



# Oral Health Education for Caregivers of Seniors



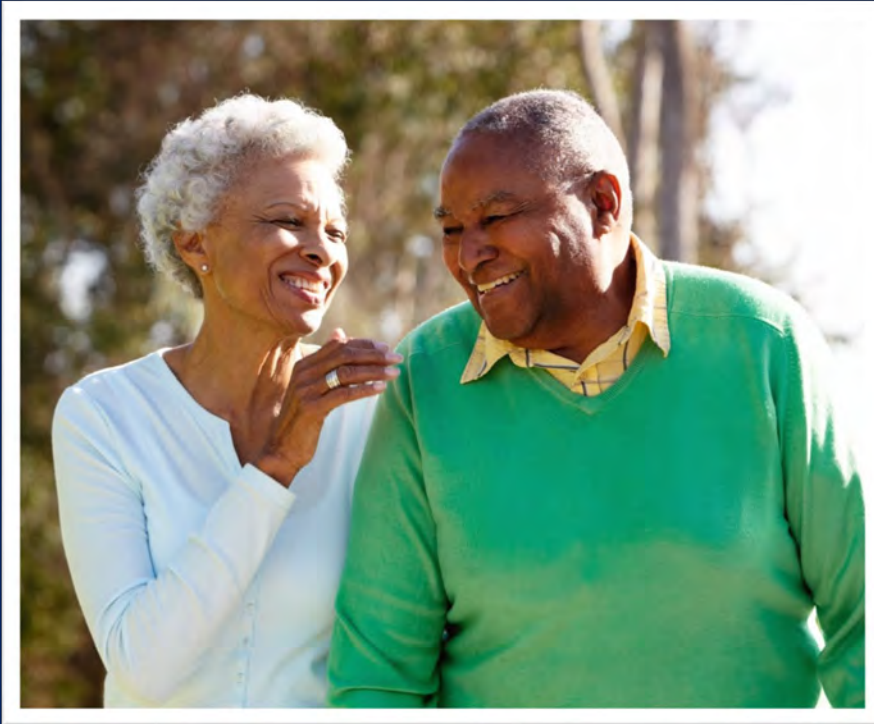
MISSOURI DEPARTMENT OF  
**HEALTH &  
SENIOR SERVICES**

**Office of Dental Health**

February 28, 2023

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Missouri State Dental Director

# Importance of Teeth

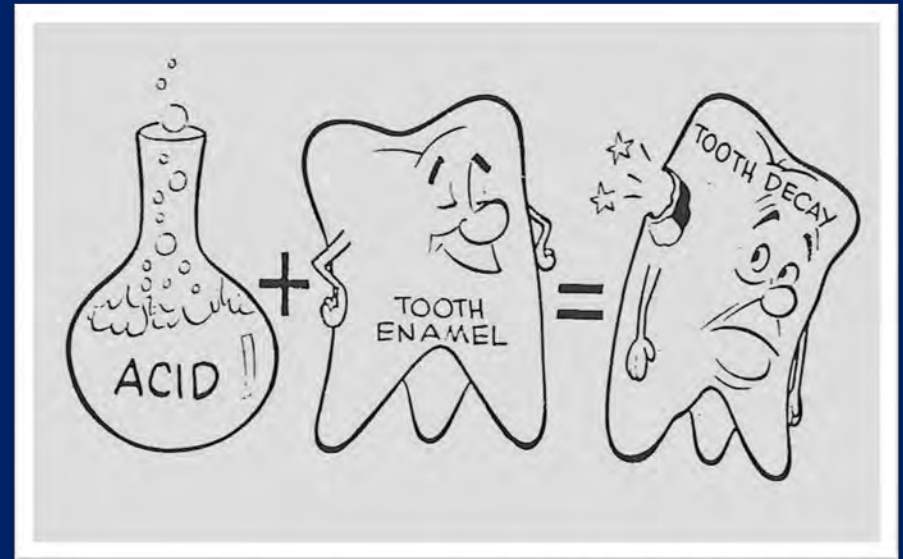


- Chewing
- Talking
- Appearance

“ You are not healthy without good oral health.”

Former Surgeon General, C. Everett Koop  
Second National Consortium Advance Program 2, 1993

# What is Tooth Decay?



The **bacteria** in the **plaque** feed on the sugars from the food you eat, making acid. The acid destroys the tooth's enamel, and after repeated attacks create a hole, or "**cavity**".

# Can Seniors Get Tooth Decay?

Yes, especially prone to gum line or root decay.

