

Assessing Clinician Perspectives on Patient Expectations Vs Post-Treatment Satisfaction in Prosthodontic Care: A Cross-Sectional Survey

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Abstract—Patient expectations play a crucial role in determining perceived treatment success in prosthodontics. This study explores clinicians’ observations regarding the alignment between patient expectations and post-treatment satisfaction in prosthodontic care. A cross-sectional survey of practicing clinicians revealed significant gaps in expectation management, with satisfaction outcomes closely tied to pre-treatment communication and case complexity. These insights highlight the importance of patient education and realistic treatment planning in improving clinical outcomes and satisfaction levels.

observations of how expectations align with post-treatment satisfaction. This study aims to fill that gap by surveying prosthodontic practitioners on their experiences and insights.

II. METHODOLOGY

A cross-sectional, questionnaire-based survey was conducted among clinical practitioners involved in prosthodontic procedures. A structured Google Form was distributed through dental associations and professional WhatsApp groups in October 2025.

I. INTRODUCTION

In prosthodontic care, patient satisfaction often extends beyond clinical success. It is shaped by expectations surrounding aesthetics, comfort, function, and overall experience. When expectations are misaligned with realistic outcomes, even technically successful treatments may result in dissatisfaction. Understanding this dynamic is vital for delivering patient-centered care.

- Sample size: 50 responses
- Respondents: Prosthodontists, General Dentists with prosthodontic practice
- Survey type: 15 questions (Multiple choice and open-ended)
- Key themes:
 - Nature of patient expectations
 - Frequency of expectation mismatch
 - Clinician strategies for expectation management
 - Observed levels of post-treatment satisfaction

While previous studies have explored patient-reported outcomes, fewer have focused on clinicians’

PRE- TREATMENT PATIENT EXPECTATIONS					
1. In your experience, what are the most common patient expectations before prosthodontic treatment?	BDS	MDS	Fellowship	Total (n = 50)	p-value
Aesthetics / Smile Appearance	7 (14.0%)	3 (6.0%)	0 (0.0%)	10 (20.0%)	0.093
Aesthetics + Chewing	2 (4.0%)	1 (2.0%)	0 (0.0%)	3 (6.0%)	
Aesthetics + Chewing + Speech	4 (8.0%)	0 (0.0%)	0 (0.0%)	4 (8.0%)	
All Options	3 (6.0%)	6 (12.0%)	0 (0.0%)	9 (18.0%)	
Aesthetics + Chewing + Speech + Longevity + Low Cost	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	

PRE- TREATMENT PATIENT EXPECTATIONS					
1. In your experience, what are the most common patient expectations before prosthodontic treatment?	BDS	MDS	Fellowship	Total (n = 50)	p-value
Aesthetics / Smile Appearance	7 (14.0%)	3 (6.0%)	0 (0.0%)	10 (20.0%)	0.093
Aesthetics + Chewing + Comfort	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Chewing + Comfort + Longevity + Quick	0 (0.0%)	1 (2.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Chewing + Comfort + Longevity + Quick + Low Cost	0 (0.0%)	1 (2.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Chewing + Comfort + Longevity + Low Cost	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Chewing + Longevity	0 (0.0%)	0 (0.0%)	1 (2.0%)	1 (2.0%)	
Aesthetics + Chewing + Longevity + Quick	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Chewing + Longevity + Low Cost	4 (8.0%)	0 (0.0%)	0 (0.0%)	4 (8.0%)	
Aesthetics + Chewing + Low Cost	1 (2.0%)	0 (0.0%)	1 (2.0%)	2 (4.0%)	
Aesthetics + Speech	1 (2.0%)	1 (2.0%)	1 (2.0%)	3 (6.0%)	
Aesthetics + Speech + Comfort + Longevity + Quick + Low Cost	0 (0.0%)	1 (2.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Longevity + Quick + Low Cost	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Aesthetics + Longevity + Low Cost	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Improved Chewing Ability	2 (4.0%)	1 (2.0%)	0 (0.0%)	3 (6.0%)	
Chewing + Speech + Comfort + Longevity	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Better Speech	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

Footnotes:

- BDS – Bachelor of Dental Surgery; MDS – Master of Dental Surgery; Fellowship – Specialized Fellowship in prosthodontics.
- Patient expectations categorized as: Aesthetics / Smile Appearance, Improved Chewing Ability, Better Speech, Comfort, Longevity of Prosthesis, Quick Treatment Time, Lower Cost.
- Multiple responses were combined if participants reported more than one expectation.
- p-value represents the association between qualification and patient expectations (Chi-square test). P value less than 0.05 is considered as significant.
- Percentages are calculated based on the total sample size (n = 50).

