

Dental Care for Patients in their Later Years

Challenges and Strategies

Advanced Pediatric Dentistry Seminar

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Overview: Older Adults

Who are they?

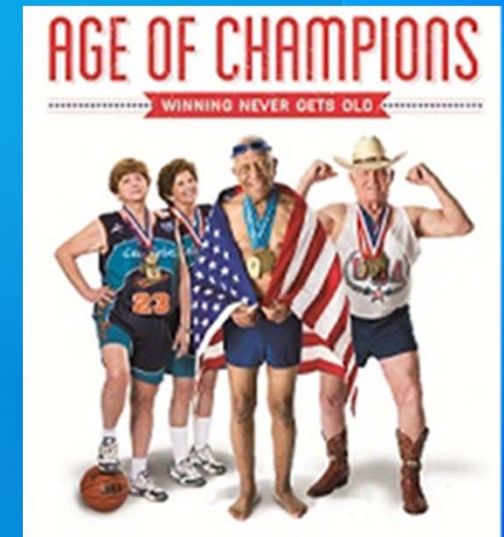
What's different about them?

Why do older adults seek care?

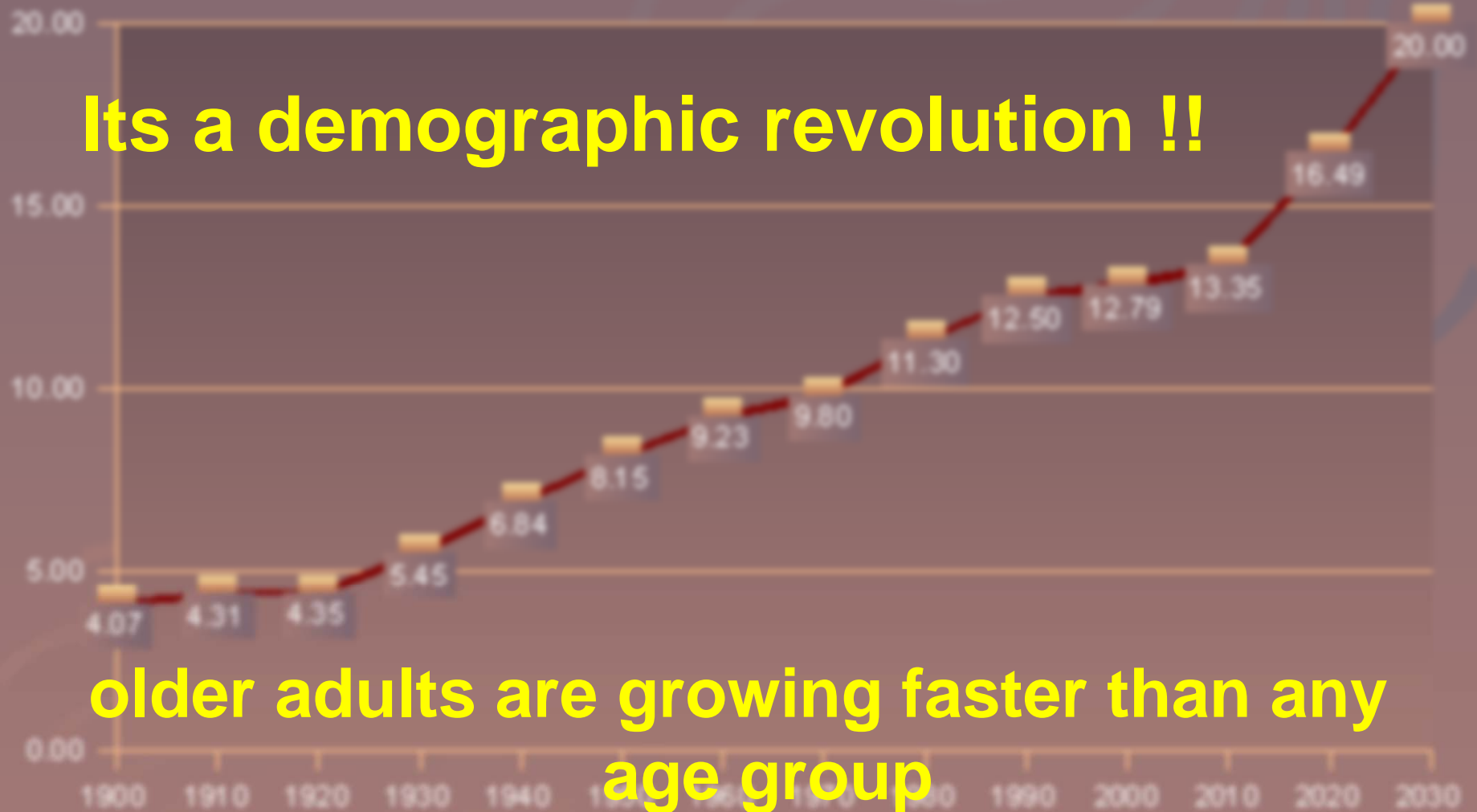
- Don't wait for pain to see the dentist

