|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| How to manage Periodontal Disease on Down Syndrome patients?  * Early onset severe periodontal disease lower prevalence of dental caries; delayed eruption of permanent teeth, malocclusion; congenitally missing and malformed teeth * Sensory adapted dental environment reduces anxiety and increases cooperation in both healthy children, and children with developmental disorders though this effect is more prominent in children with developmental disorders. * Patients with Down syndrome visiting a special care dentist regularly, showing good cooperation during dental treatment and performing adequate dental self-care, have less chance of developing periodontitis. |  |  | |  | | --- | | Bibliography  * van de Wiel B, van Loon M, Reuland W, Bruers J. Periodontal disease in Down's syndrome patients. A retrospective study. Spec Care Dentist. 2018;38:299–306.https://doi.org/10.1111/scd.12314 * Nirmala SVSG,Saikrishnna D (2017) Dental Concerns of Children with Down’s Syndrome- An Overview. J Pediatr Neonatal Care 6(3): 00248. DOI:10.15406/jpnc.2017.06.00248 * Periodontal disease and Down syndrome patients. (2012, February 01). Retrieved from https://www.rdhmag.com/articles/print/volume-32/issue-2/features/periodontal-disease-and-down-syndrome-patients.html  Picture Bibliography:  * https://healthytalbot.org/topics/dental-care-guidance-for-caregivers-of-patients-with-down-syndrome/ * https://www.researchgate.net/figure/Dental-decay-caries-in-Down-Syndrome-subject-Nursing-bottle-caries-in-early-mixed\_fig7\_221914618   \PERIODONTAL DISEASE AND DOWN SYNDROME | |  | |  |  | |  | | --- | |  | |  | | PERIODONTAL DISEASE AND DOWN SYNDROME | | Michelle Fernandez, Florintina L. Michelle R | |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Objective It appears that the oral status of children with down syndrome is affected negatively by many factors. Thus, the parents, the educators, and the dentists should be aware of this fact and encouraged to improve such children’s oral hygiene and provide the dental care they need. What is Down Syndrome? Down syndrome is a genetic disorder that presents a set of mental and physical symptoms that are the result of an extra copy of chromosome 21 which changes the body and brain’s normal development.  The extra chromosome can affect a person’s physical features, intellect and overall development. It also increases the likelihood of some health problems Causes of Periodontal Disease in Down Syndrome Patients  * The progression of periodontal disease in DS patients is more rapid than patients without DS. * Higher amounts of periodontopathic bacteria present in the salvia of DS patients leads to a higher incident and severity of periodontal disease. * DS patients with periodontal disease are more prone to delayed eruption of permanent teeth, malocclusion; congenitally missing and malformed teeth are common; hypoplasia of mid-facial region; hypodontia, microdontia; macroglossia, fissured and protruding tongue; and tongue thrust, bruxium, clenching, and mouth breathing. |  |  | Role of Hygienist -Encourage the patient to perform oral care independently, if possible and advise caregiver or parent to supervise the patient’s homecare routine.  - Suggest the use of disclosing agents to highlight missed areas, making it easier for these patients and care givers to see where they need to brush.  - Ask patients to demonstrate their brushing technique for you. Follow up with hand-over- hand specific directions on either brushing technique or adaptations. Demonstrate not only to patients, but also to their caregivers.  - Use of a power brush may encourage DS patients to be more independent in their oral health care and compensate for lack of dexterity.  - Be cognizant of natural spontaneity, tolerance, anxiety and stubbornness in patients with DS.  - Stress importance of frequent hygiene appointments. |  |  | Conclusion Children with Down Syndrome require more effort when providing oral care. Early treatment and education is key in managing periodontal disease. As hygienists, it is our job to recognize and understand their limitations to provide optimal care. |