Tell-tale teeth

In the first of a short series about tell-tale signs which different areas of the body can give about our overall health, Julie Bissett looks at what our teeth and gums have to say...

With the ‘drill and fill’ era of dentistry consigned to the history books, these days dental teams pay more than just lip service to the ideal of integrated health care. Dentistry is less to do with invasive intervention and more to do with prevention, with dental therapy and oral health education making natural bedfellows for nutritional advice, smoking cessation guidance and health promotion.

Since May 2013, a patient can seek treatment from a dental therapist or hygienist without first having to see the dentist.1 No longer confined to hospital and clinic, dental hygienists are able to provide patients with the same level of care as their dentist, with their training based on the need to develop and refine their practice to better meet the needs of individual patients.2

Additionally, recording a patient’s medical history at every visit can highlight any risks and we can review habits jointly.3 So, what can the dental team learn from looking inside a mouth?

Tooth erosion
Acidic foods and drinks are well known sources of this problem but conditions such as bullimia or anorexia nervosa can be, too.

Cancer
Excessive alcohol consumption and smoking both impact upon oral health. The most significant contributory factors to oral cancer are smoking and heavy drinking, while the use of smokeless tobacco, chewing betel quid and a poor diet have also been found to increase the risk.4 Researchers have also found that men with gum disease were 49 per cent more likely to develop kidney cancer, 54 per cent more likely to develop pancreatic cancer and 30 per cent more likely to develop blood cancers.5

Diabetes
Many cases of diabetes in the UK are undiagnosed and dentists have a useful role to play. Diabetic patients arrive in the dentist’s chair with their own set of clinical challenges and dental teams can help manage diets to control any negative impact it has on periodontal status. Some dental practices even offer screening opportunities in the form of blood glucose testing.6

Stress
Stress can lead to serious damage to our teeth – an increase in erosive alcohol and a desire for more sugary food and drinks, for example. Stress may also cause bruxism (tooth grinding), which not only wears down teeth, but also increases the risk of developing other symptoms such as headaches, temporomandibular joint dysfunction (TMJ), facial and ear pain.

Childbirth
Women with periodontal disease are believed to be more likely to deliver babies prematurely or with low-birth weight than mothers with healthy gums.7

References and further information
1 British Dental Journal (2013). Scope of Dental Practice (www.gdc-uk.org)
2 British Dental Council (2013). Standards for the Dental Team (www.gdc-uk.org)
3 Cancer Research UK (www.cancerresearchuk.org/about-cancer/type/mouth-cancer/about/risks/definite-risks-for-mouth-and-oropharyngeal-cancer)
4 American Academy of Periodontology (www.perio.org/consumer/medications)
10 British Association of Dental Therapists: www.badt.org
11 The British Dental Foundation: www.dentalhealth.org