

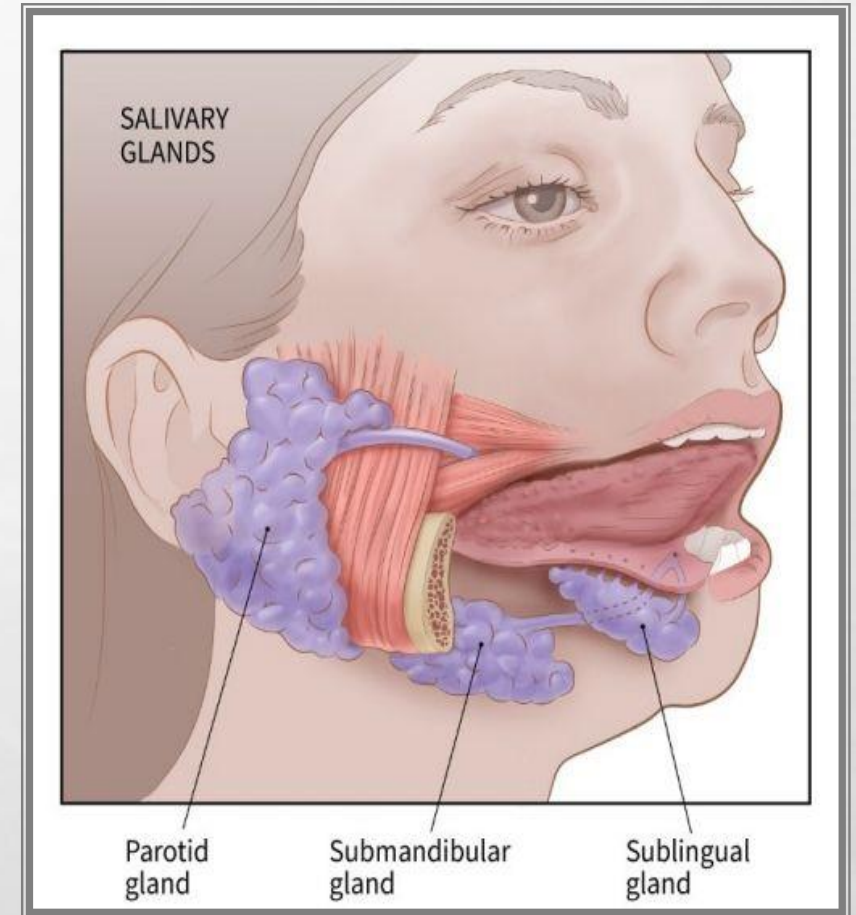
# **XEROSTOMIA- DRY MOUTH**



**By : Irena Shlomov**

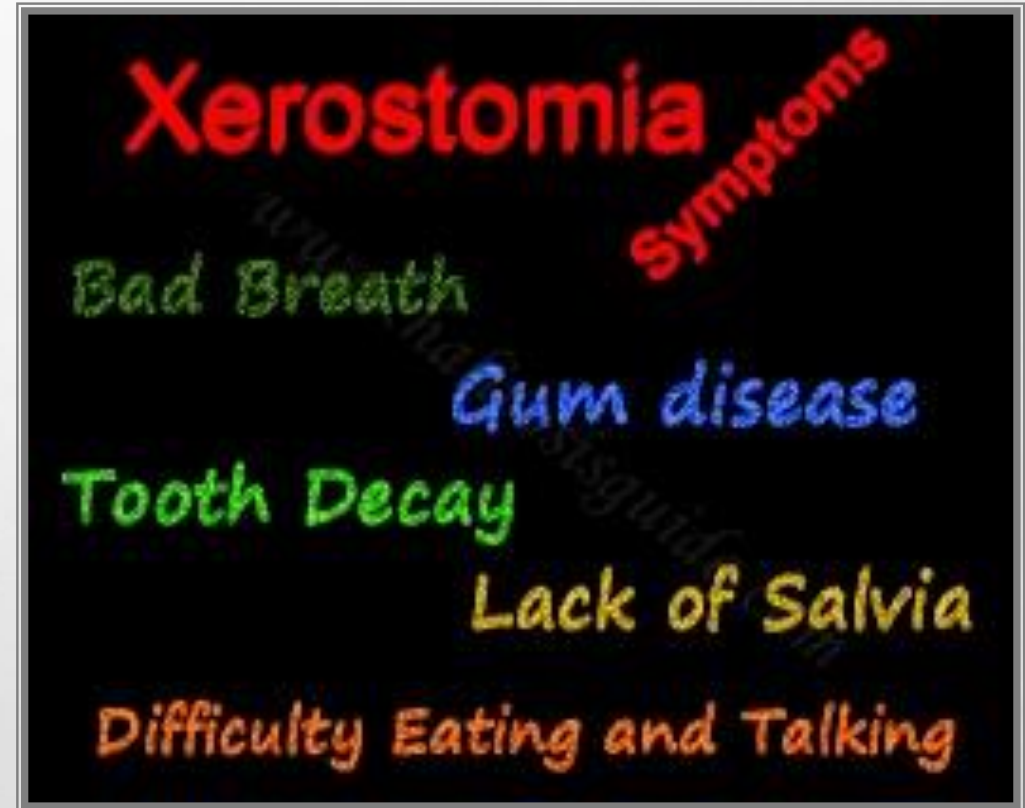
# WHAT IS XEROSTOMIA?

