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## **Sialolith**

As a dental hygienist it is imperative to recognize oral diseases in order to provide your patients with optimal care. A common disease in middle-aged adults is salivary duct stones which are made out of masses of crystallized minerals. The stones form in the tubes that saliva passes through after it is made in your salivary glands. They are commonly found in the submandibular and parotid salivary glands. This oral condition is commonly known as Sialolithiasis.

This condition is painful and is also the most common cause of blockage in your salivary ducts. They can range in size from a few millimeters to more than two centimeters. It is important to manually palpate the glands in order to find the stones since they appear radiolucent on radiographs. Signs and symptoms include pain in your neck, face and mouth. They become worse before or during meals because the stones block saliva from being released. Which can cause xerostomia. Bacterial infections can occur, although rare it is caused when the gland is filled with stagnant saliva. Some signs of infection include fever, redness and a foul taste in your mouth.

Although the exact etiology of the condition is unknown, there are a few factors associated with a higher risk of having these stones. Some factors include certain medications for allergies or high blood pressure which can reduce the amount of saliva, being dehydrated and also not eating enough food, which causes a decrease in saliva production. There are treatments that can be done at home if the stones are not severe such as; sucking on sugar-free lemon drops

and drinking lots of water. Medical treatments for Sialolithiasis can be as simple as having your dentist or doctor squeeze it out or if the stones are severe then they would have to be surgically removed. Surgical removal can be severe and can cause facial nerve damage as well as damage to the salivary gland.

Thankfully, a new approach was introduced that can reduce the severity of the removal of these stones. This procedure is called wireless mobile ultrasonography. It involves using an endoscope with a basket and a smartphone in order to minimize having to make a surgical flap and maintain the salivary gland. The mobile phone is used with a probe to identify the exact location of the stone, the dissection would be made using mosquito forceps to access the stone under mobile ultrasonographic guidance.

The outcome of removing the stone without any complications are highly favorable. However, a few cases have been reported to continuously develop stones or infections in the salivary gland in which your doctor may suggest having the gland removed. It is important as a dental hygienist to identify oral diseases in order to ensure our patients receive the proper care and relieve them of any pain or discomfort in a timely manner. Identifying Sialoliths early and seeking treatment can prevent a patient from developing xerostomia. Early detection can prevent caries and also prevent a patient from developing an infection which can be painful.

#### Works Cited

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