*Fellow of the Master Degree of Oral Surgery and Implantology, School of Medicine and Health Sciences, University of Barcelona, Barcelona, Spain.

†Associate Professor of Oral Surgery, Master Degree Program in Oral Surgery and Implantology, School of Medicine and Health Sciences, University of Barcelona; and Researcher at IDIBELL (Bellvitge Biomedical Research Institute), Barcelona, Spain.

‡Associate Professor of Oral Surgery, Master Degree Program in Oral Surgery and Implantology, School of Medicine and Health Sciences, University of Barcelona; and Researcher at IDIBELL (Bellvitge Biomedical Research Institute), Barcelona, Spain.

§Lecturer in Oral Surgery and Coordinator of the Master Degree Program in Oral Surgery and Implantology, School of Medicine and Health Sciences, University of Barcelona; and Researcher at IDIBELL (Bellvitge Biomedical Research Institute), Barcelona, Spain.

‖Chairman and Professor of Oral and Maxillofacial Surgery, School of Medicine and Health Sciences, University of Barcelona; Director of the Master Degree Program in Oral Surgery and Implantology, EFHRE International University/FUCSO (Fundacio Catalana per a la Salut Oral); Coordinator/Researcher at IDIBELL (Bellvitge Biomedical Research Institute); and Head of the Oral Surgery, Implantology and Maxillofacial Surgery Department, Teknon Medical Center, Barcelona, Spain.

¶Senior Lecturer in Oral Surgery and Director of the Master Degree Program in Oral Surgery and Implantology, School of Medicine and Health Sciences, University of Barcelona; and Researcher at IDIBELL (Bellvitge Biomedical Research Institute), Barcelona, Spain.

Conflict of Interest Disclosures: None of the authors have any relevant financial relationship(s) related to this study. Jorge Toledano-Serrabona has received no grants, personal fees, or nonfinancial support. Alba Sánchez-Torres reports grants, personal fees, and nonfinancial support from MozoGrau (Valladolid, Spain) and Mundipharma (Cambridge, England) outside the submitted work. Octavi Camps-Font reports grants, personal fees, and nonfinancial support from Mundipharma (Cambridge, England) and Menarini Richerche (Florence, Italy) outside the submitted work. Rui Figueiredo reports grants, personal fees, and nonfinancial support from MozoGrau (Valladolid, Spain) and Avinent (Santpedor, Spain); grants from Mundipharma (Cambridge, England); and personal fees from BioHorizons Ibérica (Madrid, Spain), Inibsa Dental (Lliçà de Vall, Spain), Dentsply Implants Iberia (Barcelona, Spain), and Araguaney Dental (Barcelona, Spain) outside the submitted work. Cosme Gay-Escoda reports grants, personal fees, and nonfinancial support from Mundipharma (Cambridge, England) and Menarini Richerche (Florence, Italy) outside the submitted work. Eduard Valmaseda-Castellón reports grants, personal fees, and nonfinancial support from MozoGrau (Valladolid, Spain) and Avinent (Santpedor, Spain) and personal fees from BioHorizons Ibérica (Madrid, Spain), Inibsa Dental (Lliçà de Vall, Spain), and Dentsply Implants Iberia (Barcelona, Spain) outside the submitted work.

Address correspondence and reprint requests to Prof Figueiredo: School of Medicine and Health Sciences, Campus de Bellvitge, University of Barcelona, C/ Feixa Llarga s/n, Pavelló Govern, 2ª planta, Despatx 2.9, 08907, L'Hospitalet de Llobregat, Barcelona, Spain; e-mail: ruipfigueiredo@hotmail.com

Received April 13 2020

Accepted June 15 2020

0278-2391/20/30667-4

https://doi.org/10.1016/j.joms.2020.06.024

extractions, psychiatric disorders, or cardiac problems or patients undergoing anxiolytic or antidepressant drug treatment were excluded. Participants were randomized into 2 groups according to whether they watched an informative video about the surgical procedure (video group) or not (control group). The primary outcome variable was the difference between groups regarding patient anxiety assessed with the State-Trait Anxiety Inventory (STAI) and the Modified Dental Anxiety Scale (MDAS). The secondary outcome variables were hemodynamic parameters recorded during different moments of the surgical procedure. Descriptive, bivariate, and multivariate analyses were performed, and a repeated-measures mixed model was generated. Statistical significance was considered for $P < .05$.

Results: Fifty patients referred for M3M extraction met the inclusion criteria. The final data analysis was based on 47 patients: 25 from the video group and 22 controls. The bivariate analysis showed the video group to have a significant decrease in anxiety as measured by the MDAS ($P = .006$; 95% confidence interval [CI], −4.1 to −0.7) and STAI-State ($P = .003$; 95% CI, −13.7 to −0.7). A significantly lower heart rate was likewise found in the video group ($\chi^2 = 4.30$, $df = 1$, $P = .038$). The linear regression analysis adjusting for the STAI-Trait also showed lower dental anxiety measured by the MDAS in the video group ($P = .023$; 95% CI, 0.32 to 4.14).

Conclusions: Providing preoperative information through an informative video about M3M removal significantly reduces patient anxiety and heart rate during the surgical procedure.

J Oral Maxillofac Surg 78:1933-1941, 2020