

## Problem Solvers 23 Medical Conditions and Dentistry part 1

### Synonyms: Medical questions

For many people going to the dentist can be a difficult proposition. They either have poor past dental experiences or are afraid of what the dentist will find. Since most dentists see patients an average of twice a year and most physicians do not, the dentist may be the first practitioner to recognize disease. This article will examine some of the most prevalent medical problems and how they influence your dentistry.

- More than 70% of drugs taken by the elderly have adverse effects in the dental practice. Some of these can cause xerostomia or dry mouth. Most commonly these mouth-drying drugs are antidepressants, anti-anxiety drugs and these can cause upset stomachs and abnormal bleeding. Other medications that cause dry mouth are:
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  - Antihistamines
  - Decongestants
  - Pain Killers
  - Diuretics
  - High Blood Pressure Medications
  - Antidepressants

What dental problems are caused by dry mouth?

Dry mouth or xerostomia can increase the risk of yeast infections, cavities, increased periodontal disease, peri-implantitis, and bacterial infection. That is because saliva provides a very protective environment in the mouth. Loss of this saliva will remove the buffers to the acid that bacteria in the mouth produce. This will allow for yeast and bacteria to grow more rapidly.

What can be done to help my dry mouth?

The use of salivary substitutes can help provide lubrication for the mouth. These can be found in the form of toothpastes, gums, mints and mouth rinses, which have all been designed to add lubrication and moisture to the mouth. In addition to this, it is suggested to stay hydrated with water, avoid alcohol and tobacco and carefully monitor the diet. The physician can also change drugs to see if relief can be found from different medications within a class of drugs.

Hypertension in dentistry:

Hypertension or high blood pressure accounts for over 35 million visits to the

health care system per year. There are over 50 million Americans with hypertension. The risk of developing high blood pressure increases with age. People that are aged 60-69 have a 75% chance of acquiring this disease.

What defines hypertension?

### ***Blood Pressure Numbers***

Blood pressure is measured as systolic and diastolic pressures. "Systolic" refers to blood pressure when the heart beats while pumping blood. "Diastolic" refers to blood pressure when the heart is at rest between beats.

You most often will see blood pressure numbers written with the systolic number above or before the diastolic number, such as 120/80 mmHg. (The mmHg is millimeters of mercury—the units used to measure blood pressure.)

Having a blood pressure of 120-139 over 80-89 is called pre-hypertension. Blood pressures from 140-159 over 90-99 are called Stage 1 and Greater than 160 over greater than 100 is considered Stage 2 hypertension. Hypertension is a risk factor for heart attacks and strokes, and is a major cause of death for people age 50 and over.

These people may need to be treated with anti-hypertensive medicines and should try and modify their lifestyles to decrease their stress.

Dentists can help identify hypertension by taking blood pressures and making a referral if they are abnormal. Almost 30% of people with hypertension are unaware of it. By early detection, hypertension can be treated that may help save lives.

When do I need antibiotics before I go to the dentist?

The American Heart Association recommends antibiotic prophylaxis for these conditions:

- Artificial heart valves
- History of infectious endocarditis
- Unrepaired or incompletely repaired congenital heart disease including shunts.
- Congenital heart defects with a residual defect at the site or adjacent to a prosthetic device.
- Cardiac transplantation recipients who develop cardiac valvulopathy.

Your dentist and physician can explain all of the above conditions, so it is important to fully fill out your health history form.

I have always had to have antibiotics to have dental work done. Do I still need to do this?

The American Heart Association has changed the criteria for when you should take antibiotics prior to your dentistry. They no longer recommend it for:

- Mitral Valve prolapse,
- Rheumatic heart disease,
- Bicuspid valve disease,
- Calcified aortic stenosis
- Congenital heart conditions such as ventricular septal defect or atrial septal defect and hypertrophic cardiomyopathy.

Your dentist will contact your physician to discuss any questions, problems and to verify the need for preventative antibiotics before dental treatment.

I am allergic to Novacaine, should I be concerned?

The anesthetic Novacaine is an anesthetic that was used many years ago. Lidocaine is the anesthetic that is most commonly used in dentistry and is the safest medication used in dentistry. People undergo millions of dental injections per year with very few allergic reactions. The type of anesthetic that people used to be allergic to is not the same anesthetic used today. Tell your dentist about your history and they can always send a small amount with you to take to your allergist for a scratch test to alleviate any concerns.

I have Diabetes, how will this affect my dental visits?

Diabetes is a disorder that affects over 20 million children and adults and contributes to over 225,000 deaths per year. People with Diabetes will have a decreased healing potential. It is important to inform your dentist so they can have knowledge of your Hemoglobin A1C and blood sugar. The biggest concern that dentists can have with treatment of a diabetic patient is that they may develop hypoglycemia or a drop in blood sugar from excess insulin. This drop in blood sugar can result in weakness, nervousness, and tremors. These conditions can often be treated, by bringing some juice or candy to your visit with you.

How can I decrease problems that can be caused by diabetes?

Patients with diabetes have a 75% higher incidence of gum disease, cavities, burning mouth syndrome so it is very important to maintain regular dental cleanings and prevent or treat any active dental infections early and frequently

before they get worse.

Richard B. Winter D.D.S. M.A.G.D. D.I.C.O.I.  
Master Academy of General Dentistry  
Diplomate International Congress of Oral Implantologists  
[WWW.WINTERDENTAL.COM](http://WWW.WINTERDENTAL.COM)