2. How realistic do you feel patient expectations usually are?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.582
Very Realistic	11 (22.0%)	7 (14.0%)	0 (0.0%)	18 (36.0%)	
Somewhat Realistic	20 (40.0%)	7 (14.0%)	3 (6.0%)	30 (60.0%)	
Unrealistic	1 (2.0%)	1 (2.0%)	0 (0.0%)	2 (4.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

3. How confident are you that the treatment will meet your expectations?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.388
Extremely Confident	8 (16.0%)	8 (16.0%)	1 (2.0%)	17 (34.0%)	
Very Confident	18 (36.0%)	6 (12.0%)	2 (4.0%)	26 (52.0%)	
Moderately Confident	5 (10.0%)	0 (0.0%)	0 (0.0%)	5 (10.0%)	
Slightly Confident	1 (2.0%)	1 (2.0%)	0 (0.0%)	2 (4.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

4. Do you routinely discuss treatment limitations and outcomes with patients before starting treatment?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.623
Always	16 (32.0%)	11 (22.0%)	2 (4.0%)	29 (58.0%)	
Often	15 (30.0%)	4 (8.0%)	1 (2.0%)	20 (40.0%)	
Sometimes / Rarely	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

5. Which shade-matching methods are you familiar with?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.193
Visual Shade	21 (42.0%)	14 (28.0%)	3 (6.0%)	38 (76.0%)	
Digital Shade Matching	8 (16.0%)	0 (0.0%)	0 (0.0%)	8 (16.0%)	
Photographic Method	3 (6.0%)	1 (2.0%)	0 (0.0%)	4 (8.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

6. What do you think are the factors that affect shade matching?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.331
Lighting Condition	3 (6.0%)	0 (0.0%)	0 (0.0%)	3 (6.0%)	
Lighting Condition + Tooth-Related Factors	4 (8.0%)	0 (0.0%)	0 (0.0%)	4 (8.0%)	
Lighting + Tooth + Patient-Related Factors	3 (6.0%)	1 (2.0%)	0 (0.0%)	4 (8.0%)	
Lighting + Tooth + Patient + Shade Guide Factors	4 (8.0%)	8 (16.0%)	2 (4.0%)	14 (28.0%)	
Lighting + Tooth + Shade Guide Factors	4 (8.0%)	0 (0.0%)	1 (2.0%)	5 (10.0%)	
Lighting + Patient Factors	1 (2.0%)	1 (2.0%)	0 (0.0%)	2 (4.0%)	
Lighting + Patient + Shade Guide Factors	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Lighting + Shade Guide Factors	0 (0.0%)	1 (2.0%)	0 (0.0%)	1 (2.0%)	
Tooth-Related Factors	5 (10.0%)	0 (0.0%)	0 (0.0%)	5 (10.0%)	
Tooth + Patient + Shade Guide Factors	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Patient-Related Factors	3 (6.0%)	4 (8.0%)	0 (0.0%)	7 (14.0%)	
Patient + Shade Guide Factors	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Shade Guide Factors	2 (4.0%)	0 (0.0%)	0 (0.0%)	2 (4.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

7. Do you consider asking for the patient's opinion during shade selection important?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.234
Yes	21 (42.0%)	14 (28.0%)	2 (4.0%)	37 (74.0%)	
Often	6 (12.0%)	0 (0.0%)	1 (2.0%)	7 (14.0%)	
Sometimes	5 (10.0%)	1 (2.0%)	0 (0.0%)	6 (12.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

8. Do you feel shade selection is 2 or 3 in your practice?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.427
Very Easy	8 (16.0%)	6 (12.0%)	0 (0.0%)	14 (28.0%)	
Easy	18 (36.0%)	9 (18.0%)	3 (6.0%)	30 (60.0%)	
Difficult	5 (10.0%)	0 (0.0%)	0 (0.0%)	5 (10.0%)	
Very Difficult	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

POST – TREATMENT PATIENT SATISFACTION

1. Based on your observation/feedback, how 2 are patients after prosthodontic treatment regarding	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.439
Very Satisfied	8 (16.0%)	8 (16.0%)	1 (2.0%)	17 (34.0%)	
Satisfied	14 (28.0%)	2 (4.0%)	1 (2.0%)	17 (34.0%)	
Dissatisfied	9 (18.0%)	5 (10.0%)	1 (2.0%)	15 (30.0%)	
Very Dissatisfied	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