- XEROSTOMIA OR DRY MOUTH, REFERS TO A CONDITION IN WHICH THE SALIVARY GLANDS IN OUR MOUTH DON'T MAKE ENOUGH SALIVA TO KEEP OUR MOUTH WET.
- SALIVA HELPS PREVENT TOOTH DECAY BY NEUTRALIZING ACIDS PRODUCED BY BACTERIA, LIMITING BACTERIAL GROWTH AND WASHING AWAY FOOD PARTICLES.



# SYMPTOMS AND SIGNS

- ORAL DRYNESS (MOST COMMON)
- HALITOSIS
- BURNING SENSATION
- LOSS OF SENSE OF TASTE OR BIZARRE TASTE
- DIFFICULTY IN SWALLOWING
- TONGUE TENDS TO STICK TO THE PALATE
- DECREASED RETENTION OF DENTURE





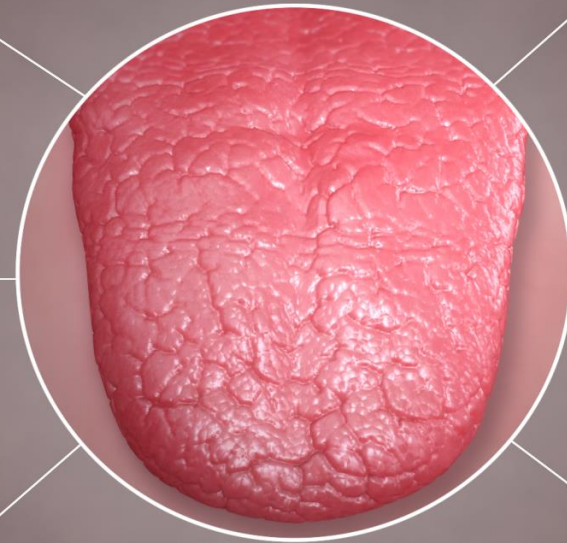
# ETIOLOGY

## Xerostomia - Dry Mouth

Tobacco use

Dehydration

Nerve damage



Sign of an underlying disease or condition :

Sjogren's syndrome,  
HIV/AIDS,  
Alzheimer's disease,  
Diabetes,  
Anemia,  
Cystic fibrosis,  
Rheumatoid arthritis,  
Hypertension,  
Parkinson's disease,  
Stroke and Mumps.

