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**SPECIAL DENTAL HEALTHCARE  
NEEDS OF VULNERABLE OLDER  
ADULT POPULATIONS**

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**Goals**

Discuss to the health care team: What do you need to know about the oral health of older adults - and how this makes them more vulnerable or increases their vulnerability.

- Unique characteristics an aging oral cavity/mouth
  - Are older adults mouths different than younger people?
- Dispel some myths of oral health in older adults
  - I'm going to lose them anyways, why bother?
- Specific role for health care providers -
  - Breaking down silo walls; working together for a better outcome.

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## Let's start with some 'basics': why keep a mouth healthy?

1. The mouth is connected to the rest of the body
2. Bidirectional relationship between general health and oral health
  - *Inflammation is key*
  - *Diabetes has clear relationship. Other chronic conditions impact.*
  - *Many are unaware and/or choose not to address it.*
3. Unlike health care, dental care is not covered by Medicare.
  - *Retirees uninformed.*
  - *Routine exams/evaluations often neglected*
4. Multiple challenges for vulnerable elders to obtain care.
  - *Finances, attitudes, transportation, health concerns*



Sculpture in NYC train station

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## Keeping a mouth healthy? What's unique about the oral health status of older adults?



- Those with healthy mouths 'generally' take care of their general health.
- Having a healthy mouth decreases the risk for systemic disease.
  - **and** reduces use of health insurance.
- The vulnerabilities of elders significantly impact the use of preventive oral care.
- How can the health care providers encourage adults to stay well?

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## Social, Psychological and Quality of Life issues



- Poor oral health, total or partial tooth loss, can impact one's ability to:
  - *Chew, speak clearly, "look" good and have interpersonal relationships*
- Oral diseases can have a dramatic impact on one's quality of life.
- Medical conditions can impair self oral care
  - Depression, dementia
  - Parkinson's disease, rheumatoid arthritis

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heterogeneous



No two systems age at the same rate.  
There are many similarities - no 2 are alike.

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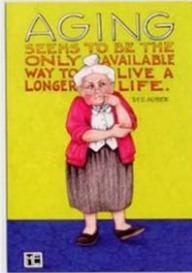
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### Two Cohorts: Baby Boomers vs. 85+

- life experiences
  - attitudes
  - expectations
  - health conditions
- Can present extremes



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### Oral Health Concerns in Elderly

- Caries: (cavities) coronal & root
- Crowns and bridges
- Periodontal disease (gum disease)
- Tooth loss
- Removable prosthetics (partial/dentures)
- Implants
- Oral pathology /soft tissue diseases,
- Complications of medical conditions +/- medications
- Hyposalivation/xerostomia (dry mouth)



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### Older adults are different. With age...

- Physiologic changes
- Diseases presents differently; medication doses vary
- Higher risk for pathology & chronic inflammation
- Cognitive changes
- Perspective of health care providers
- Individual *and* caregiver
  
- All increase and/or impact one's vulnerability.



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### Atypical presentation of disease

#### Common diseases with uncommon presentation

- Myocardial infarction
- Headache
- Appendicitis
- ◆ Presentation is very slight or absent
- ◆ Periodontal disease



#### RED FLAGS:

- Vague & non-specific symptoms
- Refusing to eat or drink, falling, incontinence

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### Key concepts: Oral health of older adults:

#### ■ Disease

- Cumulative and often complex
- Always progressive until treated
- Pain is NOT a criteria

#### ■ Daily Care

- Ranges from good to infrequent to none
- Complicated by multiple chronic diseases
  - Impacted by many variables



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**Social Inequities: Oral health 65+ vs 85+**

• **Primary reason for no visits: "no need"**

- **Socio-economic status**
  - Lower socioeconomic status is clearly linked to a greater oral disease burden
  - **Fixed income -**
- **Knowledge/attitudes towards care**
  - Knowledge vs. Behaviors
  - Knowledge does not imply action
  - Belief: if no pain, no disease




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**Predisposing factors: 65+ vs 85+**

- **Fear** – typically not age-related
- **Access / Transportation**
  - Availability of affordable care
  - Senior discounts
  - Accessible offices
- **Professional attitudes** –
  - Ageism prevails
  - Time, medical issues




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**Residents in Long Term Care Facilities**

- At greatest risk for poor oral health.
  - Enter facility in poor health
  - Are dependent upon others for assistance or will benefit from supervision
  - Role of professional caregivers
    - Need for supervision and training
  - Dentist rarely member of care team
  - Quality of Life Issues

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**Key Challenges: Helping elders access care**

- *Need vs. demand*
- *Willingness AND ability*
- *Economics*
- *Access*
- *Transportation*
- *Availability of provider*

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**Preparing for aging... Multi-faceted approach**

**Educate current AND future health care providers**

- *Need for dental care is life long*
- *Pain is NOT a prerequisite*
- *Oral disease is related to physical health*
- *Recognize age-related changes vs. pathology*

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**Educate current AND future oral health providers**

- *Preventive strategies are a must for all*
- *Plan for the patient's future*
- *Cognitive changes have dramatic impact*
- *Recognize financial constraints*
- *Encourage appropriate reimbursement opportunity*

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### “Easy” questions to ask ALL older adults

- When was the last time you saw a dentist for an exam or cleaning...
  - If more than 1 year - recommend assessment
- Why is it important? “Nothing hurts???”
  - **Healthy story:** flu vaccine, shingles, hypertension, oral health
  - **Scary story:** average age of diagnosis of cancer in the mouth is 62 years.
    - Age alone is a key risk factor for oral cancer in older adults.
    - EARLY oral cancer is ASYMPTOMATIC.... Later stages become painful.

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### “Easy” questions to ask ALL older adults

- Most people need to hear something 3-7 times before they will change a behavior.
- Professional recommendations often valued -
  - though friends and google more frequently used.

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### Getting The Word Out



- Google
- MedMD
- Senior lectures
  - Medical
- News letter/papers
  - Pharmacy
- LTC Journals
- YOU




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Professional reminders are key.

### ORAL CARE TIPS for the Elderly

Here's how you can help care for the oral health of your aging loved one:

- 1 When was your last dental appointment?
- 2 When do you usually brush your teeth?
- 3 What is stopping you from seeing your dentist?
- 4 Can you promise to see a dentist before our next visit?




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wear your own dentures




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