Dietary Sources of Vitamins

Vitamin A

-Beef liver, broccoli, red-orange fruits and vegetables (squash, carrots, apricots, cantaloupe, peaches, papaya, red peppers), dairy products, fortified breakfast cereals

Vitamin B Complex

- Green leafy vegetables (esp. spinach), soy beans, almonds, walnuts, sunflower and sesame seeds, sprouts, fish, beef liver, fortified breakfast cereals

Vitamin C

- Citrus fruits, broccoli, cauliflower, cabbage, and brussel sprouts

Vitamin D

- Fish, fortified dairy products and juices, and eggs

*Synthesized in body by sunlight



http://www.netdoctor.co.uk/dietandnutrition/

References

Allen, Lindsay H. "To what extent can food-based approaches improve micronutrient status?." Asia Pacific Journal of Clinical Nutrition 17 (2008): 103-105. Print.

Flores, I. L., A. R. Santos-Silva, R. D. Coletta, P. A. Vargas, and M. A. Lopes. "Widespread red oral lesions." Journal of the American Dental Association 144.11 (2013): 1257-1260. Print.

Langan, Robert C., and Kimberly J. Zawistoski. "Update on Vitamin B12 Deficiency." American Family Physician 83.12 (2011): 1425-1430. Print.

Macaluso, Martha, and Loretta Mariano. ''Vitamins as an Adjunct to Traditional Periodontal Therapy.'' Access 28.2 (2014): 14-16. Print.

Miley, D. Douglas, Cheryl Mueller, Eric M. Langenwalter, Debra A. Dixon, Catherine L. Anderson Spearie, Rex A. Couture, William D. Shannon, Charles F. Hildebolt, M. Nathalia Garcia, and Roberto Civitelli. "Cross-Sectional Study of Vitamin D and Calcium Supplementation Effects on Chronic Periodontitis." Journal of Periodontology 80.9 (2009): 1433-1439. Print.

Pacak, Darice K.. "Vitamin C and Oral Health." Dimensions of Dental Hygiene 8.7 (2010): 52, 55-57. Print.

Velden, U. Van Der, D. Kuzmanova, and I. L. C. Chapple. "Micronutritional approaches to periodontal therapy." Journal of Clinical Periodontology 38 (2011): 142-158. Print.

Zeines, Victor. "The Best Vitamins for Dental Health." Healthy mouth, healthy body: the natural dental program for total wellness. New York: Kensington, 2000. 90-96. Print.





http://www.topnews.in/health/flour-residues-stone-tools-suggest-early-humans-ate-balanced-diet-28780



http://www.bls.gov/ooh/healthcare/dentalhygienists.htm

RECOGNIZING VITAMIN DEFICIENCIES

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Vitamin functions

Vitamins are groups of organic compounds essential for normal growth and function; they must be procured in the diet because they cannot be synthesized by the body

Vitamin A (fat soluble) -Builds and maintains healthy mucous membranes and epithelial tissues -Acts as an antioxidant within cell tissues

Vitamin B Complex (comprised of 8 watersoluble vitamins: thiamine, riboflavin, niacin, pantothenic acid, pyridoxine, biotin, folic acid, cobalamin)

-Maintains neurological function and reduces neural tube defects

- Maintains periodontal tissue
- Reduces risk of stroke
- -Aids in red blood cell production
- -Aids in DNA synthesis

Vitamin C (water-soluble) -Maintains bone, blood vessels, skin, scar tissue, tendons, and ligaments

- Repairs and maintains cartilage and teeth

Vitamin D (fat-soluble)

- Aids the body in using calcium and phosphorus to strengthen bones and teeth

 Aids in preventing hypertension, rheumatoid arthritis, and type II diabetes
 Improves immune function

Oral Clinical Signs of Vitamin Deficiencies

Vitamin A

-Gingival inflammation

- Oral candidiasis (yeast infection)
- Impaired taste

Vitamin B Complex

- *B2 (riboflavin):* shiny red lips, sore tongue, cracked lips, angular cheilitis, glossitis, hyperemia and edema of oral and pharyngeal mucosa

- B3 (niacin): red/swollen apex of tongue with smooth dry edges, angular cheilitis, mouth pain
 - B6 (pyridoxine): sore burning mouth, angular cheilitis, smooth tongue

- *BI2 (cobalamin):* halitosis, angular cheilitis, bright red tongue with//without fissures, xerostomia, numb and bleeding gums

Vitamin C

- Gingival inflammation with smooth appearance -Bluish-red gingiva

-Soft, friable gingiva

-Scurvy (bleeding gums, loose teeth, petechial hemorrhage of skin and mucous membranes) *Calculus acts as an irritant

Vitamin D

-Softens bones and teeth by decreasing density

Role of the Dental Hygienist

-Utilize the health history interview to establish what vitamin supplements the patient may be taking

-Have the ability to recognize clinical signs of vitamin deficiencies in the oral cavity
-Explain how vitamin deficiencies modify the body's response to dental biofilm and contribute to gingival disease

-Provide patient with diet and nutritional counseling

-During counseling, food-based approaches to diversify diet and increase nutrient intake should be prioritized over vitamin supplementation -Refer the patient for medical consultation if a serious deficiency is suspected, there may be underlying systemic factors associated



Scurvy displaying in the gingival tissue http://journal.nzma.org.nz/journal/120-1262/2729/



Displaying Oral Candidiasis with Angular Cheilitis http://www.mycology.adelaide.edu.au/gallery/yeastlike_fungi/