Side effect of certain medications

Reduction or absence of Saliva

# ORAL HEALTH CONCERNS FROM DRY MOUTH

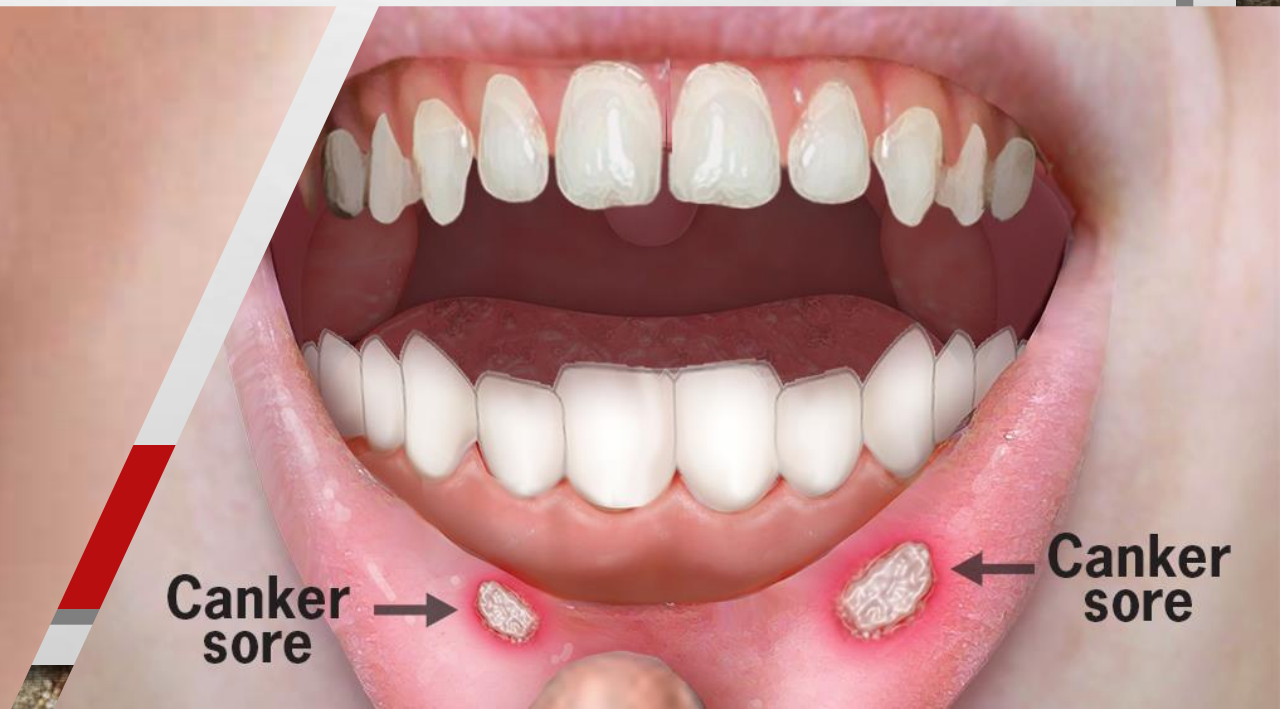
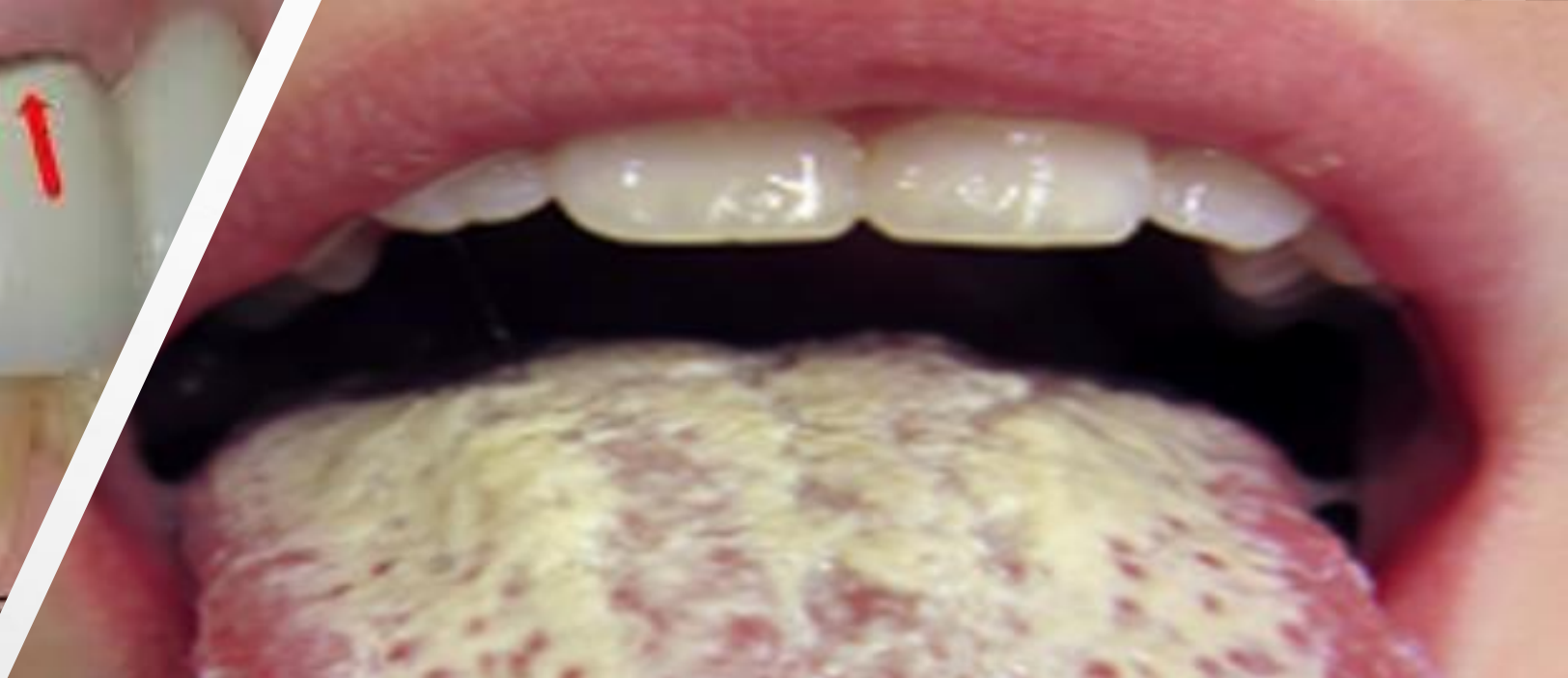
- SALIVA IS OUR FIRST LINE OF DEFENSE IN MAINTAINING OUR ORAL HEALTH. IT RINSES BACTERIA AND FOOD DEBRIS FROM THE MOUTH, STARTS THE DIGESTIVE PROCESS, AND NEUTRALIZES ACIDS. OVER TIME, CHRONIC DRY MOUTH CAN AFFECT THE BALANCE OF BACTERIA IN YOUR MOUTH, MAKING IT MORE LIKELY FOR YOU TO DEVELOP ORAL INFECTIONS SUCH AS THRUSH, AND RAISING YOUR RISKS FOR TOOTH DECAY AND GUM DISEASE.

