

Oral Health Among Vulnerable Populations (Aging/Pregnant Populations)

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“Healthy Aging is the ability to maintain functional ability and well-being. Addressing the overall health needs of older adults involves considering challenges posed by those with increasing vulnerability, dependency and frailty.”





The More You Know



Myth	Fact
Only school kids get cavities.	Cavities can develop at any age.
Gum disease is part of growing older.	Gum disease can be prevented and does not have to be part of getting older.
Dry mouth is a natural part of the aging process.	Dry mouth is not part of aging; find the cause and get relief.
If you do not use chewing tobacco, you do not need to worry about mouth and throat cancers.	Not just smokeless tobacco dip or chew can increase chances of getting mouth and throat cancers. Risk increases with use of tobacco and alcohol; HPV increase risk of throat cancers. Cancer risks increase with age. Most are diagnosed 55 years or older when diagnosed.



Edentulism: One in six adults in the U.S. have lost all their teeth

- Among smokers 43% had lost all their teeth which is more than 3 x the prevalence of those who never smoked (12%)
- Women more susceptible to edentulism



17.5%

of Louisiana adults 65 years and older had all their natural, permanent teeth removed due to tooth decay or gum disease³

Periodontitis (Gum Disease)

By age 65, 70% have gum disease

- Diabetes mellitus, respiratory diseases, cardiovascular disease, stroke, arthritis, Alzheimer's disease, rheumatoid arthritis, cancer and chronic obstructive pulmonary disease have increased risk of periodontal disease.
- Poor oral hygiene (brushing, and flossing)
- Minimal education, lower income and socio-economic factors
- Uninsured
- Limited access to dental care
- Cigarette smoking
- Smoking cessation reduces risk of periodontal disease and tooth loss.
- Over half of adults 65 and older are taking four or more RX drugs to manage chronic conditions cause xerostomia which can exacerbate periodontal issues.

Dry Mouth

- Side effects of certain medications and dehydration
 - Medications for hypertension, depression and bladder control, diabetes, Sjogren's Syndrome, HIV/AIDS, radiation therapy, chemotherapy, nerve damage head and neck injuries
- Challenges posed
 - Hard to chew, swallow or talk
 - Increased risk for developing tooth decay or fungal (yeast) infections
 - Wearing dentures can be uncomfortable with dry mouth; may cause sore spots where dentures rub on gums and roof of the mouth

Oral Cancer Prevalence:
54,000 New Cases/Yr.; with 11,000 Deaths/Yr.

3 Signs of Oral Cancer



A sore that
doesn't go away



Red or white
patches



Persistent pain
or **tenderness**
when swallowing

Oral cancer disease of older adults is diagnosed on average at the age of 64 years.

Three out of four cases occur in individuals with one or more risk factors.

Tobacco use is the strongest risk factor

Smoking and smokeless tobacco products increase risk.

Alcohol and heavy drinking increases risk of oral cancer.

Smoke and drink risk for oral cancer increases a much as 30 times more than non-smokers and drinkers.

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Oral Cancer

- Early diagnosis improves outcomes
- 5-year survival rate for early-stage oral cancer diagnosis is 80%
- Only a quarter oral cancers are diagnosed at the early stage.
 - Symptoms
 - A sore, irritation, lump or thick patch in the mouth, lip, throat, a lump on the neck, a white or red patch in the mouth, a sore throat or feeling something is caught in the throat, hoarseness, difficulty chewing, swallowing or speaking, difficulty moving the jaw or tongue, numbness in the tongue or mouth, swelling of the jaw in denture wearers, or ear pain.