Impact of cognitive impairment on practice

- Treatment planning & behavioral strategies
- Caregiver concerns



Trend in Percent of 65+ Individuals in United States from 1900 to 2030



Its a demographic revolution !!

older adults are growing faster than any age group

heterogeneous

No two systems age at the same rate.

There is no single, simple pattern to human aging.

Baby Boomers

▪ 85+

- Aware of prevention
- Information savvy
- Often demanding
- Expect options
- Little info about aging
- Lived through WWII & Depression
- Depression not in vocabulary
- lose your teeth by 40
- “ the big C”

Older Adults

■ Physiologic changes

- ◆ Slower, gravity takes over
- ◆ EXCEPT Salivary glands

■ Greater risk for pathology & inflammation

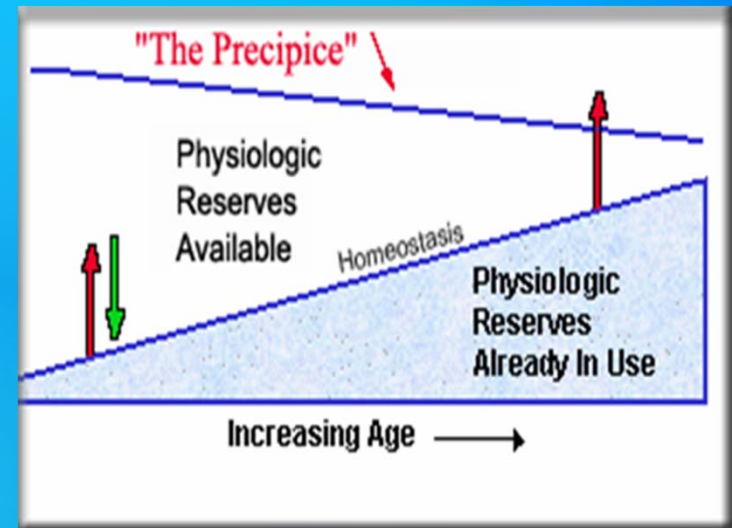
- ◆ More disabilities, medications, reactions
- ◆ Undiagnosed disease (s)

■ Cognitive changes

- ◆ Individual and caregiver

• Slow Loss of Physiologic Reserve

- Immunocompetence declines
 - less quick & less efficient
- Body reserves decrease
 - lung capacity
 - heart contractility, vessels...
- As age increases, ..changes increase
 - Postural hypotension
 - Geriatric dosages



Immunosenescence

Immunologic aging

- **Primary cause for autoimmune diseases, infection susceptibility, morbidity and mortality with advancing age**
 - Pneumonia, UTI and skin infections
 - Recurrent infections
- **RISK FACTORS:** Genetics, stress, viral infections, sociodemographic factors, unhealthy habits, comorbidities, medications, malnutrition, exercise & more

Diseases present differently in older adults

- Common diseases have uncommon presentation
 - ◆ Myocardial infarction
 - ◆ periodontal disease
 - ◆ headache
 - ◆ appendicitis
 - ◆ Presentation is absent or very slight
- Vague & non-specific symptoms
 - ◆ Refusing to eat or drink, falling, incontinence