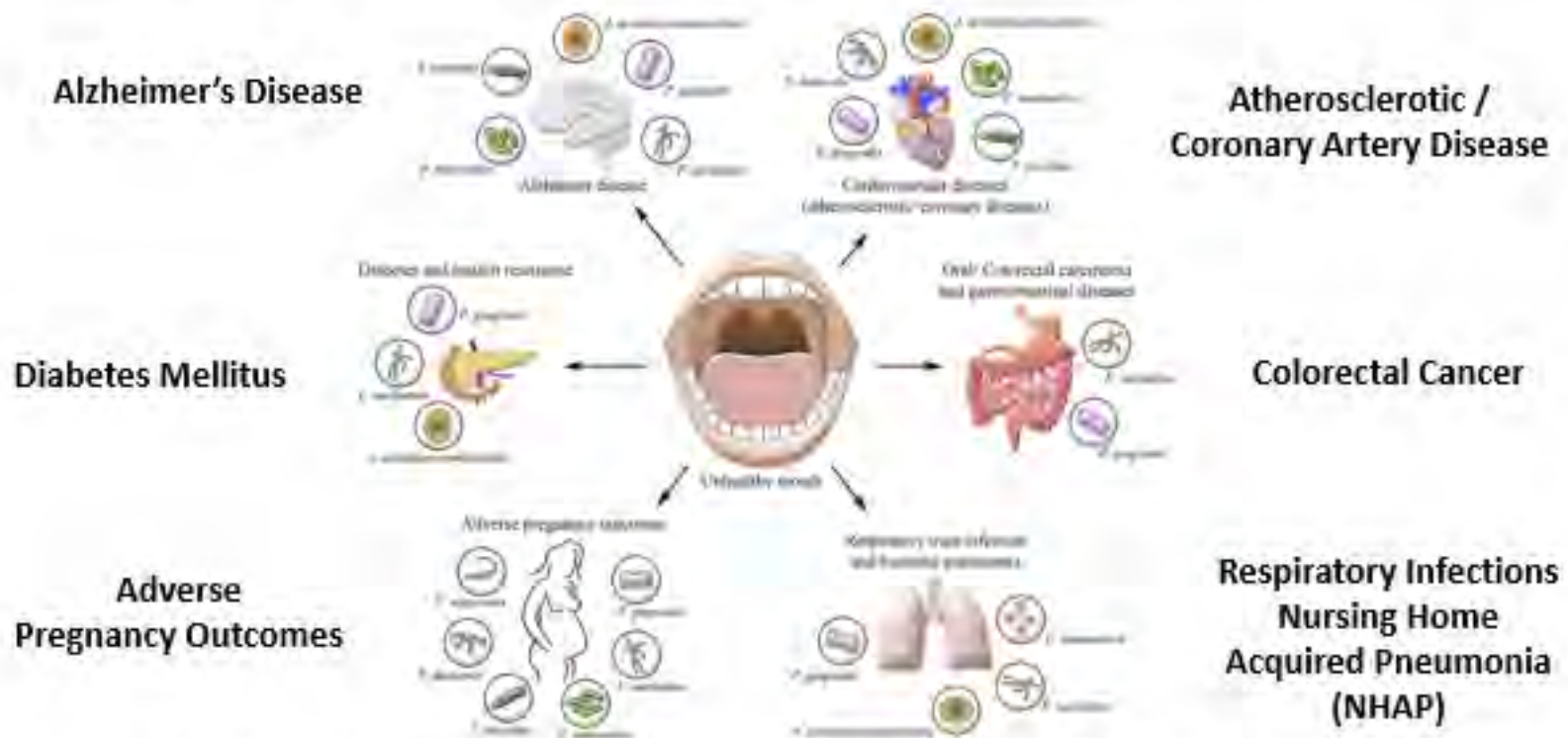
- Dry mouth caused by a decrease in saliva due to certain diseases, medications, chemotherapy or natural aging.
- Increased sugar consumption (hard candy, soda pop, sweetened drinks) to relieve dry mouth.
- Inability to properly clean teeth due to physical limitations (arthritis, stroke, etc).



# Importance of Oral Health Care

- Oral and systemic health and disease are closely interconnected
- Oral infections make other disease processes worse
- Systemic disease very often has oral signs occurring early in the disease process which is very helpful in diagnosis (ex: Covid-19)

## A PICTORAL REPRESENTATION OF THE ORAL-SYSTEMIC CONNECTION



Source: Bui F., et al.. Association between periodontal pathogens and systemic disease. Biomed J. 2019 Feb;42(1):27-35

# Oral Health of Americans Over 65

- Nearly 1 in 5 of adults aged 65 or older have lost all of their teeth. Complete tooth loss is twice as prevalent among adults aged 75 and older (26%) compared with adults aged 65-74 (13%).
- Gum disease severity increases with age.
- In adults who are 65 or older, the rate of gum disease rises to 70.1 percent.
- Most of the 8000 deaths from the 30,000 mouth/throat cancers diagnosed each year are found in the elderly.

Source: [https://www.cdc.gov/oralhealth/basics/adult-oral-health/adult\\_older.htm#:~:text=Tooth%20loss.,65%2D74%20\(13%25\).](https://www.cdc.gov/oralhealth/basics/adult-oral-health/adult_older.htm#:~:text=Tooth%20loss.,65%2D74%20(13%25).)

<https://www.totalfamilydentalgroup.com/blog/articles/prevalence-of-gum-disease-in-us/#:~:text=The%20CDC's%20analysis%20showed%20that,of%2056.4%20and%2038.4%2C%20respectively.>



# THE ORAL HEALTH OF ADULTS AT MISSOURI'S SENIOR / NUTRITION CENTERS

## SENIOR / NUTRITION CENTERS

Senior / nutrition centers connect older adults to vital community services that can help them stay healthy and independent.

## WHO TOOK PART IN THE SURVEY

**296** People aged 60-96 years (mean=74)

**24** Senior or nutrition centers

## RECOMMENDATIONS

- Expand programs that provide oral health education and preventive dental services at senior centers and nutrition centers.
- Develop teledentistry programs that provide corrective and emergency dental services at senior centers and nutrition centers.
- Create a referral system between the senior center or nutrition center teledentistry programs, and safety-net dental clinics for people with urgent dental needs.
- Consider the use of silver diamine fluoride treatment by teledentistry hygienists for people with transportation barriers.



MISSOURI DEPARTMENT OF  
**HEALTH &  
SENIOR SERVICES**

Office of Dental Health

oralhealth.mo.gov or 573.751.5874

## ORAL HEALTH STATUS

### PEOPLE WITH FEWER THAN 20 TEETH HAVE TROUBLE EATING HEALTHY FOOD

**52%** The percentage of people with severe tooth loss

**23%** The percentage of people with no natural teeth

### TOOTH DECAY & GUM DISEASE CAN CAUSE PAIN & LIFE-THREATENING INFECTIONS

**34%** The percentage of dentate people with untreated decay

**27%** The percentage of dentate people needing periodontal care because of gum disease

### PEOPLE WITH TEETH DO NOT PROPERLY CLEAN THEIR MOUTH

**11%** The percentage of dentate people with less than satisfactory oral health

### MANY PEOPLE AT SENIOR OR NUTRITION CENTERS HAVE NO DENTAL INSURANCE COVERAGE

Medicare does not cover most dental care and Medicaid only covers a limited number of dental services

# Congregate Meal Site Participants (296)

- 23% of Missourians have no natural teeth and 52% have experienced severe tooth loss (fewer than 20 teeth remaining).
- 34% have untreated decay.
- 27% need periodontal care due to gum disease.
- 11% of Missourians at congregate meal sites have less than satisfactory oral care.

