Better Oral Health in Residential Care

Staff Portfolio

Education and Training Program

Post-Quiz Answers
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- Tanunda Lutheran Home, South Australia
- Resthaven – Craigmore, South Australia
- Helping Hand – Parafield Gardens, South Australia

Disclaimer
While every effort was made to ensure the information was accurate and up to date at the time of production, some information may become superseded as future research and new oral hygiene products are developed. In addition, the information in this resource is not intended as a substitute for a health professional’s advice in relation to any oral health issues of concern.

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When a resident refuses dental care it could mean they are experiencing dental pain. A resident may not be able to say he or she is in pain. This is particularly so with residents who have dementia. Often a change in behaviour is a sign which should be reported to the RN. An oral assessment should be done to check if there is a problem in the mouth that may be causing pain.

When brushing a resident's teeth it is important to focus on the gum line. When brushing it is important to brush the front, back and chewing surfaces of the teeth and gums in a circular motion giving particular attention to the gum line. Bacteria in the dental plaque accumulates on the gum line at the base of the tooth and causes gum disease (gingivitis). Gum disease gets worse and more common with age. If it progresses to severe gum disease (periodontitis), this condition can impact seriously on general health and wellbeing.

If a resident's gums bleed you should stop brushing the gums. Bleeding gums is usually caused by a build up of dental plaque. Brushing is the best way to remove the dental plaque and heal the gums. Continue to brush teeth, paying particular attention to the gum line with a soft tooth brush twice a day. This should resolve in a week. Bleeding gums should be reported to the RN as it may also be a sign of a general health problem.

It is important to rinse a resident's mouth with water after brushing their teeth. Encourage the resident to spit and not rinse the mouth after brushing so the fluoride soaks into the teeth. Fluoride is important as it helps to protect the teeth from decay.

A resident with dementia may start brushing their teeth after holding a toothbrush for a few minutes. This is referred to as bridging. Bridging aims to engage the resident's senses especially sight and touch and to help the resident to understand the task you are trying to do for him or her.

Residents' teeth or dentures, gums and tongues should be brushed morning and night. Brushing morning and night is the most effective and economic method of physically removing dental plaque. Dental plaque forms continuously and sticks to all surfaces of the teeth, including spaces between the teeth and the gums and must be removed by regular brushing. Poor oral hygiene allows the bacteria in the dental plaque to produce acids and other substances that damage the teeth, gums and surrounding bone.

It is a good idea to have residents drink water after eating. Water reduces the acid that causes tooth decay and helps to keep the mouth clean. Encourage the resident to drink water to rinse the mouth after meals, medications and other drinks and snacks. A small drink of water before bed is also encouraged.

When brushing a resident's teeth, apply a strip of toothpaste across the top surface of the brush. Only use a small pea-sized amount of toothpaste.

Chest infections may be caused by a build up of plaque in the mouth. The bacteria in dental plaque can enter airways and cause a chest infection called aspiration pneumonia.

Bad breath should be reported to the RN. Bad breath may indicate the presence of an oral health problem and should be reported to the RN. Bad breath can impact on a resident's quality of life.
### Quiz - Answers

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<th>Question</th>
<th>Answer</th>
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<td>11 Oral integrity is as important as skin integrity in protecting the body against infection. When oral integrity is impaired due to poor oral health the bacteria in dental plaque can enter the bloodstream and cause infection of tissues far away from the mouth and may contribute to heart attack, stroke, lowered immunity and poor diabetic control.</td>
<td>Yes</td>
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<td>12 Dentures should be cleaned with toothpaste. Do not use toothpaste to clean dentures as this can be abrasive and over time will abrade and scratch the denture. A scratched denture can be a source of irritation to soft oral tissues and can increase the risk of fungal infections such as thrush. Dentures should be brushed using a denture brush and a mild soap to clean food, dental plaque and any denture adhesive from all surfaces of the denture morning and night.</td>
<td>No</td>
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<td>13 The choice of denture disinfection product is important for partial dentures. Take care with the choice of denture disinfection product as some products may cause the metal components of a partial denture to corrode. Partial dentures may be disinfected using a chlorhexidine product or a denture tablet identified as being non corrosive.</td>
<td>Yes</td>
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<td>14 The presence of stringy saliva in a resident’s mouth is normal. This is a sign of Dry Mouth (Xerostomia) and should be reported to the RN. Salvia is important in maintaining a healthy mouth. This condition can be very uncomfortable for the resident. It can be caused by medications, radiation, chemotherapy or by medical conditions such as Sjögren’s syndrome and Alzheimer's disease. Dry Mouth (Xerostomia) is also a common condition at the end stage of life.</td>
<td>No</td>
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<td>15 Chlorhexidine products and toothpaste can be used at the same time. Chlorhexidine and toothpastes (containing sodium lauryl sulphate) should not be used within two hours of each other as the product effectiveness is reduced.</td>
<td>No</td>
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<td>16 Drinking a lot of caffeine can affect a resident’s oral health. Caffeine drinks such as coffee and tea can contribute to Dry Mouth (Xerostomia). When the quantity and quality of saliva is reduced oral diseases can develop very quickly.</td>
<td>Yes</td>
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<td>17 It is best to try to reduce snacking on sugary foods between meal times. Tooth decay is directly related to the frequency of sugar intake rather than the amount of sugar eaten. Encourage tooth friendly products between meals. Encourage the resident to drink water to rinse the mouth after meals, medications, other drinks and snacks.</td>
<td>Yes</td>
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<td>18 Toothbrushes should be replaced with the change of season (every three months). Toothbrushes carry bacteria and should be replaced every three months (with the change of seasons), when the bristles become shaggy or following an acute illness such as a bad cold. Toothbrushes should be thoroughly rinsed after use, tapped dry and stored uncovered in a dry place.</td>
<td>Yes</td>
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<td>19 The daily application after lunch of an antibacterial product helps to prevent gum disease. The daily application after lunch of a low strength concentration of chlorhexidine (which is alcohol free and non-teeth staining), can reduce harmful bacteria in the dental plaque and help to prevent gum disease.</td>
<td>Yes</td>
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<td>20 Dentures should be taken out at night, cleaned and soaked in cold water. Encourage the resident to remove dentures overnight to rest the gums. Soak cleaned dentures in a denture container of cold water overnight.</td>
<td>Yes</td>
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