Dementia and care of natural teeth and dentures
Early stages of dementia

When a person is first diagnosed with a dementia it is important to establish a preventative approach to their oral health. This will mean regular dental check-ups and using a high fluoride toothpaste, which can be prescribed by a dentist.

During the early stages of a dementia a person can often carry out their own oral care. Sometimes they might need reminded to brush their teeth or might need a simple prompt such as giving them their toothbrush with the toothpaste applied and beginning the task for them.

Later stages of dementia

With the progression of a dementia the person may lose interest in brushing their teeth or no longer be able to carry out the task. A family member/carer will need to become actively involved in their daily oral care.

The most comfortable way to brush another person's teeth is to have the person sitting with the carer to one side. The carer can support the person's head against their body if required when brushing. A medium toothbrush and high fluoride toothpaste should be used, taking care to brush where the tooth and gum meet.

Wearing dentures

For as long as is possible, the person with a dementia should continue to wear their dentures. It is important that the dentures are taken out at night, cleaned and stored safely. The mouth should be cleaned with a soft toothbrush or dampened gauze. The person might need assistance placing the dentures into their mouth each morning.
It is important that a dentist checks regularly to ensure that dentures are not causing pain and if dentures still fit correctly. Ill-fitting dentures can lead to several problems for the person with a dementia, such as difficulty eating, communicating and ulceration or irritation to the soft tissues of the mouth or throat.

Unfortunately there may come a time when the person with dementia can no longer tolerate wearing dentures even if they have been worn successfully for many years. The person may begin to take their dentures out more often. It is thought that the person might be remembering a time before they wore dentures. This habit can lead to the dentures being lost and replacement dentures can be very difficult to make. Often the person is unable to cooperate in the making of new dentures or cannot adapt to a new set. Family/friends can find it upsetting to be told that new dentures are not in the person's best interest. The decision of whether or not to provide new dentures is only made after an individual assessment.

**Denture marking**

It is not uncommon for dentures to become misplaced when a person with dementia is in a care facility or hospital environment. Marking their denture(s) with their name can be useful to help with identification.

Dentures can easily be marked using the following simple technique. Towards the back of the denture and on the polished surface roughen a small area of the denture using a fine grained sandpaper. Write the person's initials using a soft pencil. Cover with two coats of clear varnish allowing the first coat to dry before applying the second coat. The denture marking may have to be redone every six to nine months.

**Medication and dental problems**

Some types of medication can cause a decrease in the amount of saliva in the mouth. The mouth can become very dry and this can lead to problems with speaking, eating and the wearing of dentures. A
dentist may suggest a denture fixative and/or a saliva substitute to alleviate the symptoms.

Saliva acts to neutralise the acidic effects of sugar. For those with their own, natural teeth this lack of saliva can lead to rapid tooth decay particularly at the neck of the tooth. This can weaken the teeth so that they break off at the gum level leaving behind the roots of the teeth. This tooth loss can have a detrimental effect on the person's quality of life. It means the person cannot chew as effectively as before and may not be able to eat meat, vegetables and fruit, leading to a less nutritious diet, weight loss and poor recovery from illness. Daily brushing is vital to prevent this from happening as is a healthy diet which avoids frequent sugary foods and drinks.

Also sugar free alternatives to syrupy medicines such as lactulose should be requested where possible.
Dietary considerations

As dementia progresses, changes to a person’s food preferences, appetite and their ability to swallow occur. People with dementia should be encouraged to eat a balanced diet. Frequent consumption of sugary foods and drinks (including oral nutritional supplements) will place people with natural teeth at higher risk of tooth decay.

It is important that the person continues to see their dentist regularly for as long as they are able to for routine treatment and preventative advice.
Contact details

Southern Trust Dental Services
www.southerntrust.hscni.net/services/1843.htm

Belfast Trust Dental Services
www.belfasttrust.hscni.net/DentalServices.htm

Northern Trust Dental Services
www.northerntrust.hscni.net/services/338.htm

Western Trust Dental Services
www.westerntrust.hscni.net/services/2014.htm

South Eastern Trust - Contact your GP or key worker