Dental care

This Help Sheet provides information about caring for the dental health of people with dementia. It discusses some of the possible causes of dental problems as well as practical advice for maintaining the best possible dental health.

Poor dental health can affect a person’s comfort, appearance, eating, nutrition, behaviour and general health. Every person with dementia needs an individualised preventive approach to dental care that should ideally begin as soon as dementia is diagnosed.

People with dementia are susceptible to dental problems for a number of reasons, including:

- Taking medications that reduce the production of saliva by the salivary glands. Saliva is essential to maintain a healthy mouth and to prevent the onset of dental decay and other oral lesions
- Having a reduced flow of saliva, even when not taking medications
- Taking long-term, sugar based medications which can lead to tooth decay, dry mouth and difficulties using dentures
- Changed eating habits such as the replacement of main meals with small snacks, sucking boiled lollies or drinking sugared tea
- Reduced abilities over time to maintain their toothbrushing and denture care

The key to maintaining good dental health for someone with dementia is:

- Regularly using fluorides on natural teeth. This includes fluoridated tap water, toothpastes, mouth rinses and gels
- Reminding and assisting people with their toothbrushing and denture care
- Monitoring and reducing sugar intake where needed for people with natural teeth
- Regular dental visits with dental professionals who understand and are experienced in caring for someone with dementia

Many people with dementia are unable to express discomfort or pain verbally. They rely on family and carers to understand any changes in behaviour that may indicate dental problems, such as not eating or constant pulling at the face, refusing oral hygiene care or other behavioural problems.

Care of natural teeth

Use of fluoride, antimicrobial and therapeutic dental products

- If tooth decay is evident, or the person appears to be at risk for developing decay, then the use of fluoride and antimicrobial products (like chlorhexidine) should be discussed and monitored by a dental professional
- Fluoride toothpaste should be used to brush natural teeth at least once or twice a day if possible
- After brushing with toothpaste, do not rinse with a lot of water. Try to leave some toothpaste behind around the teeth to prolong exposure to fluoride
- Fluoride and antimicrobial mouth rinses and gels which are only available at the chemist will be the most effective in helping to reduce dental decay and gum disease
- Fluoride and antimicrobial mouth rinses should be used weekly, and can be put in a small spray bottle or atomiser to spray onto the teeth. Note that fluorides and antimicrobials should not be used within 2 hours of each other. Perhaps try using one in the morning and one at night. Speak to your dental professional about the best options for use

Oral hygiene care

- All surfaces of all teeth, especially the cheek surfaces, should be brushed using a soft toothbrush
- If the person with dementia clenches or spasms their lips and cheeks together, you can use a toothbrush bent backwards at 45 degrees. Bend the toothbrush by running the handle under warm water, then bending. Slide the bent brush into the corner of the mouth to break the muscle spasms and help lift the cheek out of the way
- Electric toothbrushes, if tolerated, can be helpful

National Dementia Helpline 1800 100 500 dementia.org.au
• Some people with dementia will require assistance with oral hygiene care as dementia progresses. Breaking down the task into smaller steps can be helpful. Some people find it easier to copy another person who is cleaning their teeth.

• If brushing another person’s teeth, firstly explain, in their view, what you are about to do. Toothbrushing and denture removal may be easier from the front, side or behind. Experiment to find what suits you and the person with dementia.

Monitoring sugar intake
• If sugar needs to be reduced, use artificial sweeteners in drinks and snacks. Check this with the doctor if the person has diabetes.

• Try to use sugar-free snacks.

• Drink water or diet drinks with reduced or no sugar.

Denture care
• The best way to look after dentures is to clean and brush them daily.

• Rinse dentures after every meal and thoroughly brush them with a hard toothbrush, nailbrush or denture brush and plain soap and water.

• Place a face washer in the sink and fill it with 5cm of water when cleaning a denture, so that the denture will not crack if it is dropped.

• Denture cleaning tablets are not necessary but can be used if preferred. Physical cleaning is the key.

• Soaking dentures overnight is no longer recommended. Rinse them and leave them to dry on a small hand towel.

• Dentures can also be cleaned professionally on a regular basis.

• All dentures of people with dementia should be marked for identification.

• Partial denture clasps can be very damaging to oral tissues and the tongue if caught and can be more difficult to remove than full dentures.

• In the later stages of dementia it may not be possible to wear dentures.

Dry mouth
People with dementia frequently suffer from a dry mouth. Help the person to drink plenty of water, or spray water into the mouth using a spray bottle. Some medications and products are available that may help. Talk to the doctor and dentist about these.

Visits to the dentist
• Regular check-ups are advised for all people with natural teeth and those with dentures.

• A thorough dental assessment should be done in the early stages of dementia, with a long term, flexible and uncomplicated preventive dental treatment plan made.

• Before a dental visit, discuss any environmental modifications such as reducing noise or the number of people around, transport issues, sedation or pre-medication needs with the dentist and staff.

• Ensure a full medical history and a list of current medications is available for the dentist, preferably before a visit.

• The presence of a family member or carer during a dental visit may also help.

• If eligible for public-funded care, contact the dental hospital closest to you as many have staff who specialise in the treatment of people with dementia and other medical problems.

• Inform dental professionals that they can contact Dementia Australia if they wish to discuss any issues or problems with a counsellor.

FURTHER INFORMATION
Dementia Australia offers support, information, education and counselling. Contact the National Dementia Helpline on 1800 100 500, or visit our website at dementia.org.au

For language assistance phone the Translating and Interpreting Service on 131 450

Based on information provided by Associate Professor Jane Chalmers, a specialist in dementia dental health.

This publication provides a general summary only of the subject matter covered. People should seek professional advice about their specific case. Dementia Australia is not liable for any error or omission in this publication.

Dementia Australia ©2001 Reviewed 2019