 | 0.02 | 29 | |

| Table 2. | Comparison | of | Keywords | Frequency | and | Centrality | on |
|-----------|------------|----|----------|-----------|-----|------------|----|
| Dental Fe | ear | | | | | | |

Table 3. Co-Occurrence Network Analysis on Dental Fear

For centrality, we used degree centrality and eigenvector centrality. Degree centrality that can measure the influences of activities of keywords was conducted, showing that 'treatment' has the highest number of connection, followed by 'dental implant,' 'conscious sedation,' and 'pain.' Top five keywords in the eigenvector centrality that weighted the correlation between the keywords were same as those in the degree centrality.

3. Co-occurrence analysis

Keywords related to dental fear have relativity. The frequency of co-occurrence of the keywords was investigated, showing that the number of word types appear together was 6,000, and the frequency of co-occurrence was 76,069. The keywords 'fear' and 'treatment' appeared together the most frequently, with 1,322 times, followed by the keywords 'conscious' and 'dental implant,' with 1,268 times and the keywords 'treatment' and 'pain,' with 1,088 (Table 3).

4. CONCOR analysis

CONCOR analysis was performed to group the keywords as listed in Table 4 and shown in Fig. 2. The first group was related to common perceptions related to dental fear. Images related to the dentist are demonstrated via keywords, such as 'patient,' 'teeth,' and 'dentists.' Also, this group shows a combination of negative words (dental fear, endodontic treatment, worry, and anesthesia) and positive words (comfort). Accordingly, we can assume that various images for dental fear are present in the first group. The

| | Frequency | Percentage (%) |
|--|-----------|----------------|
| $Fear \rightarrow Treatment$ | 1,322 | 1.74 |
| Conscious Sedation →Dental implant | 1,268 | 1.67 |
| Treatment \rightarrow Pain | 1,088 | 1.43 |
| Comfort \rightarrow Dental implant | 1,025 | 1.35 |
| Dental implant \rightarrow Experience | 968 | 1.27 |
| Experience \rightarrow Comfort | 956 | 1.26 |
| Taking medication \rightarrow Conscious Sedation | 956 | 1.26 |
| Pain \rightarrow Taking medication | 956 | 1.26 |
| Dental implant \rightarrow Expectation | 954 | 1.25 |
| Expectation \rightarrow Reservation | 953 | 1.25 |

| | - | | |
|---------|--|--|----|
| Group | Characteristic | Keyword | No |
| Group 1 | Common perceptions related to dental fear | Dental fear, Patient, Tooth, Dentist, Endodontic treatment, Worry, Anesthesia, Relieve | 8 |
| Group 2 | Factors to consider to overcome dental fear | Dental implant, Experience, Expectation, Recommendation, Taking medication, Comfort, Reservation, Pain, Surgery, Cost | 10 |
| Group 3 | Perceptions related to wisdom tooth extraction | Wisdom tooth, Fear, Burden, Conscious Sedation, Advantages, Treatment | 6 |
| Group 4 | Perceptions related to dental caries | Dental caries, Adult, Overcome, Anxiety, Children, Noise | 6 |

Table 4. Dental Fear CONCOR Analysis

No: number of words per group, CONCOR: CONvergence of iteration CORrealtion.



Fig. 2. Visualization of CONCOR analysis. CONCOR: CONvergence of iteration CORrealtion.

second group was associated with the following considerations that people need to individually overcome dental fear: 'experience,' 'expectation,' 'recommendation,' 'taking medication,' 'comfort,' 'reservation,' 'pain,' 'surgery,' 'cost,' and 'dental fear.' The third group includes perceptions related to wisdom tooth extraction as a detailed factor for dental factor. The high correlations between 'wisdom tooth,' 'fear,' 'burden,' 'conscious sedation,' and advantages.' The last group consists of perceptions related to dental caries, as a detailed factor for dental fear. Keywords, such as 'dental caries,' 'adult,' 'children,' 'anxiety,' 'noise,' and 'overcome,' were highly correlated. According to the keywords of third and fourth groups, we can speculate that the public specifies and perceives dental fear especially through wisdom teeth extraction and cavity treatment.

