Generating awareness around oral health matters

Diane Rochford, President Elect of the BSDHT, shares some tips on how to improve oral hygiene amongst patients.

t is widely recognised that oral health has an important role in a person's general health, with associated risk factors such as poor diet, smoking and alcohol misuse. Good oral health is defined as a person being pain and disease free, with the capacity to chew, speak and smile.

Educating and motivating dental patients to make positive changes is vital to clinical practice. How, as dental professional we go about this is constantly changing with new information and innovative ideas.

Education & motivation

A personal trainer or sports coach empowers and motivates an athlete to achieve their goals, dental professions can follow their example by forming a plan to help patients achieve their oral health goals with follow up visits to track their progress. Clear, step by step instructions demonstrating in the patients mouth effective oral hygiene techniques so they can feel the correct technique is a good place to start. Disclosing provides a visual reminder along with taking photographs or making video with the patient's smart phone of them carrying what they have learnt, whilst reminding them of the specific areas to focus on.

Whitening & Charcoal Toothpastes

Patients often ask if whitening or charcoal toothpastes really work. Research shows that whitening toothpastes often contain a fruit enzyme or very low concentrations of hydrogen peroxide which is not sufficient to whiten teeth.

The advice on charcoal toothpastes, is not to use them daily due to highly abrasive nature of some toothpastes. Clinicians should also be aware that activated charcoal has a high absorptive capacity, so despite containing fluoride these toothpastes have a limited capacity to remineralise enamel or provide any effective resistance to dental caries or erosive tooth wear.

Erosive tooth wear

Erosive tooth wear is now the third most commonly observed oral condition after periodontal disease and dental caries. The condition tends to have a slow rate of progression and is frequently seen in patients that are committed to a good oral hygiene regime. In the early stages, no chair-side intervention is required. The dental professional's role is to bring this to the patient's attention and provide strategies for risk management, including diet advice and systemic factors such as acid reflux.

Diet

Diet and Nutrition is essential to both oral and general health. A recent narrative review suggests a low-carbohydrate diet, high in non-vegetable fats and micronutrients such as vitamin C, D and B12 with sufficient protein, is the optimum diet for health. The same review indicates there are still unanswered questions relating to a vegan diet in relation to periodontal health, due to a potential vitamin B12 deficiency.

Smoking & Alcohol

Links between alcohol and oral cancer were first identified over 50 years ago, approximately 75 per cent of oral cancers arise in association with alcohol and tobacco.

Whilst smoking cessation programmes are widely accepted and routinely implemented by dental professionals, screening for alcohol misuse and delivery of alcohol brief interventions is more limited.

Conclusion

Every patient responds differently to our advice and guidance. Finding what empowers or motivates them can be challenging, however, attending courses or lectures and reviewing the current research provides us with a range of tools we can implement. It also fulfils the GDC's expectations of dental teams having; a positive attitude, respect, integrity, good communication skills and delivering a holistic approach to patient care.

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