SEPTEMBER 2022

DATA SOURCE: MISSOURI ORAL HEALTH SURVEY OF VULNERABLE ADULTS, 2022





# THE ORAL HEALTH OF ADULTS LIVING IN MISSOURI'S SKILLED NURSING FACILITIES

# Oral Health of Missourians Living in Skilled Nursing Facilities (253 residents in 24 facilities)

## SKILLED NURSING FACILITY

A facility where nursing care or related services are provided to residents of the facility

## WHO TOOK PART IN THE SURVEY

**253** Residents aged 37-100 years (mean=75)  
**22** Skilled nursing facilities

## RECOMMENDATIONS

- Expand programs that provide oral health education and preventive dental services at skilled nursing facilities.
- Develop programs that provide corrective and emergency dental services at skilled nursing facilities.
- Provide important enhanced training to nursing facility staff about the important of daily oral hygiene services including observation of possible future dental problems.
- Create a referral system between the skilled nursing facilities safety-net dental clinics for people with urgent dental needs.
- Consider the use of silver diamine fluoride treatment by supervised teledentistry hygienists for people with transportation barriers.

## ORAL HEALTH STATUS

### PEOPLE WITH FEWER THAN 20 TEETH HAVE TROUBLE EATING HEALTHY FOOD

**73%** The percentage of people with severe tooth loss

**38%** The percentage of people with no natural teeth

### TOOTH DECAY & GUM DISEASE CAN CAUSE PAIN & LIFE-THREATING INFECTIONS

**40%** The percentage of people with teeth have untreated decay

**29%** The percentage of people with teeth needing periodontal care because of gum disease

### MANY NURSING FACILITY RESIDENTS RELY ON STAFF TO CLEAN THEIR MOUTH

**49%** The percentage of people with teeth that have less than satisfactory oral health

### MANY PEOPLE AT SKILLED NURSING FACILITIES HAVE NO DENTAL INSURANCE COVERAGE TO REPLACE MISSING TEETH

Medicare does not cover most dental care. Medicaid only covers a limited number of dental services and does not provide dentures after teeth are pulled.

- 38% of Missourians have no natural teeth and 73% have experienced severe tooth loss (fewer than 20 teeth remaining).
- 40% have untreated decay.
- 28% need periodontal care due to gum disease.
- 49% of Missourians in skilled nursing facilities have less than satisfactory oral care.



Office of Dental Health  
oralhealth.mo.gov or 573.751.5874

Source: Missouri Oral Health Survey of Vulnerable Adults, 2022

# Recommendations from this BSS Survey

- Expand programs that provide oral health education and preventive dental services.
- Develop teledentistry programs.
- Create referral system.
- Use of Silver Diamine Fluoride (SDF) and temporary fillings.





# Teledentistry Pilot Project





# Teledentistry Pilot Project

- HRSA Workforce Grant – four year.
- **Five contracts in 2023 to provide dental services via teledentistry in nursing homes pilot project.**
- Received funding to provide to ATSU's veterans program in order to provide dental care to veterans. Years 2, 3 and 4 will be asking for more funding from private sources to continue and to grow the care.
- Scholarship for at least one student at ATSU who will provide care to veterans during the last year(s) and will work after graduation to provide care to veterans as their main focus of patients. Scholarship program will be in place for years 3 and 4 of HRSA grant as well.

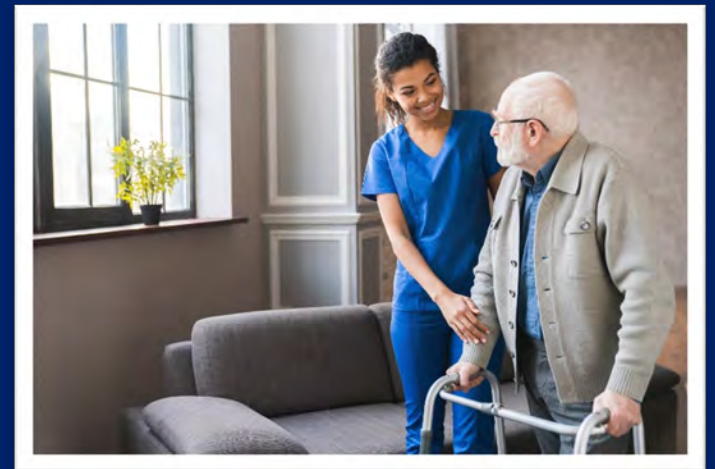


# Master Plan on Aging

- On January 19, 2023, Governor Parson signed Executive Order 23-01 to establish a Master Plan on Aging to help reduce age and disability discrimination, eliminate barriers to safe and healthy aging, and help Missourians age with dignity. This Executive Order created an advisory council and tasked DHSS with the development of a plan by Dec. 31, 2025.
- A Master Plan on Aging is a cross-sector, state-led strategic resource that can help us transform the infrastructure and coordination of services for our rapidly aging population. The plan will build bridges across government agencies, facilitate collaboration with diverse stakeholders, promote equity, raise awareness among policymakers and the public, establish statewide priorities, and incorporate an aging and disability lens across state priorities beyond traditional health care and community.
- In addition to the advisory council, subcommittees will be formed to focus on core areas related to healthy aging. **ODH will be serving on the Whole-person Health Subcommittee for the Master Plan on Aging.**

# Barriers to Good Oral Health for Some Seniors

- Cannot care for themselves.
- Refuse care/will not open their mouths.
- Do not see the need for dental care or visits.
- May need extensive care due to long-term neglect .
- Lack money and insurance.
- Cannot find providers.
- Need transportation.