Discussion

Key results and comparison with previous studies

This study analyzed unstructured big data using text mining techniques to identify public perceptions of dental fear. In this study, the most frequently used keywords related to dental fear were treatment, followed by fear, dental implant, conscious sedation, and pain. In TF-IDF analysis, the top three keywords were dental implant, conscious sedation, and dental fear (Table 1). This part elucidates that dental implant and conscious sedation are the most influential keywords for public perceptions related to dental fear. In co-occurrence analysis, 'conscious sedation' and 'dental implant,' taking second place, were repeated 1,268 times. This is elucidated by the fact that in the field of dental care, conscious sedation is actively recommended for those who have dental fear or need to control fears of having dental implant. From the dental care users' perspective, people who have dental fear or fears of having dental implant surgery are more likely to be frequently exposed to information about conscious sedation while searching for relevant information. This can be the factor influencing decision process for dental treatment.

Conscious sedation, such as inhalation sedation, oral sedation, and IV sedation, helps the patients to be in a trancelike state and can change patients' responses to dental treatments to positive responses by reducing pain or emotional damage during dental care²³⁾. Based on the results of CONCOR analysis in this study, conscious sedation was classified into the group 3 with dental fear, burden, advantages, and wisdom tooth. This shows that conscious sedation is recognized as a benefit that reduces burden to surgical treatments. Patients have dental fear when they are having oral-surgical procedures, such as removal of wisdom tooth. Using conscious sedation for this situation will help reducing the patients' anxiety^{24,25)}. A study by Kim et al.²⁶⁾ reported that pain was more reduced in the implant group with conscious sedation than the group without conscious sedation. Pain can be normally controlled during dental treatment or implant via local anesthesia, but fear of treatment is a psychological health issue²⁷⁾. Therefore, using conscious sedation to ease nervous irritability is efficient to reduce fear²⁸⁾. Accordingly, dental care providers should consider actively informing the public of accurate information about conscious sedation and recommending conscious sedation for providing comfort care for patients with dental fear, if needed.

In co-occurrence analysis, 'fear' and 'treatment,' taking first place, were repeated 1,322 times, and 'treatment' and 'pain,' taking third place, were repeated 1,088. Also, in the CONCOR analysis, dentist, dental fear, patient, and teeth were classified into group 1. Based on this result, we can interpret this result that public recognizes dental treatment as pain and pain as fear. Although the importance of visiting the dentist on a regular basis for oral health care is being emphasized, people recognize the dentist as a scary place and visit the dentist only when they have pain in most cases²⁹⁾. Patients with advanced dental diseases due to missing regular dental check-up owing to dental fear need treatment requiring anesthesia in most cases and are more likely to have pain on the course of treatment. Thus, this course of dental care is easily recognized as pain. A study by Shin et al.³⁰⁾ reported that the level of dental fear and worry is same as the level of pain and fear when people get a shot of anesthesia. Dentists should make an effort to ease dental patients' dental fear by actively considering the methods controlling pain, such as using local anesthesia on insertion site so that patients will not feel pain, injecting anesthetic fluids that are stored similar with the body temperature, injecting anesthetics slowly and constantly, and injecting anesthetics using painless anesthesia technique^{31,32)}.

In this study, dental caries and anxiety are in the same classification (group 4). In previous studies investigating children's perceptions of oral health³³), dental fear was reported as an influencing factors for incidence of pain and caries. Moreover, a study conducted in adults demonstrated that the number of decayed teeth, missing teeth, and decayed-missing-filled-teeth (DMFT) was much higher when the level of dental fear was higher³⁴). Self-management of dental fear will help improve oral health.

Previous studies on dental fear³⁵⁻³⁷⁾ reported the subjects' experiences with dental care or correlations between sociodemographic characteristics and dental fear induction by conducting survey questionnaire. However, the present study analyzed texts collected via unstructured data, used the results to identify general perceptions related to dental fear, and grouped keywords that have correlations. In this regard, the results of this study are valuable as evidence to understand public perceptions of dental fear.

Limitations and suggestions for further studies

In this study, since data were collected only from social portal sites, such as NAVER and Google, data should be collected from more various sources in future research. Moreover, since the time range was set from 2,000 when selecting data, and data during the overall period were analyzed, we were not able to change in perceptions according to time change. Therefore, future research should be conducted by dividing the study period to analyze keywords of texts for dental fear by periods and to review changes in perceptions.

Notes

Conflict of interest

No potential conflict of interest relevant to this article was reported.

Ethical approval

The study was approved by the Institutional Review Board of Shinhan University (IRB No.: SHIRB-202309-HR-212-03).

Author contributions

Conceptualization: Bo-Young Park and Han-A Cho. Data acquisition: Han-A Cho. Formal analysis: Han-A Cho. Supervision: Han-A Cho. Writing-original draft: Bo-Young Park and Han-A Cho. Writing-review & editing: Bo-Young Park and Han-A Cho.

