Geriatrics is a branch of dentistry that deals with the elderly. Millions of Americans are living longer which can mean that they will have oral health issues that need addressing as they age. This article will help identify some of the issues that face the elderly and strategies to help make sure our golden years are as enjoyable as possible.

Dementia- New Dentistry Concerns

With baby boomers aging more gracefully than ever before we need to examine what dental concerns are facing the elderly. Medical conditions and medications have been discussed in previous problem solvers. This article will examine some of the unique problems that are facing the elderly (most notably dementia) and strategies to face them head on with success.

When neurological diseases affect our parents or loved ones, we must be prepared for how this can affect their oral health. Alzheimers and other forms of dementia, present challenges for the patient, their family and their caregivers. Dementia is a neurodegenerative disease that is irreversible and progressive. Alzheimers disease or AD is a diagnosis that refers to diseases that affect the brain which result in loss of memory, confusion and problems with understanding or speech. There are over 17 million people with AD and this represents 70% of all diseases affecting the elderly.

First it should be known that there are no scientific articles that support dental amalgam as causing Alzheimers disease (AD). So if you go to a dentist that says there is proof that dental amalgam causes this illness, realize that this is an unsubstantiated claim. It can cost thousands of dollars to replace silver fillings and the American Dental Association supports the use of dental amalgam and it’s safety.

Since people with dementia have a change in mental faculty, they may simply forget or be unable to care for their teeth. This can lead to an increase in residual food in the mouth, which if left for prolonged periods, will result in periodontal disease and decay. Over time this will lead to bleeding gums, bad mouth odor, tooth loss, decay, and an inability to eat. This loss of nutrition can lead to electrolyte imbalance, malnutrition and declining health.

What are the stages of Alzheimers?

In most forms of dementia there is a beginning, intermediate and final phase.
The treatment plan for the patient will be tied to the cognitive ability of the patient, their responsiveness and the multi-specialty care that can be offered to the patient.

What can be done to help my mother with her teeth? She has early dementia.

In the early stages, your mother may be able to brush her teeth but an electric toothbrush may help to cover more surface area as well as massage the gums. Manual toothbrushes can have acrylic adapted to their handles to make it easier to manipulate the brush. It is advisable to start patients on fluoride rinses and to schedule more frequent cleanings to help avoid greater dental problems. The hygienist can also apply fluoride varnishes that will provide longer-term protection for the patient’s teeth. In early dementia the training of family and caregivers is important, as most patients will be cooperative to care.

In intermediate dementia, the patient may not be able to handle basic tasks. They may repeat words and experience unrest and display aggressive or moody behavior. They may require their caregivers to provide brushing, flossing and floss aids to help in cleansing a person’s teeth. Dental home care can be undertaken; by sitting the patient down and standing behind them to cradle their heads and work with the patient to gently cleanse their teeth. It is very important for the caregiver to perform mouth checks to see if any problems exist. This phase of care should revolve around taking care of existing problems and paving the way for success in the future. Sedation dentistry may be offered to provide anti-anxiety care.

The final or terminal phase can be very frustrating and may lead to coma and death. Dental care may be secondary as other medical problems exist and the primary role of the dentist is to remove sources of infection or pain to allow the patient to have a pain-free and dignified quality of life as they face the complex medical problems associated with these diseases.

Questions for the dentist:
My spouse has a very dry mouth and is always licking their lips and thirsty. Is this due to their illness?

Dry mouth or xerostomia is often found in patients with dementia. That is often a result of the drugs that may be prescribed in the form of antipsychotics, sedatives, and antidepressants. The family can ask for sugar free medicines to help decrease the risk of decay.

My parent has involuntary mouth movements and can’t wear their dentures; can they still choose their food?

Yes, people that are unable to wear any prostheses can “gum” their food. While this
is a difficult process, some people can become quite adept at eating with no false teeth. In later stages there is a fear of aspiration pneumonia so the physician and dentist can discuss the eating habits and strategies to keep the patient safe.

My relative has Alzheimers and I bring them to the dentist. Can I o.k. their extraction? There has to be a diagnosis of AD and it must be defined and confirmed by the patient’s physician, that the patient can no longer perform functions with regard to their care. In that case, a personal welfare lasting power of attorney or enduring power of attorney must be presented to the dentist by you to sign a consent form.

When a patient has a progressive disease such as Alzheimers they may lose their ability to clean their teeth or explain their symptoms. They may no longer understand that their teeth require daily hygiene or ongoing dental treatment. At a certain point they will no longer be able to give legal consent for a procedure. It is incumbent on the dentist to always face the patient, explain the treatment and reasons for performing the dental work and to seek to get approval from the patient first.

It is important to work in conjunction with a patient’s medical doctor and dentist so that proper care can be issued to protect and care for impaired patients. According to the Mental Capacity Act of 2005, people should always be presumed to have mental capacity to make their own decisions unless it is proven otherwise.

What problems do people face with Dementia?
Problem 1:
They may lose or displace their dentures or partial dentures.

Solution: Have the caregiver or family member remove the dentures, clean them and store them safely when it’s time for bed. Make sure they have their names embedded in their dentures so if they are lost or misplaced in a hospital or nursing home setting they can be returned. Make sure nurses and health care workers are aware of the patients dentures so they can be safely stored as needed.

Problem 2:
Their dentures may become loose which can lead to sore spots and pain.
Solution: Their dentures should be relined or remade and adjusted.

Problem 3: They have a yeast infection in their mouth.

Solution: A soft liner or tissue conditioner can be applied, along with mouth rinses and Nystatin troches to eliminate the yeast infection. Then a reline or new denture needs to be made, as the yeast will grow into the acrylic of the old prosthesis.

Problem 4: My mother stopped eating, how do I know if it's a tooth problem?

First try and ask her what the problem is in her mouth. If she can no longer communicate, try and perform a mouth check to identify the problem. If you cannot tell, then it's important to try and take her to the dentist. If she cannot cooperate, she may need a hospital-based dentist or a dentist that specializes in special care dentistry to evaluate and treat her problems. These dentists may provide different levels of sedation to help allow for dental care.

Problem 5:

My dad doesn’t want to wear their dentures and they keep spitting them out. What should I do?

If they had worn dentures and now will not, it may be due to pain. Try and place the dentures, examine any sore areas and seek dental care so a soft liner may be attempted to bring some immediate relief to your dad.

Whenever a person can wear their teeth they may have an added measure of dignity that can help their self-esteem.

With the increasing age of the baby-boomers, we have people that are living longer than ever before. The incidence of Alzheimers is increasing and the dentist will be relied upon in increasing numbers to provide care for this specialized segment of the population. It is important to see patients early in their disease and throughout their disease to eliminate infection, prevent pain, promote dignity and quality of life for people that are afflicted with this disease.

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