Chronic Health Conditions and Mental Health

- As we age, the burden of chronic disease adversely affects nutrition, self-esteem, quality of life and general health.
 - 2020 Census estimated 21% of older adults in U.S. (52.9 million) live with a mental illness, physical disability, or special needs.
 - Meds for mental health problems inadvertently, increase risk of oral disease due to side effects such as dry mouth, taste disturbances and lethargy.
 - Coping mechanisms such as smoking, alcohol consumption and dietary habits of high sugar intake further jeopardize their oral health status.
 - Poor oral health is not an inevitable consequence of aging or early recognition to pathologies.
- Issues that affect oral health:
 - Accessibility, cognitive impairment, disability add to vulnerability
 - More than 60% lack dental insurance
 - High percentage have unmet dental needs
 - Many do not see a dentist annually
 - Lack of providers willing and trained to treat special needs patients also contributes to higher rates of dental disease and overall disability.

SEVERE TOOTH LOSS AND CHRONIC DISEASES

Severe tooth loss was 50% higher in people with:

Asthma

Heart disease

Diabetes

Liver condition

Emphysema

Rheumatoid arthritis

Fair or poor general health

Stroke history



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Tooth loss is preventable. Primary care providers can educate their patients with chronic diseases about their increased risk for tooth loss, and screen and refer them for dental care.



<https://bit.ly/3epebJw>

Oral Health and Chronic Systemic Diseases

- Risks

- Unhealthy diet
- Tobacco use
- Alcohol consumption

- Strategies

- Education outside the dental office
- Chronic disease management to incorporate oral health awareness, education and referrals

Strategies for Reducing Risk for Caries

- Fluoride concentrations recommendation for remineralization especially in institutionalized settings, nursing homes or home bound adults.
- Use higher fluoride toothpaste and fluoride varnish concentrations .2% NaF Mouthwash
- Fluoride toothpaste 5000 ppm 2 x day and monthly fluoride varnish application
- For root caries application of 5% NaF four times per year and yearly application of silver diamine fluoride (SDF) application as interventions
- Chlorhexidine, xylitol, and casein phosphopeptide-amorphous calcium phosphate also reduces cariogenic bacteria

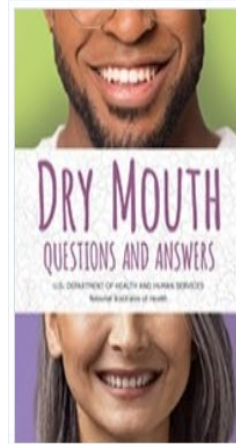
Additional Strategies for Improved Oral Health in Older Adults

- Electric toothbrushes
- Chlorhexidine rinses for plaque reduction
- Interdental brushes
- Water flossers
- Oral rinses for reducing microbial burden
- Regular dental check-ups every six months
- Comprehensive health check-ups to identify systemic conditions that contribute to gum disease



Other Recommendations

- Artificial saliva (sprays, lozenges, gels may be used before meals if needed to increase salivary flow)
- Sucking on sugarless hard candy
- Chew gum with xylitol
- Use fluoride mouth rinse



Dry Mouth: Questions and Answers

Brochure for patients covering the causes of dry mouth and the importance of saliva to oral health.

English PDF: 8 pages

[Order print version](#)

Spanish PDF: 8 pages

[Order print version](#)

By 2030, the elderly population will increase so one in every five residents or more than 70 million Americans will be 65 or older.



- Strategies to improve oral health of older adults

- Routine dental exams for older persons with or without teeth is critical
- Priority of oral health education, prevention and intervention throughout the life span can bolster quality of life for aging adults.
- American Dental Association recommends a multidisciplinary approach to maintain oral health in older adults
- Visits with PCP and not the dentist can create opportunities for other health professions to improve oral health in older adults.
- People who visit their PCP may not have a dentist, creating opportunities to improve oral health through education and appropriate referrals.
- Early recognition of dental disease and referral increases likelihood of individuals retaining their natural teeth, which can impact nutrition, self-esteem, and overall health.

Common Oral Health Findings During Pregnancy

- Gingivitis, Inflamed gums that may bleed 60 – 75% of pregnant women have gingivitis
- Granulomas: Benign small gum tumors
- Tooth decay: White, brown or black spots (1 out of 4 women child-bearing age have untreated tooth decay)
- Erosion (may be visible)

Prenatal Oral Health Screening Guide

Follow the steps below:

1. Take an oral health history. Use the Prenatal Oral Health Information Form as a questionnaire or, use the questions below to obtain it verbally.