# How You Can Help Improve Senior Oral Health

- Educate yourself on oral health issues.
- Ask seniors if they are getting routine dental care, even if they have dentures.
- Identify when and where to refer to a dental professional for emergency or routine care.
- Encourage caregivers to monitor oral health needs of patients who need assistance.



# What Can You Do?

## PREVENTION IS KEY!

### Prevention:

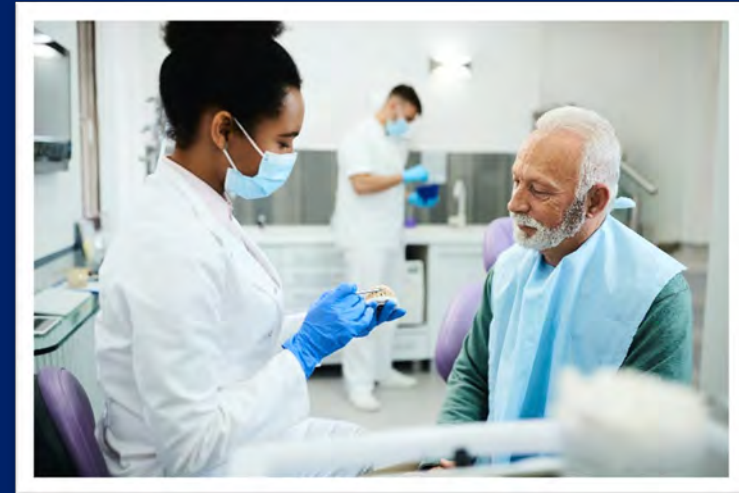
- Saves money.
- Prevents pain.
- Helps people keep their teeth a lifetime.





# Dental Check-ups Are Important and Include:

- Medical history evaluation.
  - Antibiotic sometimes needed before treatment.
- Exam.
  - Cancer screening.
  - Teeth and bite.
  - Gums.
  - Denture/partial check.
- Oral hygiene and home instructions.
- X-rays.
- Teeth cleaning.
- Fluoride.
- Fillings, crowns, bridges, implants and cosmetic dentistry.
- Referrals to specialists when needed.



# Check Oral Hygiene

- Determine if the your patient needs help with oral hygiene.
- Recommend that he/she:
  - Brushes at least twice daily (after breakfast and before bed) with a soft toothbrush and fluoride toothpaste.
  - Uses a special desensitizing toothpaste if the teeth are sensitive.
  - Uses toothbrushing aids like an electric toothbrush, handgrips, floss holders or interdental brushes if the patient has difficulty using his/her hands.
  - Flosses daily.
  - Cleans and soaks dentures and partials daily.
- Ask if the patient receives routine dental check-ups.



Source: [http://jada.ada.org/cgi/content/full/137/suppl\\_2/21S](http://jada.ada.org/cgi/content/full/137/suppl_2/21S)

[http://www.medicine.uiowa.edu/igec/e\\_learning/dentistry/photos/sec01page03a.jpg](http://www.medicine.uiowa.edu/igec/e_learning/dentistry/photos/sec01page03a.jpg) photo retrieved 8/30/6, used with permission

# Gingivitis

- Mild form of gum disease, and the most common.
- Reversible and involves only the gum tissues around the teeth.
- Signs and Symptoms:
  - Bleeding when brushing.
  - Puffy, red tissue.
  - Pain or tenderness.



Photo Courtesy of Dr. Mark Kramer

# Periodontitis

- More destructive form of gum disease, not reversible.
- Involves permanent loss of the gums and underlying bone eventually leading to tooth loss.
- Signs and Symptoms:
  - Chronic bad breath.
  - Bleeding when brushing or flossing.
  - Appearance of pus.
  - Loose teeth and tooth loss.
  - More spacing or changed bite.



[www.delmarvadentalservic.../gum%20Disease.htm](http://www.delmarvadentalservic.../gum%20Disease.htm)  
retrieved 8/12/06 used with permission of Dr.  
Richard Hopgood

**Infection can spread  
and complicate other  
diseases**

# Periodontal Infection



Patients with periodontal disease have a 2-3 times higher risk of developing coronary heart disease and experiencing a cardiovascular event like heart attack or stroke.

# Proper Brushing



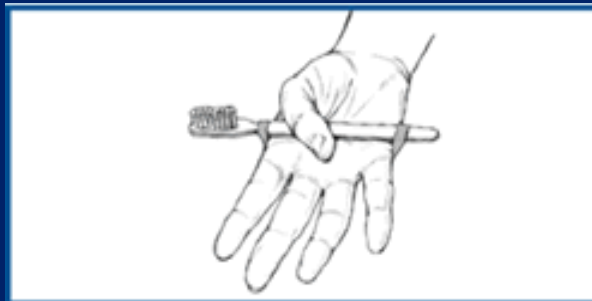
Courtesy of UMKC School of Dentistry Photography Department and the Division of Dental Hygiene

- Tilt the brush at a 45 degree angle against the gumline.
- Brush only 2-3 teeth at a time, gently brush the outside, inside and chewing surfaces of all your teeth.
- Use short back-and-forth or circular strokes.

