



"A Survey-Based Analysis of Attitude, Awareness, and Knowledge of Patients regarding the Use of Dental Implants at a Swiss University Clinic"

General information:

Gender: _____ Age: _____

Occupation: _____

Educational Background: ☐ Compulsory education ☐ Apprenticeship diploma ☐ High School ☐ University degree

Estimated annual income:

☐ <30'000.- ☐ >37'000-79'000.- ☐ >80'000.-

Do you have any dental insurance?

☐ yes ☐ no If yes, which franchise: _____

Average number of dental appointments per year: ☐ Only in emergency ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ >5

Average number of dental hygiene appointments per year: ☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ >3

Annual budget for all dental costs: ☐ till 1000.- ☐ 1000-2000.- ☐ 2000-3000.- ☐ over 3000.-

How would you rate your own oral hygiene?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10
1 bad 10 very good

What oral hygiene products do you use? (multiple selection possible)

☐ Electric toothbrush ☐ Manual toothbrush ☐ Rinsing solutions ☐ Dental floss ☐ Interdental brushes

Have you ever had gum problem that required treatment? ☐ yes (current) ☐ yes (treated) ☐ no

How many tooth extractions have you had?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ >10



Attitude, awareness, and knowledge about implants:

Have you ever had a dental implant treatment?

☐ yes ☐ no

If, yes how many: _____

Interested in an implant restoration for a tooth gap or in case of toothloss:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

1 no interest

10 great interest

Sources of information about dental implants (multiple selection possible):

☐ No information ☐ Dentist ☐ Friends ☐ Internet ☐ Social Media

☐ Someone who already had implant therapy ☐ Other:

How well informed do you subjectively feel about dental implants?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

1 not at all

10 very good

What do you prefer for treatment regardless of time, cost, oral hygiene, etc.?

☐ Removable prosthesis ☐ Hybrid prosthesis (removable prosthesis on teeth or implants) ☐ Fixed

solution (implant) ☐ Doesn't matter (the main thing is to ensure functionality)

Sort the mentioned treatment options with 1 (best) – 4 (worst) according to personal priority:

☐ Dental bridge _____ ☐ Removable dentures _____

☐ Implants _____ ☐ no replacement _____

I would prefer the implant restoration to be performed by the following:

☐ General dentist

☐ Dentist with specialization (oral surgery, implantology).

☐ does not play a role

☐ Other criterion: _____

Payment willingness for an implant-supported dental prosthesis in Switzerland:

☐ 2000.- ☐ 3000.- ☐ 4000.- ☐ 5000.- ☐ egal

Payment willingness for an implant-supported dental prosthesis in other countries:

☐ 2000.- ☐ 3000.- ☐ 4000.- ☐ 5000.- ☐ egal

What are your expectations, worries, fears, and apprehensions regarding dental implant surgery?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

1 none

10 very big

Expected pain due to implant restoration?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

1 little pain Schmerzen

10 very much pain

Willingness to invest time in treatment/follow-up care for implant-supported dentures:

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

1 little time

10 very much time



How long do you estimate the survival time of an implant (in years)?

☐ 5 years ☐ 5-10 years ☐ 10-20 years ☐ >20 years ☐ no idea

Effort for oral hygiene in implant care compared to natural teeth?

☐ less effort ☐ same amount of effort ☐ more effort ☐ no idea

Personal reasons for not having an implant therapy (multiple selection possible):

☐ Costs ☐ Time required ☐ Anxiety ☐ Surgery ☐ Lack of information ☐ other

How important is the functional result of an implant-supported denture for you?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10
1 not important *10 very important*

How important is the esthetic result of an implant-supported denture for you?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10
1 not important *10 very important*

Thank you for participating in the survey! All data collected in this survey will be treated confidentially and evaluated anonymously.