Oral health and oral diseases

- Often more complex
- Nothing is common
- Range from good to no maintenance
- May have a greater impact on general health
- Impacts their quality of life



Aging Teeth

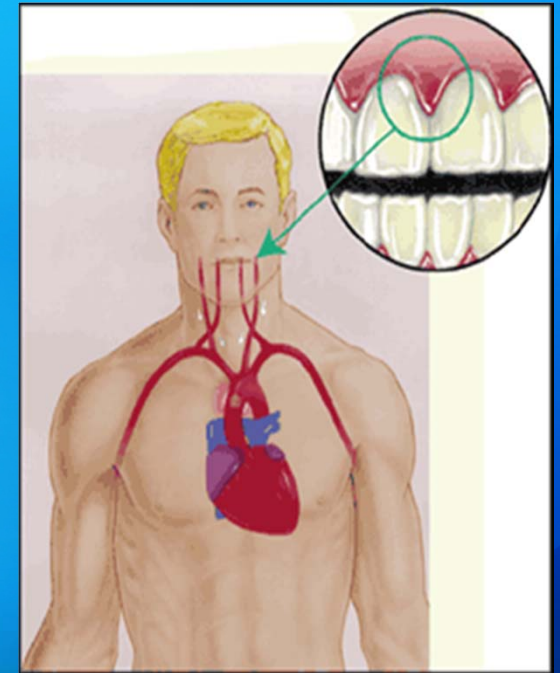
- **Secondary dentin** – uneven pulp chamber; obturation of dentinal tubules.
- **Pulp** changes from cell-rich and fiber poor – to cell poor and fiber rich;
 - fewer arteries and blood vessel
- **Result:** - less reparative capacity
- decreased capacity to respond



Less PAIN !!!

Treatment Planning Considerations

- No “perceived need” for care
- Lack of pain/discomfort
- Physical limitations
- Medical conditions
- Fear
- Functional dependence
- The cost of dental care
- Transportation problems
- Life expectancy



- **PREVENTION is KEY**

- Lamster, I
NYSDJ,
DEC. 2004

Oral Health Care Services *for Older Adults:* A LOOMING CRISIS

*Ira B. Lamster, D.D.S., M.M.Sc.
Dean, Columbia University School of Dental and Oral Surgery*

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TWO IMPORTANT ORAL HEALTH POLICY CONCERNS in the United States are disparities in the oral disease burden, and the inability of certain segments of the population to access care.¹ Both of these challenges are largely due to socioeconomic stratification in U.S. society. Nevertheless, as a consequence of the release of the Surgeon General's report on oral health,² there has been a call to action to improve the oral health of underprivileged groups who have difficulty accessing dental services. In particular, an emphasis was placed on children, and, specifically, the oral health of economically disadvantaged children.

Growing and Diverse Older Population

In contrast to the extensive national attention focused on children's oral health in recent years, America's growing elderly population has received relatively little attention, and almost no public health



Is it a "*Senior Moment*" or cognitive change ?

- **Normal loss** – small lapses
 - misplace an item,
 - forgetting a name or something at the store.
 - more serious incidents may suggest concern

Is it
Dementia ? Alzheimer's ?
Mild Cognitive Impairment ??

A group of symptoms - not a disease

A loss of intellectual functions:

- problems with thinking, remembering, +/- or reasoning with sufficient severity to interfere with daily functioning.

Changes in personality, mood and behavior

Dementia is: (def)

- **brain disorder**
- **democratic**
- **irreversible**
- **progressive**
- **usually occurs gradually**
- **unusual behaviors**
- **personality changes**

Warning Signs

- Memory changes that disrupt daily life.
 - Forgetting recently learned information
 - Asking same question repetitively
 - Needing memory aides
 - Cannot follow a plan or work with numbers
 - ◆ Following a recipe, paying bills
 - Loses track of dates, seasons, or time.
- Misplacing things, inability to retrace steps.



