INFORMATION FOR CAREGIVERS

Oral Health Care for Individuals with Developmental Disabilities

- Good oral health care affects appearance, comfort, speech, chewing, swallowing and nutrition.
- Good oral health care contributes to an improved quality of life.
- Good oral health care helps maintain fresh breath.
- Good oral health contributes to a pain-free mouth which improves sleep, concentration and the ability to focus and learn.
- Children, adolescents and adults with special needs are almost twice as likely to have oral health issues.
- Persons with compromised immune systems have more frequent oral bacterial, yeast or viral infections and ulcers of the soft tissues of the mouth and throat.
- Providing oral health care to this population requires special knowledge, awareness, attention and compassion.

Oral Diseases and Conditions

Dental Cavities (caries)

Bacteria that usually live in the mouth feed on sugary substances which are held in plaque. Plaque is a film made up of food particles, bacteria and saliva that sticks to the tooth surfaces. The bacteria convert sugars in food that has been eaten into an acid which will eventually dissolve the tooth structure. This process results in dental decay, or cavities (dental caries).

Having a dry mouth encourages dental decay, because the normal amount of saliva - which helps lubricate the teeth, and helps to wash away the harmful bacteria - isn’t present.

- Some medicines may cause dry mouth.
- Some medicines actually contain sugar.
- Discuss with your physician if any of the medicines being taken contain sugar, and if there is an alternative sugar-free form or alternative.
- Discuss with your physician if medicines being taken could result in dry mouth, and if there is an alternative medicine.
- If medicines being taken contain sugar, water should be offered after the medicine is taken to rinse the mouth and help to wash the sugar off the tooth surfaces.
If medicines being taken result in dry mouth, water should be offered frequently to moisten the mouth, and help wash the harmful decay-causing bacteria off the tooth surfaces.

Offer alternatives to sugary foods and beverages that are given as rewards.

Always use fluoride toothpaste.

Ask the dental care provider for fluoride gels and rinses that will help protect teeth.

**Gum Disease**

**Inflammation of the gums** or gingivitis may cause them to bleed easily. This can be stopped, and health of the gums can return to normal.

**Gum disease** or periodontitis results from untreated inflammation of the gums (gingivitis). It causes loss of the jawbone that supports the teeth. Eventually teeth may shift, become loose and fall out. Bone that has been lost cannot be put back, but further loss can be stopped.

Poor oral hygiene or failure to remove food particles from the teeth and gums may result in gum disease.

- Encourage good daily oral hygiene. Ask your oral health care provider to recommend appropriate brushing and flossing methods.
- Some individuals will benefit from using an antimicrobial rinse such as chlorhexidine which will help kill disease-causing bacteria in the mouth. Ask your oral health care provider if this will benefit you.

**Improper Bite** (malocclusion)

- Some individuals may benefit from orthodontic treatment to correct an uneven bite or crooked teeth. Not all individuals with developmental disabilities are able to undergo orthodontic treatment.
- Even spacing of the teeth will help individuals to maintain good oral hygiene.

**Difficulty Swallowing** (dysphagia)

- Caregivers should inform the oral health care provider if the individual has difficulty swallowing.
- Caregivers should ask the provider to seat the individual in a slightly upright position with the head to one side for breathing and be prepared to assist with positioning.
- After each meal the individual’s mouth should be cleaned of any excess food or remains.
Tooth Grinding (bruxism)

- Some individuals with developmental disabilities may grind their teeth. Although teeth may wear down, grinding generally does not cause dental disease.
- Mouth guards (or occlusal guards or bite splints) may help in some cases while in other cases they may be too uncomfortable to wear.

Hyperactive Bite and Gag Reflexes

- Inform your oral health care provider if the individual has a strong gag reflex.
- Schedule an appointment at least one to two hours after the individual has eaten.

Drooling

- Results from poor muscle tone, improper bite and inability to close lips.
- Affects daily oral care as well as social interaction.
- Caregivers should encourage individuals to swallow frequently if possible.