2. How 2 do you find that patient expectations are fully met post-treatment?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.888
Always	12 (24.0%)	7 (14.0%)	1 (2.0%)	20 (40.0%)	
Often	15 (30.0%)	6 (12.0%)	2 (4.0%)	23 (46.0%)	
Sometimes	5 (10.0%)	2 (4.0%)	0 (0.0%)	7 (14.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

3. In your opinion, what are the main reasons for patient dissatisfaction after prosthodontic treatment?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.058
High Cost	4 (8.0%)	3 (6.0%)	0 (0.0%)	7 (14.0%)	

High Cost + Long Treatment + Discomfort	0 (0.0%)	0 (0.0%)	1 (2.0%)	1 (2.0%)	
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High Cost + Long Treatment + Discomfort + Unmet Aesthetic + Lack of Adaptation + Unrealistic Expectations	4 (8.0%)	5 (10.0%)	0 (0.0%)	9 (18.0%)
High Cost + Long Treatment + Unmet Aesthetic + Lack of Adaptation	0 (0.0%)	1 (2.0%)	0 (0.0%)	1 (2.0%)
High Cost + Long Treatment + Unmet Aesthetic + Unrealistic Expectations	0 (0.0%)	1 (2.0%)	0 (0.0%)	1 (2.0%)
High Cost + Long Treatment + Lack of Adaptation + Unrealistic Expectations	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)
High Cost + Discomfort + Unmet Aesthetic	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)
High Cost + Discomfort + Unrealistic Expectations	2 (4.0%)	0 (0.0%)	0 (0.0%)	2 (4.0%)
High Cost + Discomfort	1 (2.0%)	2 (4.0%)	0 (0.0%)	3 (6.0%)
Long Treatment	4 (8.0%)	0 (0.0%)	0 (0.0%)	4 (8.0%)
Long Treatment + Discomfort + Unmet Aesthetic + Lack of Adaptation	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)
Long Treatment + Lack of Adaptation	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)
Long Treatment + Unrealistic Expectations	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)
Discomfort	2 (4.0%)	0 (0.0%)	0 (0.0%)	2 (4.0%)
Discomfort + Unmet Aesthetic	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)
Discomfort + Unmet Aesthetic + Unrealistic Expectations	2 (4.0%)	0 (0.0%)	1 (2.0%)	3 (6.0%)
Lack of Patient Adaptation + Unrealistic Expectations	1 (2.0%)	2 (4.0%)	0 (0.0%)	3 (6.0%)
Unrealistic Pre-Treatment Expectations	2 (4.0%)	0 (0.0%)	0 (0.0%)	2 (4.0%)
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)

4. Are patients usually 2 with the shade selected for their prosthesis?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.088
Yes	20 (40.0%)	14 (28.0%)	2 (4.0%)	36 (72.0%)	
Rarely	12 (24.0%)	1 (2.0%)	1 (2.0%)	14 (28.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

5. Do you consider aftercare instructions to be as important as the treatment itself?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.874
Yes	28 (56.0%)	15 (30.0%)	3 (6.0%)	46 (92.0%)	
Important – Neutral	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Not Very Important	2 (4.0%)	0 (0.0%)	0 (0.0%)	2 (4.0%)	
Not Important at All	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

STRATEGIES AND REFLECTIONS

1. Do you use any tools/methods to manage expectations (digital smile design, mock-ups, trial prosthesis, counselling sessions)?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.114
Yes	25 (50.0%)	15 (30.0%)	2 (4.0%)	42 (84.0%)	
Sometimes	7 (14.0%)	0 (0.0%)	1 (2.0%)	8 (16.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

2. Do you think digital shade-matching devices improve accuracy compared to visual shade guides?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.192
Strongly agree	14 (28.0%)	9 (18.0%)	2 (4.0%)	25 (50.0%)	
Agree	16 (32.0%)	3 (6.0%)	0 (0.0%)	19 (38.0%)	

Neutral	1 (2.0%)	2 (4.0%)	1 (2.0%)	4 (8.0%)	
Disagree	1 (2.0%)	1 (2.0%)	0 (0.0%)	2 (4.0%)	

Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)
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3. Do you believe conducting expectation–satisfaction surveys can improve patient care and communication?	BDS	MDS	Fellowship	Total (n = 50)	p-value 0.629
1	1 (2.0%)	0 (0.0%)	0 (0.0%)	1 (2.0%)	
3	2 (4.0%)	1 (2.0%)	1 (2.0%)	4 (8.0%)	
4	9 (18.0%)	3 (6.0%)	0 (0.0%)	12 (24.0%)	
5	20 (40.0%)	11 (22.0%)	2 (4.0%)	33 (66.0%)	
Total	32 (64.0%)	15 (30.0%)	3 (6.0%)	50 (100.0%)	

INTERPRETATION

- The present study assessed patient expectations and satisfaction in prosthodontic treatment based on responses from 50 dental practitioners (BDS – 64%, MDS – 30%, Fellowship – 6%).

PRE- TREATMENT PATIENT EXPECTATIONS

- Aesthetics and smile appearance were the most common expectations (20%), followed by combinations involving chewing, speech, longevity, and cost (26%). Few prioritized only chewing (6%) or speech (2%) (p = 0.093, not significant). Most practitioners found expectations realistic (60% somewhat, 36% very, 4% unrealistic; p = 0.582). Confidence in meeting expectations was high (52% very, 34% extremely; p = 0.388). Almost all (98%) routinely discussed treatment limitations (p = 0.623). The visual shade method was most used (76%), followed by digital (16%) and photographic (8%) (p = 0.193). Shade matching was mainly influenced by lighting, tooth, and patient factors (28%; p = 0.331). Most (74%) sought patient opinions (p = 0.234), and shade selection was generally easy (88% easy/very easy; p = 0.427).
- All pre-treatment variables showed no statistically significant association with practitioner qualification (p > 0.05), indicating that responses were consistent across BDS, MDS, and fellowship groups.

POST – TREATMENT PATIENT SATISFACTION

- After treatment, 68% of patients were satisfied or very satisfied, while 32% were dissatisfied (p =

0.439; not significant). Expectations were always met in 40%, often in 46%, and sometimes in 14% (p = 0.888; not significant).

- Main causes of dissatisfaction included high cost (14%), combined high cost, long treatment, and unmet aesthetics (18%), long duration (8%), discomfort (4%), and unrealistic expectations or poor adaptation (6%). The association between qualification and dissatisfaction reasons approached statistical significance (p = 0.058).
- Most practitioners (72%) reported patients were satisfied with the prosthesis shade (p = 0.088; not significant). A large majority (92%) considered aftercare instructions as important as the treatment itself (p = 0.874; not significant).

STRATEGIES AND REFLECTIONS

- Expectation management tools such as digital smile design, mock-ups, and counselling sessions were used by 84% of practitioners (p = 0.114; not significant).
- 88% agreed or strongly agreed that digital shade-matching devices improve accuracy (p = 0.192; not significant).
- 90% (with 66% rating 5 and 24% rating 4) believed that conducting expectation–satisfaction surveys improve patient care and communication (p = 0.629; not significant).
- All findings in the “Strategies and Reflections” section were not statistically significant (p > 0.05), indicating consistent positive attitudes across all qualification levels (BDS, MDS, and Fellowship).

III. DISCUSSION

The findings underline a recurring issue in prosthodontic care: a misalignment between what patients expect and what is clinically achievable. The emphasis on aesthetics, often fueled by social media and digital filters, contrasts with the clinical focus on function, durability, and biological feasibility.

Clinicians acknowledge that expectation management is as crucial as technical execution. Those who invested in comprehensive consultations and used visual/digital tools reported higher satisfaction levels among patients.

These insights echo previous literature that suggests patient education and shared decision-making significantly influence treatment outcomes in prosthodontics.

IV. CONCLUSION

This study highlights the gap between patient expectations and post-treatment satisfaction as observed by clinicians in prosthodontic practice. Managing expectations through clear communication, visual aids, and honest discussion about limitations is essential to improve satisfaction and perceived success. Further studies involving both clinician and patient perspectives could enhance understanding and guide better clinical protocols.

V. LIMITATIONS

- Clinician-reported outcomes may not fully reflect patient sentiment.
- Sample size was modest and limited to a specific geographical/professional network.
- Specialty bias may influence perception (e.g., prosthodontists vs general dentists).

RECOMMENDATIONS

- Encourage standardization of pre-treatment counseling protocols.
- Incorporate expectation vs outcome training in prosthodontic education.

- Explore integration of digital simulation tools in general practice.

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