

# Providing Oral Care and Education to Patients

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## The Role of a Dental Hygienist

- DENTAL HYGIENISTS** are regulated health care professionals that primarily focus on oral health promotion and oral disease prevention.
- Hygienists work with clients to determine their current oral health status, provide care to improve their oral health, and help clients maintain the health of their mouth/teeth.

## The Role of a Personal Support Worker

- PSWs care includes providing oral health care.
- While PSWs are NOT able to provide clients with extensive oral health care, they ARE able to provide basic oral scans, tooth or denture brushing, as well as be able to recognize if something is wrong and when the client should be referred to see a dental professional.

## The Importance of Oral Care

- Effective oral care is the only way to prevent things like cavities, gingivitis, periodontal disease, and reduces the risk of more serious conditions like heart disease, stroke, etc.
- Neglecting oral care impacts foods being eaten and can lead to tooth decay, pain, an increased risk of needing dentures or partials, lost teeth, or contribute to overall declining health.
- Lack of oral care can also lead to complications in persons who have conditions like uncontrolled diabetes, and vice versa as diabetes is a leading factor for periodontal disease.

## Relationship Between Oral and Systemic Health

- The relationship between oral health & systemic health is VERY important as when your mouth is unhealthy and diseased then the bacteria that forms in your mouth can travel through the infected areas and into your bloodstream or down your esophagus, which can then cause further complications for the rest of your body.

## The Basics of Oral Disease Etiology

### What is BIOFILM?

- BIOFILM** is a soft, bacterial film that constantly forms on surfaces within the mouth; more commonly known as plaque.
- Biofilm is a complex arrangement of bacteria, and these bacteria can harm the surfaces they reside on.



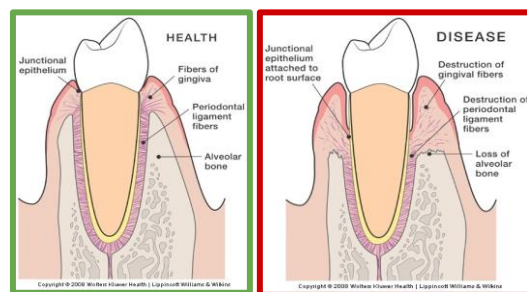
### How Biofilm Affects the TEETH

- The bacteria within biofilm can interact with fermentable carbohydrates within the oral cavity. This interaction increases oral acidity.
- The acidity within the biofilm can slowly wear away the outer layer of the teeth (the enamel) and progress the dental caries; more commonly known as cavities!
- When found, diagnosing is NOT within the DH or PSW scope of practice! Indicate potential decay and refer to a dentist!



### How Biofilm Affects the GUMS

- The bacteria within biofilm can irritate the gums (AKA gingiva) and cause inflammation. Calculus (hardened plaque bacteria; AKA tartar), can become embedded under the gumline and cause inflammation. Causes destruction of:
  - Fibers within the
  - Ligaments that surround and support the teeth
  - The bone that holds the teeth within the jaw
- GINGIVITIS** → stage where there is ONLY destruction of gingival fibers. This stage is reversible.
- PERIODONTITIS** → stage where there is ALSO destruction of periodontal ligaments & alveolar bone. This stage is irreversible.
- Signs → Gums that are red, inflamed, swollen, and/or bleeding, and/or teeth that are mobile.
- When found, diagnoses is NOT within the DH or PSW scope of practice! Indicate potential gum disease and refer to a dentist!



## How Seniors are at Greater Risk for Oral Disease

- **POLYPHARMACY** → Due to taking many medications that can affect the oral cavity and cause xerostomia (dry mouth) which can then increase their risk for dental decay (cavities).
- **Irregular dental care** → Due to not being able to afford or have access to dental care.
- **Irregular oral scans** → Due to no one checking in their mouths as often as they maybe should, leaving disease go undetected.

## Identifying Signs of Oral Disease

### How to Perform an Intraoral Scan

1. Face and lips	2. Upper inner lip	3. Lower inner lip	4. Right inner cheek	5. Left inner cheek	6. Gums
7. Top of tongue	8. Sides of tongue	9. Bottom of tongue	10. Floor of the mouth	11. Roof of the mouth	12. Throat

### Potential Abnormal Findings from an Oral Scan

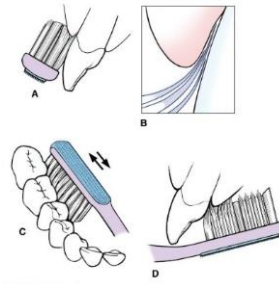


## Prevention of Oral Disease

- Oral disease can be prevented through:
  - Regular adequate biofilm removal
  - Adequate saliva stimulation
  - Proper care for dental appliances and dentures
  - Regular visits to a dental hygienist and dentist
  - Fluoride treatments provided in dental offices and authorized clinics and physicians' offices
  - Regular intraoral scans to identify problems at early stages

### Brushing Technique for Biofilm Control

- **BASS TECHNIQUE**
  - Angle bristles under the gumline
  - Use a vibrating stroke across 2-3 teeth with light pressure
- **\*\* PLEASE NOTE \*\*** → If it is hard for a client to hold a toothbrush, they can increase surface area for grip with the use of a tennis ball, bike handle, or washcloth!



## Interproximal Aids

- Proxabrush
- Soft picks
- Floss Holder



## Beneficial Oral Aids and Products

- **Sulcabrush** → Used around the gum line to help with the removal of biofilm.
- **Tongue scraper** → Used to clean the tongue so bacteria does not accumulate on the tongue.
- **Biotène** → For people who have dry mouth as well as those who wear dentures.
- **Xylitol** → For clients who experience dry mouth (Pür Gum, xylitol mints). Only 6-10g/day should be used as more than 20g/day can cause gas and diarrhea.



## Denture Care

- It is good to discuss with clients that they should be taking their dentures OUT at night.
- Have a look in their mouths for any red unusual spots that may indicate an issue in their mouth.
- Inspect their denture for any breaks or fractures (this will call for a referral to a prosthodontist or dentist to fix).
- Brush the dentures every day with a denture brush to ensure that biofilm is removed, as plaque can still form on false teeth!



- Ensure that the gums of the client are getting brushed with a soft toothbrush or are being massaged as well to keep this tissue healthy.
- Using the product Polident add the tablet in their denture container and fill with water and let the dentures sit in the solution overnight.
- Before placing the denture back into a client's mouth, the denture should ALWAYS be rinsed off to ensure that there is no solution left on it. (TIP – place a towel at the bottom of the sink in case it drops).



## Client Specific Adaptations

### Strategies for the Physically Incapable Client

- Ensure that you are patient and make your client comfortable.
- Treat them as you would any other person as they are a person first and someone with a disease second!
- **Bite blocks** are a good tool to have as they can help you look in their mouth and it ensures that your clients mouth stays open without them accidentally closing and biting your hand.
- Have some distractions that someone could play with or just touch such as pictures, pamphlets, extra toothbrush or any aids you will give them.



## Conditions to Consider

### Conditions with Strong Associations to Oral Health

- **Aspiration pneumonia** → Lung infection due to food/liquid that stays in the airway enters the lungs and harmful bacteria grows
- **Dysphagia** → Disorder resulting in difficulty swallowing due to various neurological/structural impairments
- **Diabetes** → if it is uncontrolled clients are at an increased risk for infection due to the body's inability to heal adequately
- **Cardiovascular disease** → when debris and plaque build in clients pockets bacteria enters and then can enter the bloodstream through infection and cause a blockage in their arteries