

GERODONTOLOGY MOOC – VIDEO NOTES

AGE RELATED ORAL HEALTH RISK FACTORS

The presence of natural teeth in older people can create additional challenges with respect to the maintenance of their oral health. Increasing age can be associated with reducing manual dexterity, reduced mobility, poor visual acuity, maloccluded/misaligned teeth and exposed root surfaces.

Xerostomia

Xerostomia is a significant risk factor for older people, as the reduction in levels of saliva reduce the ability of the mouth to counter-act the effects of bacteria acting on available carbohydrates, leading to increased caries risk.



Figure 1: Xerostomia

Xerostomia causes several changes in the composition of salivary. It can increase the acidity, viscosity and number of salivary proteins. This reduces the buffering capacity of saliva, nature's natural defence process.

Xerostomia is a side effect of many common medications. Older people are also likely to be taking more than one medicine at any given time, this is known as 'poly-pharmacy' and increases the risk of coronal and root caries further (Table: Carter LM et al. 2007. BDJ, E8: 203).

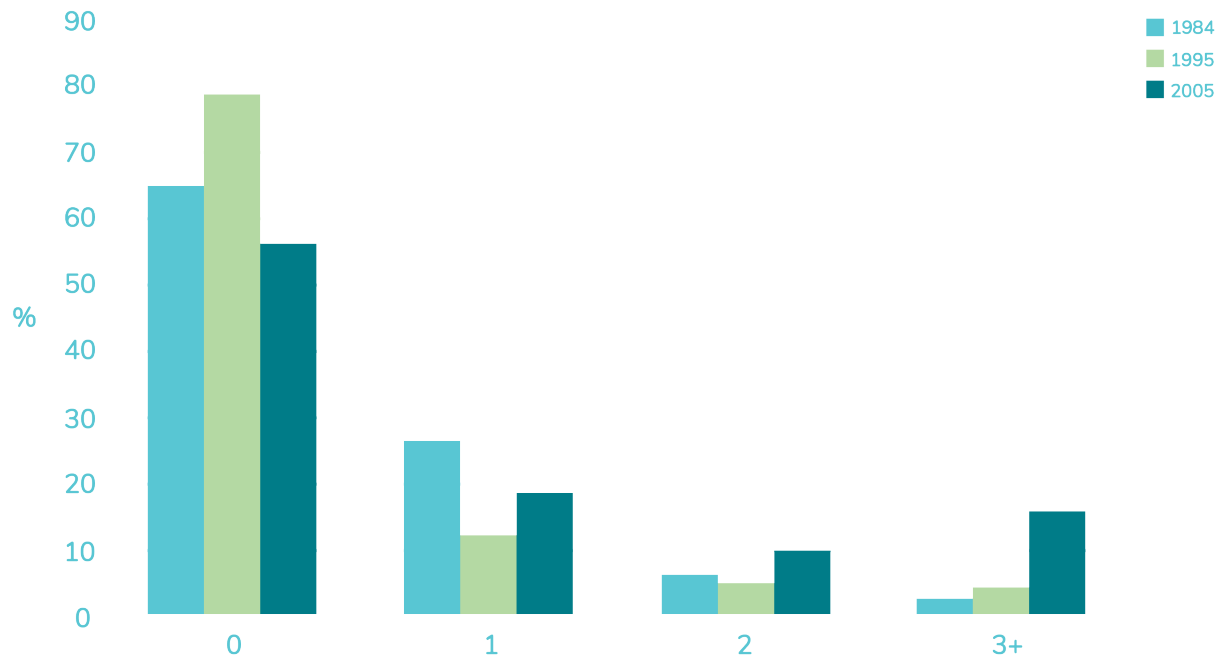


Figure 2: Number of medicines taken across the population. Reproduced from Carter L. M et al, 2007 BDJ, E8:203

Malnutrition

Malnutrition is more prevalent in the ageing population than it is in the general adult population...

Over one-third of people suffering from malnutrition are over the age of sixty-five years.

Poor diet, leading to nutritional problems, is caused by several factors including: poverty, impaired mobility, loss of taste, reduced masticatory function, reduced availability of transport to shop for food and a reducing motivation to prepare fresh foods amongst some older people. In addition to this, illness and associated medications can impact on a person's ability to maintain a balanced diet. Studies have found that older people typically have diets high in saturated fats and sugars, but low in essential micro nutrients.

Long Term Health Conditions

There is large variation in level of health amongst older people, however, as people age, they can experience an increasing number of health issues. Chronic health issues become more prevalent amongst older people, with more than fifty percent having more than two chronic health conditions at any given time.

