Dentistry Across the Life Span

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Disclaimer

• I have no conflicts of interest to declare





Objectives

- Discuss strategies to optimize oral health in older adults
- Discuss evidence-based impact of oral health on overall health and well being in older adults
- Discuss common misconceptions of oral health as we age



Health care disrupted by COVID-19



Cancellation or delay among adults over age 50 with appointments in 2021:

31% Dental appointment

29% Primary care visit

28% Procedure, test or operation

Disrupted care rescheduled as of January 2022:

64%-85%

of vaccinated or vaccinated & boosted

30%-53% of unvaccinated

Kullgren J and Malani P. Pandemic disruptions mean many older adults still haven't gotten needed care. Healthyagingpoll.org. Accessed Feb 28 2022.



Exams

- Dental Care as part of overall health and well being!
- Oral health care is important if you have all your teeth, most of your teeth, or no natural teeth at all!
- Exams
 - Every six months
 - Every 12 months if edentulous (no natural teeth)
 - Medical/Dental/Medication History; clinical exam; X-rays
 - Patient expectations! Goals, concerns, desires, and others!



Domains of Risk Assessment

- Risk of cavities: Caries risk assessment
 - Habits
 - Diet/nutrition
 - Self care
- Risk of gum disease: Periodontal risk assessment
 - Self care
 - Chronic systemic conditions
 - Habits
- Risk of oral cancer: Head and neck cancer risk assessment
 - Habits
 - Self care



Prevention/Maintenance

- Prophylaxis "Adult Cleaning"
 - Every six months
 - Check gum/bone health
 - Review self care
- Periodontal Maintenance
 - After successful treatment for periodontal disease
 - Every 3 to 4 months is typical
 - Necessary to maintain stability and prevent regression
 - May regress and need more treatment



X rays

- Radiographs
 - Bite Wing Xrays (BWX)
 - Detect cavities between teeth
 - Give some indication of bone loss
 - Every 12-18 months generally
 - May shorten or lengthen frequency pe
 - Panorex/Panoramic
 - The "forest" look!
 - Periapical
 - Entire root of tooth in bone
 - Health of tooth and bony support of to







Periapical



FIGURE 1. Diagnostic panoramic radiograph.



Oral Health as We Age.....

- Normative Age changes
 - Expected
 - thinning of lining of mouth
 - gum recession
 - changes in translucency of teeth
 - "smile lines" and associated changes in skin
 - "thinning" of lips

- Prevalent Age changes
 - Not expected
 - Modified by life experiences, exposures, etc.
 - Loss of teeth
 - Dry mouth*

Overlap of two

Example: wrinkles

Normative but influences by sun exposure



Prevention and Home Care

- Adult Cleaning, prophylaxis, every 6 months
- Periodontal Maintenance Cleaning, every 3-4 months
 - This helps to maintain stability and health

- Brush with fluoridated toothpaste*
 - Twice per day, once at bedtime at minimum
- Floss, technique sensitive, may use aids
 - Once per day—bed time
- Rinse with fluoridated rinse
 - Once per day**--bed time



Home care with dentures

- May have a removable partial denture or a complete denture...or a combination!
- Remove at night, let tissues rest
- Cleanse soft tissues with a soft brush
- Cleanse appliance with a brush/water...occasionally a little toothpaste
 - Over sink/counter
 - Washcloth covering bottom of sink
- Soak appliance overnight in water, may use commercial

Nutrition

- Not just "what" you eat, but "how" you eat, and drink, influence oral health...and systemic health and well being!
- Do less of: opening cans, boxes, and bags and use of preprocessed items!
- Do more of: washing, peeling, chopping and use of fresh items!
- Frequency versus duration
- Crunchy, crispy, colorful foods!
- Vit A: mucosal health and immunity
- Calcium/vitamin D: bones
- Vit. C: connective tissues
- Omega fatty acids protective for inflammation (fish)



Expected as we age?

- Xerostomia
- Root Caries (cavities)
- Loss of teeth
- Taste discrimination



Dry Mouth

- Xerostomia
- 1-2L per day
- Quality and quantity
- Medications big contributing factor but also systemic diseases
- Saliva is extremely important
 - Swallow
 - Digest
 - Immunity
 - Lubricate
 - Taste
 - Buffer against acids
- High risk of cavities with decreased quality and/or quantity of saliva!!