# Toothbrushing Handgrips Are Useful for Those Needing Help Brushing



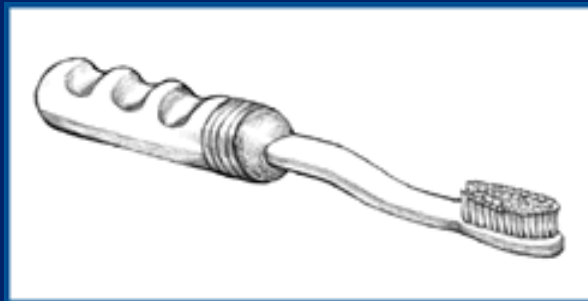
velcro



rubberband



tennis ball

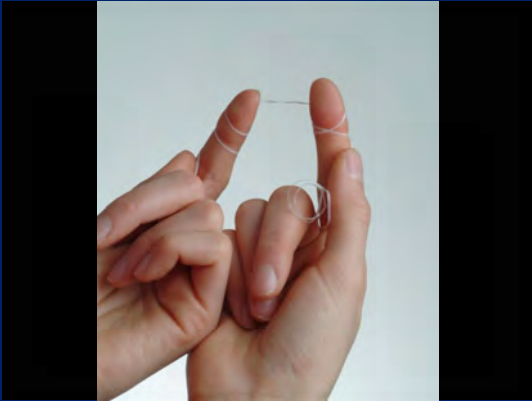


bicycle grip

Source:

<http://www.nidcr.nih.gov/HealthInformation/DiseasesAndConditions/DevelopmentalDisabilitiesAndOralHealth/DentalCareEveryDay.htm> graphics retrieved 8/7/06

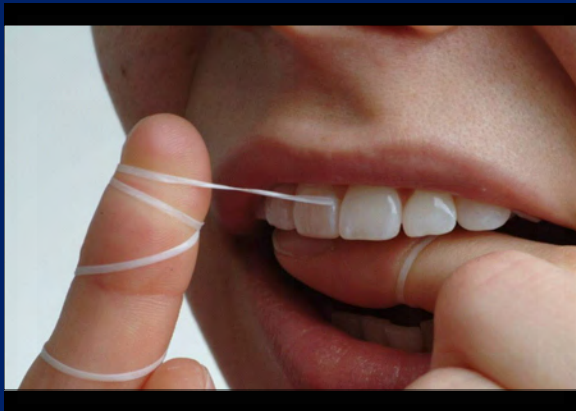
# Proper Flossing



Use about 18" of floss leaving an inch or two of working room.



Be sure to go below the gumline, but avoid snapping the floss on the gums.



Gently follow the curves of your teeth, sliding the floss up and down the tooth surface a few times.

Courtesy of UMKC School of Dentistry  
Photography Department and the  
Division of Dental Hygiene



# Interdental Brushes—a Safer Alternative to Flossing



## Technique for using an interdental brush



- Place the head of brush at the angle needed for working in the person's mouth.
- Dip the brush in antimicrobial rinse.
- Place the brush in between the teeth at the gum line and gently push back and forth in between teeth (in and out between the teeth). Never force the brush if the space is too tight for the brush. You can come in from the tongue side, but this is more difficult because of how the teeth come together.
- Clean the brush by wiping it on gauze before brushing between the next set of teeth. Periodically re-dip the brush in antimicrobial rinse after wiping it clean.
- Clean the brush after use and store it in an area where it can air dry.

# Oral Health Products

- Soft toothbrush
  - Electric brushes
- Dental floss
  - Floss holders
- Interdental brushes
- Bridge threaders
- Tongue cleaners
- Fluoride toothpaste
- Mouthrinses (non-alcohol)
  - Bad breath
- Sugarless gum (xylitol)



<http://www.ndc.com.sg/ForPatientsNVisitors/PatientEducation/YourGumsPeriodDis.htm>;

photo of interdental brush retrieved 7/31/06; used with permission of National Dental Center, Singapore

# Tongue Cleaning



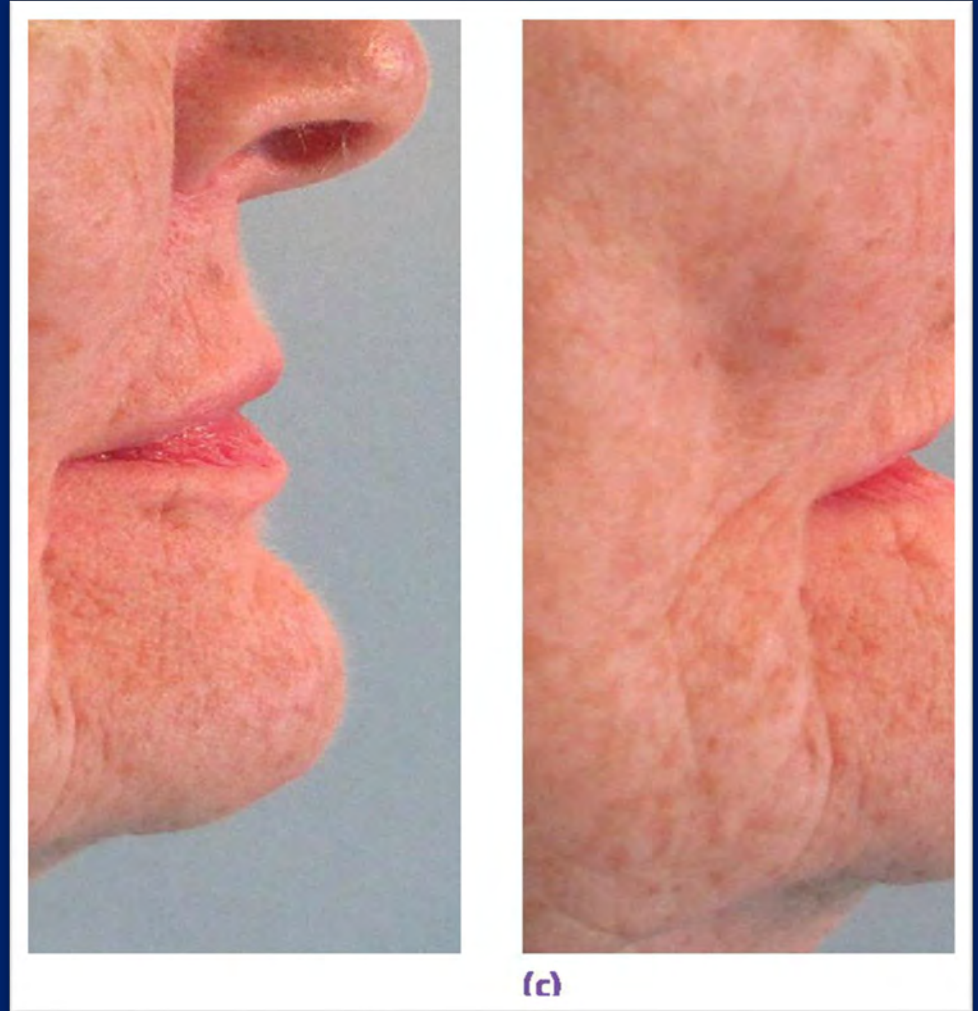
Gently clean or brush your tongue to remove bacteria and freshen the breath.