Questions that may be included are as follows:

- Do you have swollen or bleeding gums, tooth pain or any other issues with your mouth?
- If you have any mouth pain, how do you handle it? (Can follow up by asking about taking medications, drinking, etc.)
- Have you experienced morning sickness since becoming pregnant?
- When was the last time you went to a dental appointment?
- Have you made an appointment to get a dental check-up while you are pregnant?
- Do you need help finding a dental professional?
- Do you have any questions about receiving oral health care while pregnant?

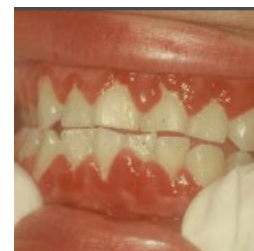
(refer to conversation guide for more guidance on having this discussion)

2. Examine the patient's mouth for problems to see if treatment is needed. Check for swollen or bleeding gingiva, tooth decay and signs of infection. Some examples of common conditions like these are shown on the back of this card.

3. Refer and remind. If there is disease or need for urgent oral care, refer the patient to a dental professional. This is also a good time to talk about any fears they may have about receiving dental care while pregnant. Remind all patients about routine oral health practices:

- See a dental professional for a check up before they deliver.
- Brush twice a day and floss once a day.
- If they get sick, rinse mouth with a solution of 1 tsp of baking soda in a glass of water. Try to avoid brushing immediately after vomiting.

4. Document findings. Document the oral exam and history in the patient's file, noting if there were any signs of oral health problems and if the patient was referred to a dental professional.



Pregnancy Gingivitis: The gums may appear inflamed. The patient may have experienced gums that swell or bleed more often during brushing and flossing. Recommend brushing twice a day and flossing to help minimize inflammation. Refer for a professional dental cleaning and oral hygiene guidance.

Tooth decay: Early signs of tooth decay may begin to appear as white spots. More advanced tooth decay may be brown or black with visible holes or pits in the teeth. The patient may be experiencing tooth sensitivity or pain. Refer to a dental professional for treatment.



Tooth Erosion: Frequent vomiting in pregnancy may cause tooth erosion because of exposure to stomach acid. You may not be able to see if this is happening, but recommend rinsing the mouth with 1 tsp baking soda and water to neutralize acid after vomiting. Counsel to avoid highly acidic foods and drinks.

Pregnancy Tumors: Benign, red and large lump usually near the upper gum line. They can cause the gums to bleed. Refer to a dental professional for an evaluation.



Healthy Teeth: Women with healthy teeth have no signs of decay and no other clinical findings.

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- Questions and Concerns During Pregnancy
 - Is it safe to have a dental visit while pregnant?
 - At what point in my pregnancy should I have a check-up?
 - What information should I tell my dentist about my pregnancy?
 - What about dental treatments? Are they safe?
 - What steps should I take to prevent problems during pregnancy?
 - Is it safe to get oral health care during pregnancy?



Oral health is essential to general health and well-being **across the lifespan.**



During pregnancy, women may be more prone to gum disease and cavities.



A mother's oral health status is a strong predictor of her child's oral health status.



If mothers have high levels of untreated cavities or tooth loss, their children are 3X more likely to have cavities.

www.cdc.gov/oralhealth

It is safe to get oral health care during pregnancy.



Tell your dentist you are pregnant and your due date.

Mom's oral health impacts the baby's oral health.

X-rays and dental care are safe during pregnancy.

See a dentist twice per year.

What Can One Do to Improve Oral Health During Pregnancy?

