- For care-recipients who are less compliant and at higher risk of developing:
  - **tooth decay** – high strength fluoride toothpastes, gels or rinses can be used on professional dental advice.
  - **gum disease** – apply chlorhexidine gel on the teeth-gum margins before bed.

- If care-recipients gag or cannot rinse or spit, a smear of high fluoride concentration toothpaste can be used. Alternatively, pour fluoride rinse into a cup, dip the head of the toothbrush into it and then brush the teeth. Repeat dipping and brushing until finished. Chlorhexidine can be applied to the teeth and gums in a similar manner.

  **Further information**
  Dental Practice Education Research Unit
  ARCPOH, School of Dentistry,
  The University of Adelaide, SA 5005
  Phone (08) 8313 4045 Fax (08) 8313 4858
  Website www.arcpoh.adelaide.edu.au/dperu

---

Your dentist needs to know:
- If there have been changes in your care-recipient’s medical history.
- The names of any medications [prescription as well as over-the-counter drugs] your care-recipient is taking.

---

**c) People with partial or complete dentures**

Clean dentures (false teeth) after each meal with soap using a toothbrush and leave them in water overnight.

**d) People not fed by mouth**

These care-recipients need to have their teeth, lips, gums, tongue and palate cleaned just as for all other care-recipients.

---

**Regular dental visits**

Regular dental visits should be maintained based on the dentist’s recommendation or sooner if any changes in the mouth or behaviour are noted, especially when brushing teeth or at meal times.

If you don’t have a regular dentist contact your nearest public or private dental clinic.

Infection and trauma cases should be managed as soon as possible.

At every dental visit, for any treatment to be carried out the person responsible must give consent and provide a complete medical history and list of medications.

---

**Dental healthcare checklist**

- Healthy diet
- Brush twice a day with FLUORIDE toothpaste and soft brush
- Look for early signs of gum disease:
  - gums that bleed easily
  - persistent bad breath
  - trouble chewing
- Drink tap water after meals
- Look for any changes in the mouth or behaviour when brushing teeth or at meal times
- Take care to remove all plaque on and between the teeth, and at the gum line
- Clean dentures and remove overnight
- Book appointments at the time of day that is best for your care-recipient
- Visit the dentist regularly; sooner if any changes in the mouth or behaviour are noted
People with mild to severe disabilities depend partially or completely on their carers for their daily care. It’s a team effort.

- Carers at home provide daily oral hygiene care, and a healthy diet, screen for any oral changes and maintain regular dental visits.
- Dental professionals provide clinical care and advice, and can help patients avoid gum disease and tooth loss.

Healthy teeth and gums are important to people with disabilities

Teeth that are sore or loose in their gums make it hard to eat or sleep and they may not be able to tell you what is causing the problem.

Prevention of oral disease

People with mild to severe disabilities who depend partially or completely on their carers for their daily care are referred to as care-recipients. Prevention of oral diseases (tooth decay and gum problems) for care-recipients is a challenging problem for carers and dental professionals. Whenever possible, they should be encouraged and supported in their efforts to care for themselves.

Daily home care

a) All people with disabilities

Diet
- Eat a well-balanced diet, high in fruit and vegetables.
- Consume minimal sugary foods and soft drinks (using straw) limited to meal times.
- Drink tap water after meals to rinse mouth and wash away food particles from teeth.

Oral hygiene
- **Teeth**
  - Brush teeth twice a day — after breakfast and after dinner, using a pea-sized amount of a fluoride toothpaste and a soft toothbrush.
  - Use an electric or battery-operated toothbrush, and interdental brushes, if accepted.
- **Lips, gums, tongue and palate (roof of the mouth)**
  - Should also be cleaned to keep healthy. Check with toothbrush, wipes or swabs to clear away food or medicines accumulated on gums, teeth, or pouch in the cheeks or mouth (pouched food = food held in the mouth and cheeks instead of swallowing).

Fluoride
The fluoride in toothpaste and water strengthens tooth enamel, making teeth more resistant to decay.

b) People needing assistance from carers

As brushing other people’s teeth can be difficult, tips for carers include:
- Work in pairs: one carer supports the care-recipient’s head while the second carer brushes the care-recipient’s teeth.
- If it is difficult to keep the mouth open, use three or four tongue depressors (or popsticks) taped together as a mouth prop to keep the mouth open (Figure 1).
- The handle of plastic toothbrushes can be modified by placing under hot water to soften the plastic and gently bending the brush handle to create a better angle (Figure 2) to clean the inner surfaces of the lower front teeth.
- If the care-recipient bites the toothbrush, use a second toothbrush.
- For people who pouch food, carers should inspect the mouth after each meal or dose of medicine and remove any remaining food or medicine from the mouth by sweeping the mouth with a finger wrapped in gauze or using a disposable swab.