



*Oral health for an
ageing population*

**Oral health:
caring for older adults**

LEADING THE WORLD TO OPTIMAL ORAL HEALTH

fdi 
FDI World Dental Federation



Older adults are more prone to developing oral health problems: Senior adults are at an increased risk for tooth loss, gum disease, oral cancer, and other illnesses as well as denture problems and poor nutrition. Dry mouth can also become a problem and is often caused by certain medications.

In addition, chronic diseases such as diabetes and respiratory diseases, polypharmacy, frailty and dependency for the activities of daily living (ADL) often accompany physiological ageing. Impaired vision, lower tactile thresholds, reduced dexterity, cognitive impairment, and dementia often jeopardize daily oral hygiene routines.

Understanding the oral health risks associated with ageing and taking preventive action – including eating well, not smoking, limiting alcohol and sugar intake and maintaining daily oral hygiene routines – is essential to help older

adults stay healthy and maintain their quality of life. With increasing levels of dependency, older adults will have to rely more and more on external assistance to maintain their oral health.

The **Lucerne Care Pathway** describes different levels of dependency. The amount of assistance a person needs depends on his or her degree of dependency. Simple questions and observations might already provide useful insights: can the person eat alone, walk alone, hold a book...?

LEVEL OF DEPENDENCY	DEFINITION
No dependency CSHA level 1 & 2	Robust people who exercise regularly and are the most fit group for their age.
Pre-dependency CSHA level 3	People with chronic systemic conditions that could impact oral health but, at the point of presentation, are not currently impacting oral health. A comorbidity whose symptoms are well controlled.
Low dependency CSHA level 4	People with identified chronic conditions that are affecting oral health but who currently receive or do not require help to access dental services or maintain oral health. These patients are not entirely dependent, but their disease symptoms are affecting them.
Medium dependency CSHA level 5	People with an identified chronic systemic condition that currently impacts their oral health and who receive or do not require help to access dental services or maintain oral health. This category includes patients who demand to be seen at home or who do not have transport to a dental clinic.
High dependency CSHA level 6 & 7	People who have complex medical problems preventing them from moving to receive dental care at a dental clinic. They differ from patients categorized in medium dependency because they cannot be moved and must be seen at home.

CSHA Canadian Study of Health and Ageing

Attending a dentist appointment

As a carer, you may be responsible for scheduling dentist appointments for the person you care for. Keep in mind that they may feel anxious before visiting the dentist. In order to relieve their stress and to facilitate

communication with a practitioner, you can arrange for someone to accompany them (a family member, a friend or a professional carer). This often has a reassuring effect and helps ensure that information does not get lost.

By helping older adults maintain good oral health, you will help them:



AVOID PAIN AND INFECTIONS

Oral pain can have several causes, such as dental caries, gingivitis, or dental abscesses. Oral pain can affect quality of life: loss of appetite, feelings of depression, and risk of infections. Medications for other conditions may initially mask oral pain that may only be felt once caries or infections have already reached advanced stages.

In case of gum infections, germs can spread into the blood and reach various organs such as the heart and kidneys. It is therefore important to watch for signs, such as gum bleeding or pain, to prevent possible infections.

All oral diseases are linked to the presence of bacteria in the mouth. Most of these diseases are preventable with adequate and regular oral hygiene habits.

Exemplary oral hygiene and regular dental check-ups will help prevent disease and pain.

TIPS

- Provide assistance with daily hygiene routines that take into account the level of dependency and the overall health status of the elderly person.
- Provide assistance with toothbrushing: help the person you care for to brush their teeth for two minutes, twice a day using either a manual or electric toothbrush and a fluoride toothpaste. Avoid rinsing with water straight after brushing.
- Schedule regular appointments with a dentist (two visits per year).
- Check that there are no sores or wounds in their oral cavity. If there is a lesion in the mouth that stays for more than one week, schedule an appointment with a dentist as soon as possible.
- Clean removable dentures every day.

If you notice that the dexterity of the person you care for is decreasing, or that they are having difficulty holding a toothbrush for example, do not hesitate to investigate different assisting devices that may help.



AVOID FALLS

The joint of the jaw contributes to preserving balance. Tooth loss without replacement and loose or overused prostheses may increase the risk of falls.

TIP

- If you notice that a tooth becomes loose or if a denture no longer fits properly, schedule an appointment with a dentist as soon as possible.



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ENJOY HEALTHY AND DIVERSE FOODS

Pain, broken or missing teeth, as well as ill-fitted prostheses, can lead to chewing difficulties and may therefore hinder digestion. These issues may also significantly limit the kinds of foods that the person you care for can enjoy. **Cariogenic effect of foods:**

Protective foods	Medium caries risk	High caries risk
<ul style="list-style-type: none"> • water • vegetables • butter cheese • meat • fish 	<ul style="list-style-type: none"> • dark chocolate (70%) • fruit • bread • nuts 	<ul style="list-style-type: none"> • sugar • sweets • cereal bars • french fries • sugar-sweetened beverages • bananas

TIPS

- Make sure the person you care for has a balanced diet that includes three to four meals a day.
- Do not propose snacks, particularly those rich in sugar, between meals.
- Prepare food based on the person's preferences, while keeping the meal balanced.
- If the person is very keen on sweets, try to introduce them at the end of the meal rather than between meals.



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AVOID XEROSTOMIA (DRY MOUTH)

The effects of a dry mouth can have a significant impact on quality of life, affecting how comfortably a person can eat, speak, swallow, chew, and smile. Saliva helps facilitate a number of functions and also cleanses the oral cavity, which lessens the effect of acids that can cause dental caries.

TIPS

Xerostomia may be relieved by:

- Chewing sugar-free gum or sugar-free hard candies to stimulate salivary flow if the person you care for is able to do so
- Drinking water with meals to help chew and swallow food
- Using alcohol-free mouthwash

- Using moisturizing mouth spray or gel
- Using a lip balm to soothe cracked or dry lips
- Drinking small amounts of water regularly throughout the day

In case of severe dry mouth, dentists may be able to offer additional support.

Support

This publication was supported by



Recognition

Content developed by the OHAP project expert S. Darteville and is based on the work of the OHAP Task Team (K. Fukai, K. Hori, C. Benz, S. Darteville, J. Jones, K. Kobayashi, Y. Shimazaki).

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