Do you have Dry Mouth?

- Chew and swallow an entire cracker without fluids
- May have: difficulty swallowing, cracked lips, bad breath, difficulty wearing a denture, inside of mouth sticky
- What can you do?
 - First try to determine most likely contributing factor(s)
 - Water!
 - Modify medications
 - Rx stimulant
 - Sprays, gels, toothpastes
 - Sugar free chewing gum or mints



Root Caries ("cavities" or decay)

- Gingiva recede
- Exposure of root surfaces
- Root Surface = cementum
- More prone to sensitivity
- Root surfaces are "softer"
- Root surfaces more prone to decay
- Difficult areas to clean
- Good news is that fluoride helps!



Loss of Teeth

- Myth buster: loss of teeth is NOT a normal part of aging
- Better oral care and treatment options increase opportunities to keep our natural teeth
- Fluoride is timeless!
 - Over the counter and Rx fluoride rinses
 - Over the counter and Rx toothpastes with fluoride
- Periodontal disease treatments
- Mechanical cleaning
- Regular Xrays and exams

Taste Discrimination

- Salt, sour, bitter, sucrose, umami
- Results varied
- Genetic components
- Variety of substances used to test taste
- Many other factors
- General decline with age in taste perception
- May affect food choices, habits, and practices of food preparation



Oral and Systemic Health and Well Being...

- Cardiovascular health
- Diabetes
- Depression
- Medications: Rx and OTC



Cardiovascular health

- Cardiovascular disease as an inflammatory process
- Periodontal disease is an inflammatory process
- Bacteria from the oral cavity enter the circulatory system through daily functions as well as during oral hygiene and dental treatments
- Oral bacteria have been found associated with "plaques" in the circulatory system



Diabetes and Oral Health

- Diabetes
 - Slower and poor healing
 - Affect saliva
 - Oral fungal infections
 - Higher chance of periodontal disease

- Periodontal Disease
 - Affect diabetes course
 - HbA1c?
 - Glucose associated with blood cells
 - More indicative of diabetes control over time
 - Blood glucose (sugar) control?
 - "finger stick"
 - A snap shot of blood glucose status



Depression

- Behavioral and Physiological
- Raised cortisol levels
- Inflammation
- Conflicting results from studies
- Periodontal Disease
 - Takes a relatively long time to manifest
 - Follow patients with long diagnosed depression

- Cavities
 - Behavioral components?
 - Lower salivary flow
 - Depressed salivary immunity
- Bi-directional relationships
 - Oral health affects mental health
 - Mental health affects oral health



Medications: Rx and Over the Counter

- Dry Mouth is the most common side effect
- Testing of drugs not done
 - Too expense
 - Considered mild side effect not worth testing
- Dramatic effects on quality of life and oral health
- May ask MD about time of administration and alternative Rx



Dental Treatment Options

- Cavities
 - Silver fillings; tooth colored fillings; crowns
- Periodontal Disease
 - Scaling/Root Planing; grafting; bone grafts*; crown lengthening
- Esthetics
 - Tooth colored crowns; veneers; "bleaching"; orthodontics
- Function
 - Removable dentures; implants
- Grinding/Clenching
 - Bitesplints



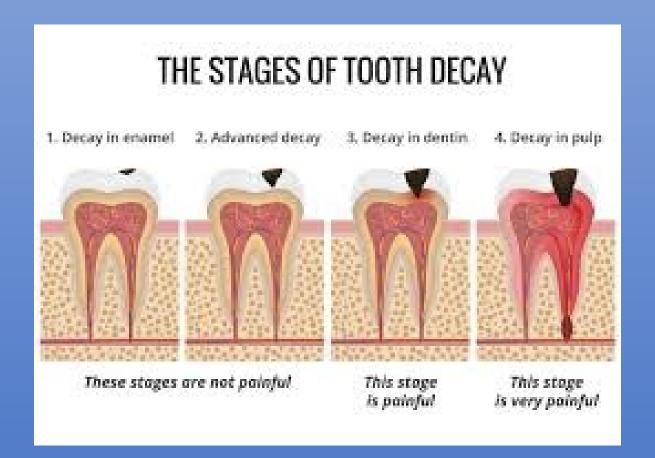
Individual Teeth

Cavities

- Demineralized tooth enamel that has penetrated to the underlying dentin, often leaving a hole
- Sensitive to cold and sweets, transient unless it approaches the "pulp" of the tooth which is comprised of nerves/blood vessels
- Remove the affected tooth structure and replace with amalgam, composite, or even gold



Cavities and Fillings...









