

Even if tooth loss has occurred, regular visits to the dentist are still an important part of maintaining wellness in one's senior years. In fact, dental problems in the elderly have a far greater impact on health and well-being than just tooth loss. Here's what you need to know about age-related dental issues
By Adam Koh



Long in the tooth

IN CONSULTATION WITH DR YAO CHAO SHU, VISITING CONSULTANT, DEPARTMENT OF DENISTRY

The Elderly Issue

The enamel that protects our teeth is the toughest tissue in the body – but years of chewing, gnawing and grinding can take its toll. According to Dr Yao Chao Shu, Visiting Consultant, Department of Dentistry, JurongHealth, time naturally exposes the teeth to more wear and tear, chemical and bacterial attacks. “Older adults also tend to have gum recession, exposing the roots of the teeth, which do not have the protective enamel layer and are thus more prone to caries (cavities caused by bacteria),” she added. Older adults are also more likely to have illnesses, limited hand dexterity or low vision that may limit adequate daily oral hygiene as well. Medications such as antihypertensive, diuretics, antihistamines, and opioids too may result in dry mouth increasing the risk of cavities.

Dr Yao, who specialises in geriatric dentistry, also pointed out,

“Elders with decreased mobility may also not visit their dentist as routinely as before and this may delay the chance of preventing and treating dental caries and periodontal diseases.”

An added challenge for seniors who wear dentures is that dentures add to a higher incidence of food accumulation in the mouth and physical friction to the soft tissues and gums.



Common age-related tooth problems

Periodontal or gum diseases due to the accumulation of bacteria in dental plaque results in inflammation and infection of the supporting gums and bones

Root caries or cavities formed by bacterial acid attack on the root surfaces of the teeth

Build-up of dental plaque – a sticky film made up of salivary proteins, food debris and bacteria. When left on the teeth for prolonged periods, the bacteria multiplies and excretes acids that attack the tooth structure, supporting gum and ligaments. Sugar ‘feeds’ this bacteria, increasing the risk of erosion

Tooth wear or the loss of tooth structure due to friction (from chewing, grinding or from excessive brushing or picking) or chemical erosion from acidic diets or gastric reflux

Edentulism (tooth loss) due to decay, gum problems, or physical injury

Xerostomia (dry mouth) caused by disorders of the salivary glands, a side effect of medications or from radiation treatment to the head and neck

Stomatitis or the inflammation and infection of the soft tissues in the mouth, caused by friction from dentures, irritation from spicy or acidic food, allergic reactions to filling materials, or microbial infections

Oral cancer or the growth of invasive tissues that destroy the normal oral structures. The cause is unknown, although risk factors include smoking, drinking and betel nut chewing



'CLIP ON' TEETH



A combination of dentures and dental implants can make the wearing of dentures a more comfortable routine. This involves surgically placing dental implants – root-like titanium-alloy structures – into the jaw bone to replace a missing tooth. If there is a complete loss of teeth, two to four of these implants may be placed in each jaw to serve as pillars to support a denture. These implants will provide a clip-like structure so one can secure and remove the dentures with ease.

The benefit is that the dentures do not move around the oral tissues as much, preventing ulcers and adding security for more comfort in chewing.



Caring for older teeth

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The basic tenets of keeping teeth plaque-free and getting regular dental visits are essential in stopping dental diseases in their tracks, Dr Yao said. For elderly who have difficulty carrying out self-maintenance, caregivers also play an important role to assist in daily oral care and ensure regular visits to the dental clinics to capture problems early.

“The presence of loose teeth or a toothache can make chewing uncomfortable, and multiple missing teeth reduces the chewing efficiency,” Dr Yao pointed out. This may affect nutrition and cause further periodontal diseases or oral ulcers, creating a vicious cycle. Poor nutrition can also take a toll on a person’s general well-being and affect the quality of life. Regular checks not only prevent problems but identify soft-tissue lesions under denture-bearing surfaces, and more importantly, pick up oral cancer in its early stages.

Regardless of whether one has all one’s teeth, some missing teeth or no teeth at all, dental hygiene is essential, said Dr Yao.

“Seniors may have the misconception that if they have no teeth, there is no need to visit dentists, or they wait until they need a new pair of dentures.”

Regular dental visits are essential to prevent further dental complications as oral health and general well-being are interrelated.