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Data availability

The datasets used and/or analyzed during the current study available from the corresponding author on reasonable request.

References

- Lautch H: Dental phobia. Br J Psychiatry 119: 151-158, 1971. https://doi.org/10.1192/bjp.119.549.151
- Carrillo-Díaz M, Migueláñez-Medrán BC, Nieto-Moraleda C, Romero-Maroto M, González-Olmo MJ: How can we reduce dental fear in children? The importance of the first dental visit. Children (Basel) 8: 1167, 2021. https://doi.org/10.3390/children8121167
- 3. Armfield JM, Spencer AJ, Stewart JF: Dental fear in Australia:

who's afraid of the dentist? Aust Dent J 51: 78-85, 2006. https://doi.org/10.1111/j.1834-7819.2006.tb00405.x

- Moore R, Birn H, Kirkegaard E, Brødsgaard I, Scheutz F: Prevalence and characteristics of dental anxiety in Danish adults. Community Dent Oral Epidemiol 21: 292-296, 1993. https://doi.org/10.1111/j.1600-0528.1993.tb00777.x
- Eitner S, Wichmann M, Paulsen A, Holst S: Dental anxiety-an epidemiological study on its clinical correlation and effects on oral health. J Oral Rehabil 33: 588-593, 2006. https://doi.org/10.1111/j.1365-2842.2005.01589.x
- Samorodnitzky GR, Levin L: Self-assessed dental status, oral behavior, DMF, and dental anxiety. J Dent Educ 69: 1385-1389, 2005.

https://doi.org/10.1002/j.0022-0337.2005.69.12.tb04038.x

 Hamasha AA, Aldosari MN, Alturki AM, Aljohani SA, Aljabali IF, Alotibi RF: Barrier to access and dental care utilization behavior with related independent variables in the elderly population of Saudi Arabia. J Int Soc Prev Community Dent 9: 349-355, 2019.

https://doi.org/10.4103/jispcd.JISPCD_21_19

- Moore R, Brødsgaard I, Birn H: Manifestations, acquisition and diagnostic categories of dental fear in a self-referred population. Behav Res Ther 29: 51-60, 1991. https://doi.org/10.1016/s0005-7967(09)80007-7
- Doebling S, Rowe MM: Negative perceptions of dental stimuli and their effects on dental fear. J Dent Hyg 74: 110-116, 2000.
- Kim SK, Kim MH, Choi HJ, Hwang JG: Related factors to dental fear in some adults. J Korean Soc Dent Hyg 14: 881-886, 2014.

https://doi.org/10.13065/jksdh.2014.14.06.881

 Madani F, Weber C: The evolution of patent mining: applying bibliometrics analysis and keyword network analysis. World Pat Inf 46: 32-48, 2016.

https://doi.org/10.1016/j.wpi.2016.05.008

- Kim BR, Ahn ES, Hwang SJ, Jeong SJ, Kim SM, Han JH: Analysis of dental hygienist job recognition using text mining. J Dent Hyg Sci 21: 70-78, 2021. https://doi.org/10.17135/jdhs.2021.21.1.70
- Nagatani Y, Imafuku R, Nakai Y: Broadening the dental hygiene students' perspectives on the oral health professionals: a text mining analysis. Dent J (Basel) 10: 160, 2022. https://doi.org/10.3390/dj10090160

- 14. Lin Y, Hong YA, Henson BS, et al.: Assessing patient experience and healthcare quality of dental care using patient online reviews in the United States: mixed methods study. J Med Internet Res 22: e18652, 2020. https://doi.org/10.2196/18652
- Hong JS, Kim YS, Lee HJ, Kim JY, Chang KW: Review on dental fear and anxiety factors by DFS. J Korean Acad Oral Health 39: 229-236, 2015. https://doi.org/10.11149/jkaoh.2015.39.4.229
- Park HW, Leydesdorff L: Understanding the KrKwic: a computer program for the analysis of Korean text. J Korean Data Anal Soc 6: 1377-1387, 2004.
- Kim HW, Jun CN: An exploratory study on content creation methods utilizing big data: Linguistic and story resources for effective creation of TV home shopping content. J Cybercommun Acad Soc 31: 5-51, 2014.
- Lu XH, Jin J: A study on the lists of common Korean stopwords for text mining. KLR 63: 1-15, 2022. https://doi.org/10.16876/klrc.2022.63.13.1
- Jung JY: Keyword analysis of performing arts selection criteria using TF-IDF and N-gram: focused on projects to supports state subsidies for public institutions. Humanit Contents 58: 253-282, 2020.