Behavioral Clues

- Maintains good social skills
- No
- Yes
- Generic answers
- “pleasantly confused”



Behavior management

key principle: **KISS**

- Keep questions simple
- One question at a time
- One person in charge
- Maintain chatter
- Reduce background noise
- Be flexible

Your approach sets the tone

Take a deep breathe for 10 seconds BEFORE you enter the operatory

- If you are angry, anxious or tense...they will too
- Use a calm, gentle, matter of fact approach
- Try humor, cajoling, cheerfulness.
- Use touch to help convey your message.
- Begin conversations socially



Rule:

Maintain your sense of humor





You will **NEVER**
win an argument
with a demented
person .

Alzheimer's Association

Someone to stand by you

800 - 272 - 3900 (national office)

800 - 443 - 2273 (Maryland office)

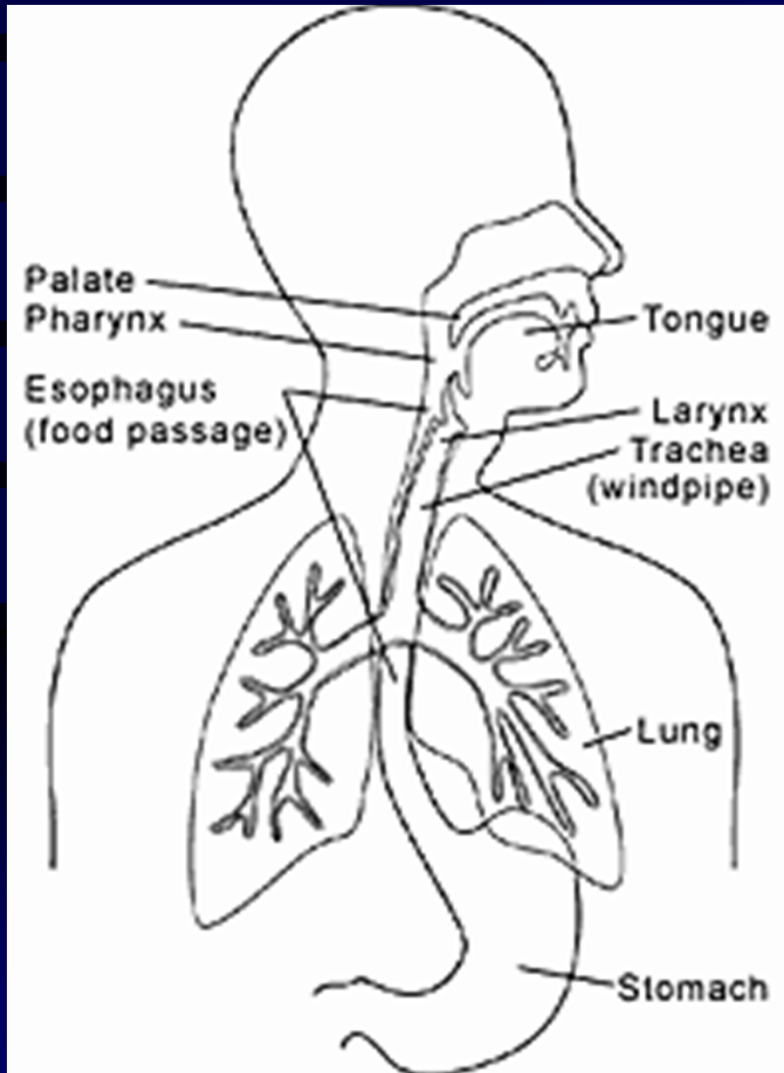
Help center open 24/7

Keys to success

- Routine preventive services
 - *professional and home care*
- Ensure “informed consent”
- Educate caregiver
 - *professional and home care*
- Assess treatment plan(s)
- Schedule patients’ best time of day



Aspiration pneumonia



- Directly connected to poor oral hygiene.
- Poor oral hygiene associated with fevers - esp. in LTC
- Dysphagia is a major concern.

Toothettes



Are NOT Toothbrushes

OPPORTUNITY for dentists:

Fellowship Training Program in Geriatrics

Interdisciplinary program with JHU

Medicine – Dentistry – Psychiatry

Starting date: July 2015

Interested? Call/write/talk to me

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