



The Importance Of Oral Health

Proper maintenance of the teeth and gums is fundamental to a person's general health and is a vitally important quality-of-life issue for residents.

HAROLD WAS A RESIDENT AT AN Oregon assisted living facility who had suffered a stroke that made it difficult to transport him to a dental office. He was experiencing mouth pain but was combative when facility staff tried to locate the source of the problem. So his family brought in a dental hygienist, who was licensed by the state of Oregon to work in long term care facilities.

The hygienist's initial findings were shocking. No one had brushed Harold's teeth or swabbed his mouth for a considerable time. Due to aspiration risk, Harold was on thickened liquids. His right side was paralyzed, and he could not close his mouth. Thick saliva drained from his mouth onto the bib that was kept around his neck. Deposits of calculus (hardened bacteria) had obliterated his teeth. The plaque (a softer deposit on teeth that turns to calculus if not removed) was thick, and his tissue was extremely infected, bleeding easily when touched and exhibiting a deep red color, swelling, and an unpleasant odor.

An examination of Harold's toothbrush revealed that the bristles were hard and caked with old toothpaste that had never been thoroughly rinsed out. It required three visits by the hygienist to clean Harold's teeth and allow his mouth to

begin healing. Cases like Harold's are not unusual in long term care facilities. Studies show that oral health care is too often given low-priority status, leaving

vide an adequate and comprehensive oral assessment and screening for each resident upon admission. It also demonstrates the need for frequent inservices on

oral care, preferably led by someone with a dental or oral care background.

According to a recent article in *Time* magazine, "Inflammation is the body's first defense against infection, but when it goes awry, it can lead to heart attacks, colon cancer, and a host of other diseases."

Chronic conditions of the mouth, such as periodontal disease, may be a source of ongoing inflammation that can cause far-reaching effects on the

body, experts agree.

Performing An Initial Examination

Upon admission into a care facility, patients and residents are assessed for activities of daily living (ADLs). This should include the individual's capability for performing daily oral care such as brushing of the teeth and removal and cleaning of dentures. It should also be determined whether the individual has a "working" toothbrush.

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patients susceptible to caries (tooth decay), periodontal (gum) disease, and serious infection.

Surgeon General's Report

According to "Oral Health in America: A Report of the Surgeon General," published in the spring of 2000, "The terms 'oral health' and 'general health' should not be interpreted as separate entities. Oral health is integral to general health."

The report outlines the connection between poor oral care and chronic oral infections with diabetes, heart disease, lung disease, pneumonia, stroke, and a myriad of other health concerns and illustrates the need for all facilities to pro-

In addition, a thorough oral examination should be performed. Caregivers will need surgical gloves, a disposable mirror, and a flashlight, as well as spongettes to retract the cheeks. The examination should include:

- *Neck* Are there any swollen lymph nodes?

- *Face and lips* Describe anything unusual such as lesions.

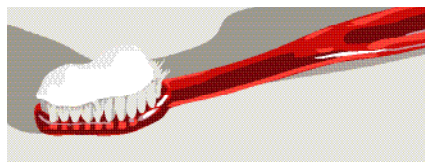
- *Mouth and gums* Does gum tissue appear red or swollen, or does it bleed when touched? Is the patient experiencing pain when eating or brushing? Are there any lesions inside the mouth (describe size, color, location)?

- *Teeth* Are there any missing or broken teeth? Are there any implanted teeth? How much plaque or calculus is present? Are teeth unusually stained or discolored? Is there food debris between the teeth or between teeth and gums?

- *Tongue* Are there any sores or lesions that should be noted? Is there pain or bleeding?

- *Dentures and partials.* What is the condition of the tissue under the denture or partial? Do the dentures fit correctly, and are they in good repair?

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For residents with dentures or partials, providers should also note the individual's ability to maintain the appliances (daily removal and cleaning), whether the individual has the proper equipment to care for his or her dental appliance, whether dental appliances are properly labeled for overnight storage, and whether there are any limits on dental appliances such as foods to avoid.

If asked, few patients or residents will want to admit that they are no longer able to care for their own teeth, so a fam-

ily member should be consulted whenever possible. Entrance papers should list the individual's dentist of record and any special oral health care needs. This information should be reviewed and updated according to changing needs that may result from medication changes, changes in an individual's ability to perform ADLs, and any cognitive changes.

It should also be determined at the outset whether a resident will need caregiver assistance in brushing his or her teeth, a prompt or reminder from a caregiver, or the presence of a caregiver to ensure that teeth receive proper care.

Removal of dentures or partials and soaking them in cool water overnight is very important. Improperly maintained dentures may be susceptible to a fungal growth. Proper toothbrush hygiene is also important. Bacteria can multiply on brushes that are not properly rinsed and maintained. ■

For More Information

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Down Syndrome Test Shows Promise

Children with Down syndrome who are treated with the Alzheimer's drug donepezil (Aricept) proved better able to express their thoughts and feelings, according to researchers at Duke University, Durham, N.C.

The findings were part of a 16-week preliminary clinical trial that centered around seven children between ages eight and 13, whose language abilities were, on average, that of a four-year-old child.

"You expect that children with

Down syndrome will show improvements in language skills over time," said James Heller, a Duke University

language pathologist who was lead author of the study. "But certainly not at the rate we observed in most participants over the course of the study."

Parents also observed that their children were

"more expressive than usual about likes and dislikes, better able to make every-day connections, and more easily engaged in conversation,"

Parents also observed that children were 'more expressive than usual about likes and dislikes.'

according to the study. An earlier study found that adults with Down syndrome who were given donepezil showed similar improvements in communication, attention span, and mood.

Still, the drug may be most effective during childhood when learning and development are more rapid, said Priya Kshnani, MD, the clinical trial's principal investigator.

"A therapy that could change the lives of people with Down syndrome early in childhood, making them more active learners, could really maximize their benefit and quality of life," Kshnani said.

—Kathleen Vickery