https://doi.org/10.18658/humancon.2020.09.253

- Jeong JH, Kim JW: Collaborative filtering techniques using social network analysis for UCC recommendation. J Korean Inst Inf Technol 11: 185-195, 2013.
- Liu GY, Hu JM, Wang HL: A co-word analysis of digital library field in China. Scientometrics 91: 203-217, 2012. https://doi.org/10.1007/s11192-011-0586-4
- Kim YH: Semantic network of Korean pop songs- changing meaning structure from 1960's to 2000's. J Pop Narrat 21: 145-171, 2015.

https://doi.org/10.18856/jpn.2015.21.1.005

 Southerland JH, Brown LR: Conscious intravenous sedation in dentistry: a review of current therapy. Dent Clin North Am 60: 309-346, 2016.

https://doi.org/10.1016/j.cden.2015.11.009

 Lee SH, Lee SY: Changes of dental anxiety and fear in adult patients applying conscious sedation. J Korean Soc Dent Hyg 21: 53-63, 2021.

https://doi.org/10.13065/jksdh.20210006

25. Melini M, Forni A, Cavallin F, Parotto M, Zanette G:

Conscious sedation for the management of dental anxiety in third molar extraction surgery: a systematic review. BMC Oral Health 20: 155, 2020.

https://doi.org/10.1186/s12903-020-01136-0

 Kim HY, Lee SY, Cho YS: The effect of conscious sedation on pain and anxiety of implant surgery. J Dent Hyg Sci 14: 411-416, 2014.

https://doi.org/10.17135/jdhs.2014.14.3.411

- Shin YS, Lee JR, Min KJ: A study on influence of sleep dental treatment on satisfaction degree and revisit to dental clinics. J Korean Acad Dent Hyg Educ 9: 415-425, 2009.
- Kim GM, Lee JS, Kim HJ, Nam SH: The effectiveness and side effects of conscious sedation using chloral hydrate, hydroxyzine, and nitrous oxide. J Korean Acad Pediatr Dent 47: 109-119, 2020. https://doi.org/10.5933/JKAPD.2020.47.2.109

```
29. Choi JS, Kim JS: Analysis of dental fear and its related
```

- factors using dental fear survey among 13 to 18 year olds. J Korean Acad Pediatr Dent 35: 118-126, 2008.
- Shin SJ, Shin BM, Koh BI, Bae SM: Intervention for reducing dental fear and anxiety of dental patients. J Dent Hyg Sci 15: 369-376, 2015. https://doi.org/10.17135/jdhs.2015.15.3.369
- 31. Aravena PC, Barrientos C, Troncoso C, Coronado C, Sotelo-Hitschfeld P: Effect of warming anesthetic on pain perception during dental injection: a split-mouth randomized clinical trial. Local Reg Anesth 11: 9-13, 2018. https://doi.org/10.2147/LRA.S147288
- Lee JY, Choe SA: Pain control using the Point-Inject Technique in dental local anesthesia. J Korean Acad Dent Adm 9: 32-37, 2021.

https://doi.org/10.22671/JKADA.2021.9.1.32

- 33. Goettems ML, Shqair AQ, Bergmann VF, Cadermatori MG, Correa MB, Demarco FF: Oral health self-perception, dental caries, and pain: the role of dental fear underlying this association. Int J Paediatr Dent 28: 319-325, 2018. https://doi.org/10.1111/ipd.12359
- Armfield JM, Slade GD, Spencer AJ: Dental fear and adult oral health in Australia. Community Dent Oral Epidemiol 37: 220-230, 2009.

https://doi.org/10.1111/j.1600-0528.2009.00468.x

35. Lim EJ, Lim SR: Validity and reliability of the Korean version of the Index of Dental Anxiety and Fear. J Dent Hyg Sci 17: 20-29, 2017.

https://doi.org/10.17135/jdhs.2017.17.1.20

 Jung SJ, Lee DW, Park BM, et al.: Analysis of dental avoidance factors of dental patients. J Korean Soc Dent Hyg 20: 937-947, 2020.

https://doi.org/10.13065/jksdh.20200086

 Lee HY, Na MH, Lee YH: Analysis of related factors for dental fear. J Korean Soc Dent Hyg 12: 57-65, 2012.