Oral Habits

- Some individuals with developmental disabilities may have habits that damage oral structures such as picking at their gums, biting their lips and/or cheeks, eating non-edible items, or grinding or clenching their teeth.

Trauma and Injury

- Ask an oral care provider about how to use a tooth saving kit.
- Ask a provider what to do if a permanent tooth is broken or knocked out.
- Make sure to save any teeth or pieces of the teeth in water or milk.
- Oral trauma could be a sign of physical abuse. A sudden or gradual change in appearance or behavior should always be noted and monitored.
General Tips for Caregivers Who Provide Oral Hygiene

- Make dental home care a routine, e.g., perform at the same time, in the same place, twice daily.
- If the bathroom is not comfortable for the individual, try sitting at a table, or supporting the person in a bed or in a bean bag chair.
- An individual who uses a wheelchair may remain in the wheelchair and the caregiver may support the head from behind.
- Individuals who are bedridden should have the head of the bed elevated about 30 degrees.
- Make sure the toothpaste, toothbrush, and floss are within easy reach.
- Provide adequate lighting and a mirror so that the individual can watch and learn.
- Use the “tell, show, do” method to help the individual gain a better understanding and ease their fears.
  
  Tell - communicate to the individual what is going to happen;
  Show - demonstrate what you are going to do; and
  Do - “do it”.

- Provide the individual with a favorite toy while playing relaxing music to make home care fun and comfortable.
- Acknowledge good behavior with positive reinforcement.
- Always stay positive, be patient and determined.

Tooth brushing

- Give the person the opportunity to brush and floss her/his own teeth.
- Use the hand-over--hand technique to guide the toothbrush.
- If the individual is unable to adequately brush her/his teeth, the caregiver should perform the oral hygiene techniques.
- Remember to wash your hands before and after brushing, and use disposable gloves.
- Brush twice daily, preferably after breakfast and before bedtime.
- Use a toothbrush with soft bristles.
- Use a small amount of toothpaste; if the individual can’t or has difficulty swallowing, moisten the toothbrush with water.
- Make certain no teeth are missed; brush all sides and angles and include the tongue and roof of the mouth.
- Angle the brush 45 degrees to the gum line and use short back and forth strokes.
- If the individual cannot rinse, use gauze or a towel to remove excess paste.
- If needed, adapt the toothbrush handle to make it easier to grip. You can use Velcro, a tennis ball, a bicycle grip or tape.
- If using a power brush, allow ample time for the individual to get used to the sound and feel of the brush.
- If the individual’s sense of taste is exaggerated, try using child-friendly toothpaste flavors such as bubblegum or grape.
Flossing

- Remember to wash your hands before and after flossing, and use disposable gloves.
- Use a length of floss about 18 inches long.
- Wrap the floss around the middle fingers of both hands and hold firmly, guiding the floss with the first fingers of both hands. Work it gently between the teeth until it reaches the gums. Do not push hard or saw the floss into the gums.
- There are many types of dental floss available such as flavored, waxed, unwaxed, or tape. Dental tape, or ribbon tape, is flatter and broader than regular floss; this may be easier to manipulate for those with larger fingers or who find floss a bit too thin to handle easily. Find a type you prefer to use and which is easiest to handle. Some may prefer to use a dental floss holder.
- Don’t give up! It will take time, practice and patience to be able to floss well.

Rinsing

- Using a daily rinse may be recommended.
- Common oral rinses include fluoride mouthwashes or antibacterial mouthwashes such as chlorhexidine.
- If the person is unable to rinse, apply the liquid to the tooth surfaces with gauze or a toothbrush.

Complete and Partial Dentures

- Some individuals with developmental disabilities wear full or partial dentures.
- Dentures should be removed after meals, and should be rinsed under water to remove food remains. Once clean, they should be replaced in the individual’s clean mouth.
- Dentures should always be removed from the mouth at bedtime and left out of the mouth overnight. They should be thoroughly cleaned and stored overnight in a denture box filled with clean water.