"Root Canals"-Endodontic Therapy

- If the cavity goes beyond the enamel, through the dentin, and into the pulp
- The blood vessels and nerves become affected-PAIN
 - Spontaneous, constant
 - Temperature, chewing

Infection may develop as the area becomes contaminated by the bacteria

from the oral cavity

An Abscess may develop





What if a filling is not enough?

- If too much tooth structure is damaged or lost from trauma, a "full coverage" crown is indicated.
- Crowns may be metal or porcelain, or a combination of the two





Esthetics: Full coverage crowns





Esthetics: Braces and Veneers



Aligning teeth and bite with braces
| NENTICTOV



Modify shade, shape, and size with veneers with minimal tooth structure loss

Esthetics: Whitening

- Home bleaching: longest
 - Over the counter
 - Tape
 - Overnight common
- Dentist prescribed bleaching: Intermediate time
 - Carrier trays
 - gel
- In office bleaching: one visit
 - Highest concentration
 - Light
 - Up to 8 shades!







Single Tooth Replaceme

- Bridge
 - Tooth supported
 - Implant supported
- Implant



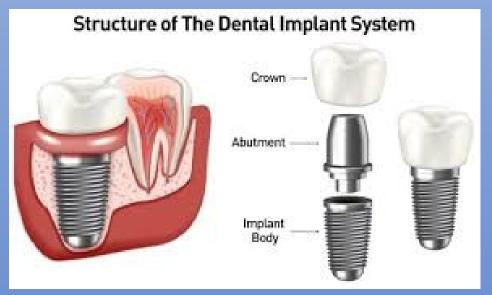






Implants

- Need bone quality and quantity
- No periodontal disease
 - Treated, stable
- Need space
 - Between teeth
 - Between upper teeth and lower teeth
- 3D imaging











Multi-Teeth Replacement

- Bridge
- Removable Partial Dentu
- Implants









Whole mouth replacements

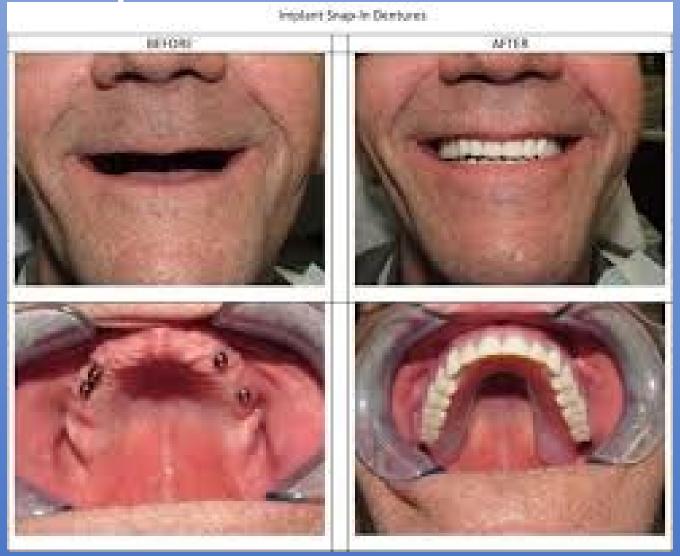
Conventionnalcompletedentures





Whole mouth replacements

 Implant supported complete dentures





University of Michigan School of Dentistry • Patient Care

- Levels of oral health care providers-dentists and dental hygienists
 - Student = \$, -
 - Learning to become dentist or dental hygienist
 - Least expensive but most time
 - Graduate student = \$\$, └ └
 - · Dentist or dental hygienist in advanced training
 - Specialty programs
 - Intermediate in expense and time
 - Faculty = \$\$\$, -
 - Dental Faculty Associates
 - Specialists and generalists
 - Most expensive but shortest in time
 - Similar to local private practices

Questions?

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