- Eat healthy foods
- Drink water (fluoridated when available)
- Eat healthy snacks
- Eat fewer sweets
- Drink fewer sugary drinks
- Brush with a soft toothbrush and fluoride toothpaste 2 x day
- Floss before bed
- Rinse with alcohol-free mouth rinse with fluoride
- If you vomit, rinse with a teaspoon of baking soda in a cup of water

Strategies to Improve Oral Health

- Use a fluoride toothpaste to prevent and heal early decay
- Brush 2 x day
- Drink fluoridated water
- Floss regularly
- Use a special brush or plastic pick
- See a dentist for routine check-ups
- Fluoride treatment (varnish, gel or mouth rinse)
- Do not smoke, chew tobacco or snuff
- Smoking increases risk of periodontal disease and cause inflammation, weakens the immune system, causes cell damage.
- Nicotine is toxic to cells and breaks down tissue

Resources

- American Academy of Pediatrics Oral Health Campaign Toolkit
 - Protect Tiny Teeth
- <https://www.aap.org/en/newsroom/campaigns-and-toolkits/oral-health/>
- CDC
 - <https://www.cdc.gov/oralhealth/publications/features/pregnancy-and-oral-health.html#print>



Now you're brushing for two

WHEN YOU'RE PREGNANT YOU MAY BE MORE PRONE TO GUM DISEASE AND CAVITIES

After your baby is born, you could pass the bacteria that contributes to cavities from your mouth to hers.

THAT'S WHY EVERY PREGNANT WOMAN NEEDS TO GET A DENTAL CHECK-UP

MAKE YOUR APPOINTMENT BEFORE THE BABY COMES

ONCE SHE COMES, WE'RE GUESSING YOU'LL BE PRETTY BUSY

IF YOU HAVE MORNING SICKNESS, BRUSH YOUR MOUTH WITH ONE TSP OF BAKING SODA IN A GLASS OF WATER AFTER YOU GET SICK

BE SURE TO BRUSH TWICE A DAY AND FLOSS DAILY

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Pregnant?

Schedule your dental visit today.

Let us know if you're pregnant or planning to become pregnant and we'll help you to schedule a dental check-up – because the sooner you're both protected from gum disease and cavities, the better.

Make your next dental appointment today.



Prenatal Oral Health Information Form

Patient Name: _____ DOB: / /

Telephone: _____ Est. Delivery Date: / /

Tell Us About Your Dental Routines.

Choose the answer that is most similar to your dental care routine.

For office use only
A _____ B _____ C _____

- How often do you visit a dental professional?
 - Once every six months.
 - Once a year.
 - Once every few years or never.
- How often do you brush your teeth?
 - Once or twice a day.
 - A couple times a week.
 - Not very often.
- How do you satisfy your pregnancy cravings?
 - I usually eat healthy food like fruits, vegetables, whole grains, yogurt or cheese.
 - Sometimes I eat healthy things, but I also eat sugary/salty snacks like cookies and chips.
 - I mostly eat sugary/salty snacks like cookies and chips.
 - Other. Please describe _____
- What do you usually drink during the day?
 - Mostly water, milk, or other sugar-free beverages.
 - Some water and some soda, juice, coffee or tea.
 - Mostly soda, juice, coffee, or tea.
 - Other _____
- How often do you floss?
 - At least once a day.
 - Every few days or at least once a week.
 - Not very often or never.
- Do you smoke or use any tobacco products? (including cigarettes, e-cigarette (vaping) devices or chewing tobacco)
 - No.
 - Yes, but rarely.
 - Yes, regularly.
- What do you do after you experience morning sickness?
 - Rinse my mouth out with a baking soda and water solution.
 - Brush my teeth and/or rinse with just water.
 - Nothing.
 - I don't get morning sickness.
 - Other. Please describe _____
- Are you experiencing any pain, bleeding or hot/cold sensitivity in your teeth or gums today?
 - No.
 - A little bit.
 - Yes. Please describe _____
- Have you had any dental work (fillings, extractions, root canals, etc.) done in the past 12 months?
 - No.
 - Yes. Please describe _____
 - I need dental work, but I haven't received it.
- Do you have dental insurance?
 - Yes.
 - I don't know.
 - No.

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Q & A or Comments

Thank you.

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