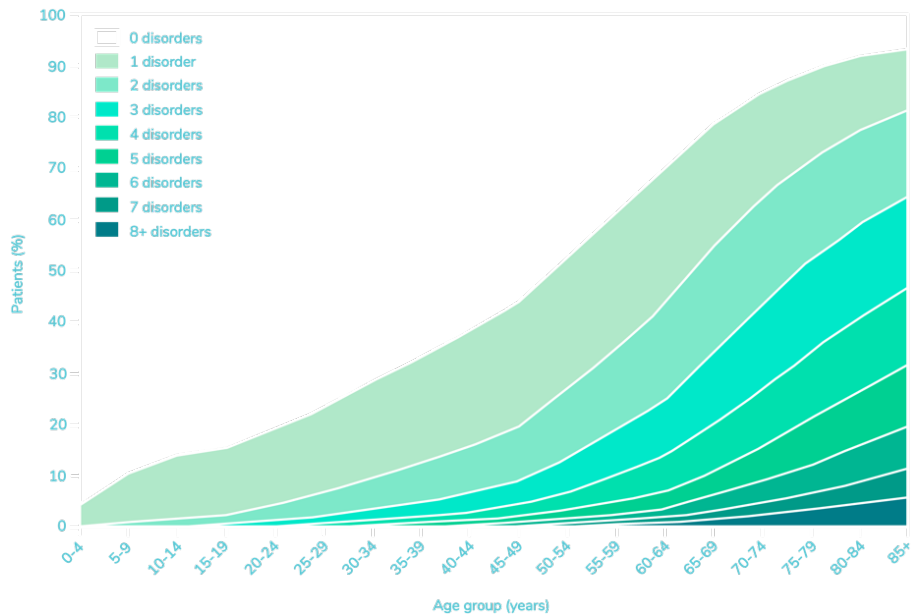


Figure 3: Number of long-term conditions by age group. Reproduced from Barnett K. et al, *The Lancet*, Volume 380, Issue 9836, 37-43

Chronic disease is relevant to oral health because it can impact upon the diet of older people and their oral hygiene routines. This can lead to dental caries and periodontal disease.

Common conditions which are known to indirectly impact on oral health amongst older people are dementia, arthritis and Parkinson's disease. These diseases reduce the manual dexterity of older people, and therefore the ability of a person to maintain their oral health. The increased prevalence of diabetes amongst older people is also a concern, as there are links between diabetes and periodontal disease.

Taken together, it is difficult to predict who will become more at risk of dental diseases and decreasing oral function. This can be represented in the figure below.

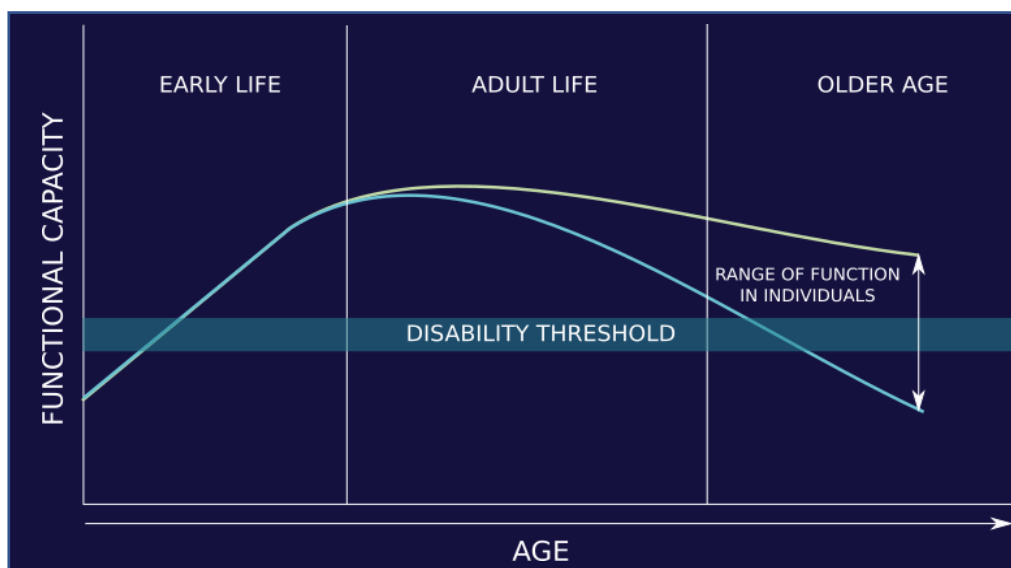


Figure 4: age related functional capacity. Reproduced from Kickbusch I., *World Health Organisation*. 1997;50(4):4-5,