<http://www.dentonfamilydentistry.com/badbreath/> retrieved 12/12/06; used with permission of Wayne B. Bishop, DDS.

Courtesy of UMKC School of Dentistry Photography Department and the Division of Dental Hygiene

# Medicare Does Not Cover Tooth Replacement

Unfortunately Medicare does not replace teeth, but without tooth replacement, not only does the patient suffer with severely limiting the types of food they can eat, it also changes the profile, and their ability to be understood clearly.



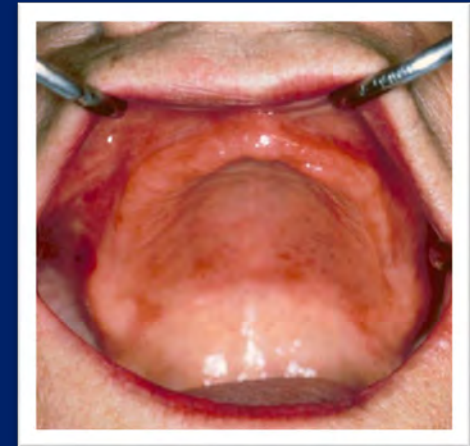
# Check Denture and Partial Use

- Does the patient wear his/her dentures?
- Do they fit?
- Are they clean?
- Do you see redness or sores under them?
- Can the patient chew without pain?



# Denture Care

- **Denture Kit**
  - Brush
  - Denture cleanser tablets
  - Bath
  - Instructions
- **Brush soft tissues**
  - Tongue
  - Wipe ridges and cheeks
- **Have a yearly dental exam!**
  - May need to adjust or reline ill-fitting dentures and check for mouth sores.





# Denture and Partial Care



- Dentures or partials should be marked with the patient's name.
  - It's the law!
- Patients should always wear dentures or partials during the day.
- Dentures and partials require special handling.
  - Place a towel in sink with three inches of water so dentures will not break when cleaning them.
  - Use a denture brush to remove debris on the inside and outside of the dentures, partials or clasps.
  - Use a commercial denture cleaner, hand soap or baking soda to clean them—don't use toxic or abrasive household cleaners.
  - Store in a cool water bath overnight so they don't dry out.
- Patient's partials or dentures checked routinely.



# Check for Mouth Sores

- Infections
- Gum boils
- Redness
- Lesions or tumors
- Fungus
  - Corners of mouth
  - Inside mouth



<http://dentistry.umkc.edu/practition/assets/OralLesions.pdf>

[www.medicine.uiowa.edu/igec/e\\_learning/dentistry/section02/page12](http://www.medicine.uiowa.edu/igec/e_learning/dentistry/section02/page12) retrieved 10/20/06; used with permission

# Look for Gum / Tooth Abscess

- Localized swelling, may or may not have fever or pain.
- Risk for severe facial or systemic infection can be deadly.
- Do NOT try to drain or “pop” the abscess.



# Angular Cheilitis



Typical presentation of angular cheilitis with erythema, crusting and mild fissuring of the angles of the mouth bilaterally.

## Treated with Antifungal Creams

# Other Oral Lesions

- Herpes Lesions



- Aphthous Ulcers (canker sores)



# Ways to Treat Dry Mouth

- Change medication, if possible.
- Request prescription to increase saliva flow.
- Use oral moisturizer or saliva substitute.
- Drink more water (fluoridated).
- Request home fluoride prescription.
- Use only alcohol-free mouthrinses.



Source: <http://www.dental.mu.edu/oralpath/lesions/xerostomia/xerostomia.htm> photo retrieved 8/10/06; used with permission.

# Oral Cancer Danger Signs

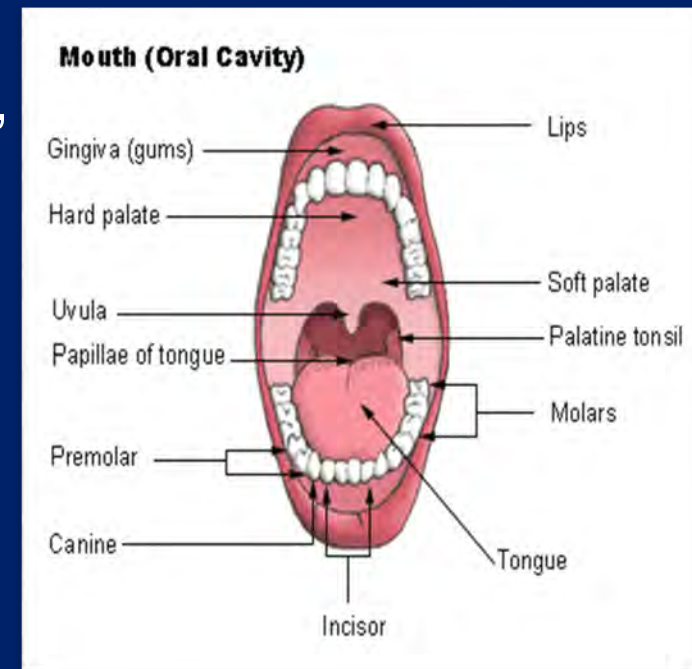
- Sore that does not heal.
- Lump or white patch.
- Feeling something in the throat.
- Trouble chewing or swallowing.
- Difficulty moving tongue or jaws.
- Red or white patches in mouth or tongue.
- Sore throat or hoarse voice that does not heal.



