

Dental care and Parkinson's



Oral hygiene and dental care are aspects of Parkinson's that can be easily overlooked, though it is estimated that 50% of people with Parkinson's will encounter challenges in this area (Parkinson's Foundation, n.d). Symptoms of Parkinson's can present unique challenges in maintaining oral hygiene.

In early stages of Parkinson's, the development of motor symptoms can interfere with tooth brushing and flossing. In later stages, possible cognitive decline, softened voice and diminished facial expression can make it difficult for the person to report dental pain and to describe the problem effectively to their dentist or health care team. Those who experience dyskinesia as a side effect of their medication may find that the involuntary movements result in cracked teeth and jaw clenching and/or grinding (Parkinson's Foundation, n.d).

In addition, complications of certain medications, chronic dry mouth, chewing difficulties and inadequate nutrition can contribute to dental problems in people with Parkinson's. Saliva production is also an important factor in optimal dental health – too much saliva can cause fungal infections in the corners of the mouth, and too little can cause cavities (Parkinson's Foundation, n.d.).

Mental health conditions that may be experienced by people with Parkinson's, such as depression, anxiety, or apathy, can also have consequences on dental health and oral hygiene.

There are several negative health effects that may arise from poor dental health and oral hygiene. If teeth start to decay or degrade, they can chew food less effectively, which can increase the risk of choking and aspiration, especially for people with Parkinson's (Parkinson's Foundation, n.d.).



Additionally, many people may have heard about research linking gum disease with cardiovascular issues, including heart attack and stroke. One reason there may be a link between these conditions is because harmful bacteria in the gums enter the bloodstream, where they are transported to tissues throughout the body, including the heart (Penn Medicine, 2022). A similar situation may occur in people with Parkinson's who have devices such as Deep Brain Stimulation (DBS) electrodes – the bad bacteria in their mouth can infect their DBS device if they have uncontrolled gum disease or infected teeth (Parkinson's Foundation, n.d.).

Oral hygiene at home

Motor symptoms of Parkinson's, such as loss of manual dexterity, rigidity, and tremor, can make at-home dental care difficult. Follow these tips for more effective oral hygiene at home:

- Use an electric toothbrush and a handle-style floss holder. Make sure to brush for at least two minutes, twice a day. Many electric toothbrushes come with a built-in timer that will beep once the two minutes are up, but if yours does not, set an egg timer or one on your smartphone.
- Use your stronger arm for brushing.
- Ask your dentist about prescription-strength topical fluoride and chlorhexidine brushes for greater tooth protection. If you frequently experience choking episodes, mouthwash may not be suitable for you (Parkinson's Foundation, n.d.).
- Talk to your neurologist if you have dry mouth or excessive saliva.
- Make sure to clean your dentures. If you find this difficult, consider attaching a toothbrush to a suction cup on your bathroom counter, and move your dentures back and forth across the brush.

Conversations with your dentist

Make an appointment to talk to your dentist about Parkinson's. Your dentist may or may not have an understanding of Parkinson's, but they need to know about your unique symptoms. The following information is important for your dentist to know ahead of a clinical appointment:

- The name and contact information of the doctor who manages your Parkinson's.
- A list of your medications, vitamins and supplements and their dosages and timing. It is especially important for your dentist to know if you are taking an MAO-B inhibitor, such as rasagiline or selegiline, because this class of drugs can interact with anesthetics commonly used in dentistry (Parkinson's Foundation, n.d.).
- Your most challenging symptoms (particularly tremors, rigidity, dystonia, lack of facial expression and excessive day-time sleepiness).
- Whether you have swallowing and speaking difficulties.
- If you experience dyskinesia (particularly if it affects your mouth) or teeth grinding.
- Whether you have excess saliva or a history of dry mouth.
- Low blood pressure concerns and history of falls.
- How to help you if you experience an "off period" during your visit.
- Your anxiety levels relating to Parkinson's and general anxiety relating to dentistry.

Preparing for dental appointments

Anxiety during a dental appointment is extremely common. Planning and preparing for your appointment can make a difference to your overall comfort. Consider the following:

- If you need multiple interventions, book several short appointments rather than a single long one.
- If you know you will need extensive dental work done, such as a tooth restoration, consider scheduling it as early as possible in your Parkinson's progression, as this will help you reduce any risks (Parkinson's Foundation, n.d.).
- Plan appointments around your medications' "on" times.
- Use the washroom prior to the appointment.
- Ask if medications used during the treatment could adversely interact with Parkinson's medication.
- Find and agree upon signals with your dentist that will indicate if you are uncomfortable and to what degree. Be sure to have a signal for an emergency.
- If you have a tremor that affects your jaw or mouth, discuss the possible use of conscious sedation. Make sure your dentist is informed about and comfortable giving a person with Parkinson's sedating drugs, because many anesthetics can have negative interactions with Parkinson's medication.
- At the completion of the procedure sit up slowly and carefully, remaining seated for several minutes if necessary. Let your dentist know that you may need extra time to leave the chair.

Anxiety is known to exacerbate the symptoms of Parkinson's. Allow yourself time in the waiting room to recuperate after your appointment. Tell the receptionist in advance that you might do this.

When preparing for an appointment, also remind yourself to bring the following with you:

- A list of your doctors' contact information and your medications and dosages.
- Extra medication in case you need to take a dose before leaving.
- A Medication Card with information on contraindicated medications.
- A U-shaped pillow for your neck.

Sources

1. Noble, James M. (2009). Dental Care Needs Extra Focus with Parkinson's. Parkinson's Post. Northwest Parkinson's Foundation..
2. Parkinson's Foundation (n.d.). Dental Health. <https://www.parkinson.org/living-with-parkinsons/management/dental-health>
3. Parkinson's Foundation (n.d.). Dental Health in PD. <https://www.parkinson.org/library/fact-sheets/dental-health>
4. Penn Medicine (2022). The Link Between Gum Disease and Heart Disease. <https://www.pennmedicine.org/updates/blogs/heart-and-vascular-blog/2019/march/gum-disease-and-heart-disease>
5. Scully, C. (2010). Medical problems in dentistry (6th ed.). Edinburgh: Churchill Livingstone.

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