Establishing a Dental Home

What is a Dental Home?

- A Dental Home is a place where an ongoing relationship with a dentist and hygienist has been established so that dental care can be obtained by the same provider over time.
- This process should begin at 6 months of age or after the first tooth erupts, and no later than the first birthday.
- The American Dental Association recommends a dental cleaning for most people every 6 months. However, some individuals may need more or less frequent cleanings.
Selecting a Dentist for Individuals with Special Needs

- Ask the individual’s physician for a referral to a dentist.
- Consult with other caregivers of individuals with developmental disabilities.
- Interview several potential dental provider candidates to make sure you have found the right one.
- Be up front with the dentist about the individual’s needs so she/he can provide the most thorough oral health assessment and make the most appropriate treatment plan.
- Rule out dental offices that are not accessible for the individual.
- Find out the level of experience of the oral health provider candidates in dealing with people with special needs
- Ask the oral health care provider about the availability of specialized equipment such as slide boards or papoose boards.
- Make sure to choose a dentist who is willing to work with you and is committed to putting the individual you care for at ease.

Making an Appointment

- Inform the office receptionist of any accommodations the individual may need.
- Schedule an appointment early in the day or at a time when the individual is most alert.
- Schedule appointments at times which will cause minimal interruption to the individual’s usual routine.
- Inform the office staff if special transportation will be used.
- Ensure that the appropriate number of caregivers accompany the individual to the office.
- Discuss any financial concerns, and bring appropriate documents to each visit (such as insurance or Medicaid cards).
- Discuss guardianship issues that may be necessary for treatment to occur. Informed consents for treatment may need to be signed.

Dental Visits

- The first appointment may serve only to familiarize the individual with the dentist and the surroundings.
- Plan for the possibility that the appointment may last longer than expected. Be prepared with a change of clothing and/or incontinence briefs if needed.
- Make sure to explain in advance what the individual can expect.
- Bring a blanket, favorite toy or favorite music from home to help the person to feel comfortable.
Strategies for Successful Dental Visits

- Most people with a developmental disability can be treated successfully in a general dental practice.
- A small number of individuals may require sedation or other treatment modifications to receive care.
- Sedation techniques include sedative medicines intended to calm the person; these may be gases that are breathed in (inhalation or general anesthesia), pills or liquids taken by mouth, or liquids given through the vein (intravenously).

Special Concerns

Seizures

- Let your oral care provider know if the individual has seizures including type, how long they last, and how often they happen.
- Give permission for the oral health care team to speak with the individual’s physician to find out more about the individual’s current medicines and conditions.
- Make sure that all medicines needed are taken before dental appointments, and avoid situations that can trigger a seizure.

Unusual and Unpredictable Body Movements

- Observe the individual’s movements and let the dental team know of any patterns noted so actions may be anticipated.
- Sedation may be required in some cases to control movements. Discuss this with the oral health care provider before the first visit.

During Treatment

- Let the oral health care provider know of any behavioral problems and what will need to happen for the individual to cooperate.
- Explain to the oral health care provider how the individual communicates best.
- Make sure the oral health care provider explains each procedure in a manner that is appropriate for the individual (Tell-Show-Do is usually appropriate).

When Meeting with the Oral Health Care Team

- Let them know the individual’s level of tolerance to touch, light and sounds.
- Inform the team of any tubing or wires attached to the individual such as a Foley catheter or feeding tube.
- Your oral health care provider may discuss immobilization techniques that may be used to protect the individual and the staff.
• Inform your oral health care provider if dimming the lights or soft music would help comfort the individual.
• Be prepared to assist in the transfer of the individual in and out of the dental chair if required.
• Your oral health care provider may choose to introduce fingers into the mouth before using dental instruments, and may try to perform a dental cleaning before taking x-ray films.