<http://stopsmokeless.com/gallery>; photo  
retrieved 12/15/06; used with permission

# Facts on Oral Cancer

- Oral cancer is more common than many other cancers- leukemia, skin melanoma, Hodgkin's disease, and cancers of the brain, liver, bone, thyroid gland, stomach, ovaries, and cervix.
- It is usually caused by long-term use of tobacco and alcohol, but is also associated with Human Papilloma Virus.
- If caught early, it can be treated successfully more than 90% of the time.



[http://en.wikipedia.org/wiki/Image:Illu\\_mouth.jpg](http://en.wikipedia.org/wiki/Image:Illu_mouth.jpg)

## Oral Health Assessment Tool (OHAT) - Modified

### Mouth Care Without a Battle<sup>®</sup>

Person Assessed: \_\_\_\_\_ Assessed by: \_\_\_\_\_ Date: \_\_\_\_\_

*For each category, circle the one best description. Then, in the column marked score, write the points for the assessment. Add the points in the bottom row. Problems **underlined and in bold** are indications for immediate referral to a dentist, as they may represent a serious condition. For nursing home residents, problems in **bold** may require documentation on the MDS 3.0 and may trigger the Dental Care CAA, regardless of the total score.*

Category	0 = Healthy	1 = Minor Problems	2 = Major Problems	Score*
Lips	Smooth, pink, moist	Dry, chapped, or red at corners	<b>New or growing lump, ulcer, or lesion; white, red, and/or ulcerated patch; bleeding and/or ulcer at corners</b>	
Gums, palate, and insides of cheeks	Pink, moist, smooth, no bleeding	Dry, shiny, rough, red, and/or swollen area; <b>one small ulcer, lesion, and/or sore spot under dentures</b>	<b>Swollen, tender area around a tooth or tooth root (suspected abscess); swollen and/or bleeding ulcer; white, red and/or ulcerated patch; small pimple-like area with pus; widespread redness under dentures</b>	
Natural teeth	No decay or broken or worn down teeth	1-3 decayed or broken and/or very worn down teeth	<b>One or more very loose teeth; 4 or more decayed or broken or very worn down teeth; fewer than 4 teeth</b>	
Dentures	No broken areas; teeth, dentures are regularly worn, and dentures are labeled with name	<b>1 broken area or tooth; denture loose, but adhesive not needed; denture uncleanable; denture not labeled with name; dentures only worn for 1-2 hrs daily</b>	<b>More than 1 broken area or tooth; denture so loose adhesive needed; denture missing or not worn</b>	
Quality of tooth hygiene	Clean and no food particles or tartar in mouth or on dentures	Food particles, tartar, and/or plaque in 1-2 areas of the mouth or on small area of dentures; bad breath (halitosis)	Food particles, tartar, and/or plaque in most areas of the mouth or on most of dentures; severe bad breath (halitosis)	
Tooth pain	No behavioral, verbal, or physical signs of dental pain	<b>Nonspecific verbal and/or behavioral signs of pain such as pulling at face, chewing lips, or not eating; unexplained aggression</b>	<b>Physical signs of pain (swelling of cheek or gum, broken teeth, ulcers); verbal and/or behavioral signs of pain specific to the mouth</b>	
Saliva / dry mouth	Moist tissues, watery and free flowing saliva	Dry, sticky tissues, little saliva present; person complains of dry mouth	Tissues parched and red; very little/no saliva present; saliva is thick	
Tongue	Normal, moist, roughness, pink	Patchy, fissured, red, coated	Patch that is red and/or white, ulcerated, and/or swollen	
Total Score				



## MOUTH CARE WITHOUT A BATTLE



### ABOUT THE TRAINING

[Click here](#) to learn about new research that finds Mouth Care Without a Battle training can significantly reduce cases of pneumonia in nursing homes.

Mouth Care Without a Battle© is an evidence-based approach to person-centered daily mouth care for persons with cognitive and physical impairment. Developed by the research group that brought you Bathing without a Battle©, Mouth Care Without a Battle combines best practices in oral hygiene with proven techniques to overcome resistance to care among persons with dementia and related conditions. It improves oral hygiene and may reduce pneumonia.

### Mouth Care in the News

MORE ►

Improving mouth care in New York: Nursing home staff successfully use Mouth Care Without a Battle



### MOUTH CARE WITHOUT A BATTLE

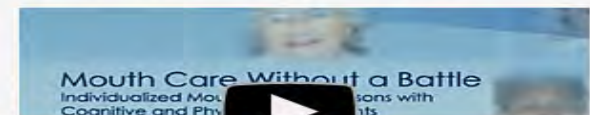
- State-of-the-art, person-centered training
- CE credits provided for nurses and nursing assistants
- Available in three versions:
  - Train-the-Trainer (detailed, 2 DVDs)
  - In-service/self-study in English (1 DVD)
  - In-service/self-study in Spanish (1 DVD)
  - Online in-service/self-study