# COMPLICATIONS

IF WE DON'T HAVE ENOUGH SALIVA AND DEVELOP DRY MOUTH, THIS CAN LEAD TO:

- INCREASED PLAQUE, TOOTH DECAY AND GUM DISEASE
- MOUTH SORES
- YEAST INFECTION IN THE MOUTH (THRUSH)
- SORES OR SPLIT SKIN AT THE CORNERS OF YOUR MOUTH, OR CRACKED LIPS
- POOR NUTRITION FROM HAVING PROBLEMS WITH CHEWING AND SWALLOWING





# THE ROLE OF THE DENTAL TEAM

- WE AS FUTURE DENTAL HYGIENE CAN HELP OUR PATIENTS WITH XEROSTOMIA DUE TO HYPOSALIVATION AFTER CHECKING THAT THE SOURCE OF THE DISTURBANCE IS NOT RELATED TO ANY DISEASE PROCESSES (SUCH AS DIABETES).
- ALTERATIONS IN CARE INCLUDE THE RECOMMENDATION OF:
  - SIPPING WATER,
  - ARTIFICIAL SALIVA USE,
  - REMINERALIZATION PRODUCTS APPLICATION SUCH AS FLUORIDE AND CASEIN PHOSPHOPEPTIDE-AMORPHOUS CALCIUM PHOSPHATE (CPP-ACP),
  - AVOIDANCE OF ALCOHOL-CONTAINING PRODUCTS,
  - INCREASED RECARE VISITS.
  - MEDICATIONS THAT STIMULATE SALIVARY PRODUCTION ARE AVAILABLE FOR NONDRUG-RELATED HYPOSALIVATION.



**THANK YOU  
FOR YOUR  
ATTENTION !!!**



**DRY  
MOUTH**