Contact [mcwb@unc.edu](mailto:mcwb@unc.edu) to Purchase the Training DVD

Enroll in Online Training

### VIEW INTRODUCTORY VIDEO



# Mouth Care Without a Battle<sup>©</sup>

## Strategies for Resistive Behaviors



Behavioral Symptom	Person-Centered Techniques
<p><b>General</b></p>	<ul style="list-style-type: none"> <li>• Know the resident</li> <li>• Approach from the front and make gradual movements</li> <li>• Smile and maintain eye contact</li> <li>• Ask permission before starting</li> <li>• Speak slowly; use simple phrases</li> <li>• Ask one question at a time</li> <li>• Focus on the resident rather than the task</li> <li>• Explain each step</li> <li>• Complete as many steps as possible</li> <li>• Give reasons for what you're doing</li> <li>• Be patient, repeat yourself as appropriate</li> <li>• Give positive feedback and encouragement</li> </ul>
<p><b>Resident Refuses Mouth Care</b></p>	<ul style="list-style-type: none"> <li>• Figure out why the resident is refusing (e.g. bad time, pain, fear) and change approach accordingly               <ul style="list-style-type: none"> <li>- If pain, check for broken teeth or infection and notify nurse</li> <li>- If fear, provide comforting object or reassurance and rub shoulder/arm</li> </ul> </li> <li>• Come back later when the resident is more receptive to care</li> <li>• Talk with the resident before starting mouth care</li> <li>• Develop a routine (e.g. every day at the same time with the same caregiver)</li> <li>• Provide a reason (e.g. let me get the food out of your teeth so you'll be more comfortable)</li> </ul>
<p><b>Resident Won't Open His/Her Mouth</b></p>	<ul style="list-style-type: none"> <li>• Tell-show-do techniques to promote understanding</li> <li>• Touch the mouth, cheek, or jaw with the toothbrush to prompt to open</li> <li>• Gently insert toothbrush to clean front surfaces of teeth</li> <li>• Gently pull down on lip or chin</li> <li>• Ask the resident to say "ah"</li> <li>• Ask resident to open mouth and then open your mouth (modeling the behavior)</li> <li>• Take the resident to the bathroom sink (the mirror and sink may help cue them to brush teeth)</li> <li>• Sing with the resident</li> <li>• Be patient, try small talk, provide a reason for mouth care</li> <li>• Come back at a time when the resident might be more responsive</li> </ul>



# Mouth Care Without a Battle<sup>®</sup>

## Strategies for Resistive Behaviors



Behavioral Symptom	Person-Centered Techniques
General	<ul style="list-style-type: none"><li>• Know the resident</li><li>• Approach from the front and make gradual movements</li><li>• Smile and maintain eye contact</li><li>• Ask permission before starting</li><li>• Speak slowly; use simple phrases</li><li>• Ask one question at a time</li><li>• Focus on the resident rather than the task</li><li>• Explain each step</li><li>• Complete as many steps as possible</li><li>• Give reasons for what you're doing</li><li>• Be patient, repeat yourself as appropriate</li><li>• Give positive feedback and encouragement</li></ul>

## Resident Refuses Mouth Care

- Figure out why the resident is refusing (e.g. bad time, pain, fear) and change approach accordingly
  - If pain, check for broken teeth or infection and notify nurse
  - If fear, provide comforting object or reassure and rub shoulder/arm
- Come back later when the resident is more receptive to care
- Talk with the resident before starting mouth care
- Develop a routine (e.g. every day at the same time with the same caregiver)
- Provide a reason (e.g. let me get the food out of your teeth so you'll be more comfortable)

## Resident Won't Open His/Her Mouth

- Tell-show-do techniques to promote understanding
- Touch the mouth, cheek, or jaw with the toothbrush to prompt to open
- Gently insert toothbrush to clean front surfaces of teeth
- Gently pull down on lip or chin
- Ask the resident to say "ah"
- Ask resident to open mouth and then open your mouth (modeling the behavior)
- Take the resident to the bathroom sink (the mirror and sink may help cue them to brush teeth)
- Sing with the resident
- Be patient, try small talk, provide a reason for mouth care
- Come back at a time when the resident might be more responsive

## Resident Resists Care by Grabbing, Holding, or Playing with an Object

- Hand the resident the toothbrush and invite to brush
- Reassure and rub shoulder/arm to help relax
- Distract or redirect by pausing, singing, talking
- Hand the resident an object to hold and keep hands busy
- Use a second caregiver to talk, reassure and/or hold resident's hands during mouth care
- Gently hold the resident's hand and talk

## Resident Bites Toothbrush

- Gently wiggle the toothbrush and ask to open mouth
- Insert a smaller brush to work around the toothbrush
- Gently rub cheek to relax jaw muscle
- Slide finger along the inside of the cheek and massage jaw



## Resident Shows Physical or Verbal Aggression

- Distract the resident (e.g. singing, dancing, conversation, watching TV)
- Stop and check for pain; come back later
- Pick another time of day when the resident is calmer (e.g. early morning while sleepy)
- Try another caregiver with whom the resident is comfortable
- Use a second caregiver to talk, reassure and/or hold resident's hands during care
- Check for broken teeth, sore spots, infection (notify nurse)



## Resident Has Trouble Swallowing, or Cannot Spit

- Use a small amount of antimicrobial rinse
- Use only a pinhead of paste
- Provide care sitting up
- Have resident tilt head forward and put a cup under the mouth to encourage spitting
- Avoid swishing

## Trouble Removing or Reinserting Dentures

- Ask the resident to remove or reinsert dentures
- Ask to open mouth so you can remove/put in their dentures
- Gently touch the mouth or cheek to prompt to open mouth





# Take Away Tips!

- Try to make an individualized checklist of oral care steps for each patient.
- Have a toolkit ready, so that everything you use for dental care is in one spot.
- For care-resistant patients, always perform oral care procedures at the same time and in the same area.
- If the person can perform oral care himself or herself to some extent, try a technique called “chaining”, which means that the individual starts performing oral hygiene procedures by himself or herself. Then you complete with additional steps such as interdental cleaning



# Take Away Tips!

- Adjust dental hygiene aids to make them easier to use as illustrated in a previous slide.
- Electric toothbrushes are very helpful
- Make oral care a routine for individuals with dementia
- Stand behind a person and hand them a mirror to perform oral care
- Try “bridging”, which means that you put the toothbrush in the hand of your patient, and you start brushing their teeth.

**Thank you for your attention today!**

Do you have any questions?

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