

Bulimia wears thin on oral health

The London Toothwear Centre raises awareness of the health implications of eating disorders and offers steps on how to help minimise the damage of oral health

Research from the NHS information centre suggests that up to 6.4% of adults display signs of an eating disorder and, of those, 40% are bulimic. The extended periods of intentional vomiting instigated by bulimics

have considerable impact on a patient's dentition and can result in substantial oral health complications, including:

- The teeth become rounded, smooth and shiny and lose their surface characteristics
- Incisal edges appear translucent
- Cupping forms in the dentine
- Cervical lesions are shallow and rounded
- Restorations tend to be unaffected by erosion and will therefore stand proud of the surrounding tooth tissue.

Alongside beat (www.b-eat.co.uk), which helps sufferers in the UK beat their eating disorders and runs Eating Disorders Awareness Week (23 February-1 March 2015) with the aim of raising awareness of the health implications of these disorders, practices like the London Tooth Wear Centre are working hard to tackle this increasingly prevalent oral health problem.



Advice rather than treatment features heavily during the initial stage of helping a patient suffering with bulimia. Diet analysis and general guidance on how to reduce the effect of acidic foodstuffs should be given and include:

- Drinking water or low fat milk in preference to other liquids
- Using a straw positioned toward the back of the mouth when drinking acidic beverages
- Avoiding swishing drinks around the mouth
- Rinsing the mouth with water or fluoridated mouthwash after consuming acidic foodstuffs.

Oral health advice for a patient whose dentition is compromised by bulimia includes:

- Issuing a fluoride rinse or gel and prescribing a high-fluoride toothpaste for daily use
- Not brushing immediately after vomiting or consuming acidic foodstuffs, but rinsing with a fluoridated mouthwash and chewing sugar-free, xylitol-sweetened gum afterwards.

Extra protection can be provided via calcium and phosphate ions, such

as those found in GC Tooth Mousse, helping to restore the mineral balance, neutralise acidic challenges and stimulate salivary flow.

Compliance may be difficult to achieve and restorative treatment in the presence of ongoing tooth wear is considered unwise but, irrespective of this, the damage caused by erosion means it may be necessary to take action to protect and conserve the remaining tooth structure, for example:

- Direct application of a glass ionomer or composite to sensitive areas may be indicated
- An occlusal guard can protect the teeth during vomiting
- An alkali or fluoride gel placed within the fitting surface of the guard to neutralise any acid pooling may be helpful. **DH&T**



If you have any concerns about your patient's tooth wear, further information is available at www.toothwear.co.uk, email info@toothwear.co.uk or call 020 7486 7180.

Oral health education: Does responsibility lie with schools or parents?

Sameer Patel, clinical director at Elleven, discusses the importance of promoting children's oral health after it was revealed that one in eight children have rotten teeth

Oral health and looking after teeth is ultimately education driven and, as a parent, if you bring a child into this world you are responsible for them. If parents are knowledgeable about how to brush and care for their teeth, the children will be too. As clinical director at Elleven dental, I see day in and day out that children tend to have the same traits as their parents and therefore oral health education at home is crucial. Parents

should be spending a bit more time with their children and taking them through the methods to look after their teeth.

Motivating children

Tooth decay is fundamentally related to two things: brushing teeth and diet. Firstly, children should be educated on the importance of brushing in the morning and evening for two minutes. Parents need to motivate their children and make it fun, whilst setting and demonstrating clear guidelines. Children don't have the manual dexterity to adequately do this on their own until the age of six, so prior to this parents should be supervising.

The second aspect is diet, which is related to discipline. We always talk about limiting sugar intake to meal times and not snacking on sugary foods – parents can designate a sweetie day where children have treats once a week.

Don't fear the dentist

It is also very important that parents don't pass on their fears of the dentist. Years ago it might have hurt to have a filling but nowadays there is no excuse for avoiding the dentist. Parents should be taking advantage of NHS dentists and booking their children in for regular check-ups. Not



only will their children end up having their teeth for longer, they will also have an education and that is a legacy they will pass onto the next generation.

The dental team in schools

However, Elleven feels very passionate about the need to instill these practices in children from a

young age and as an extension of her job as an orthodontic specialist at Elleven, Dr Shivani Patel has been into several schools to talk about dental hygiene as part of their PSHE programme. The children respond positively to an outside expert and the class forum encourages interaction amongst the children. It also serves as an insight into dentistry as a possible career.

Education

Education starts at home and if parents supervise the ways their children brush their teeth, they will reap the benefits in later life. As a parent, you have a duty and the responsibility of reinforcing the importance of brushing, whilst limiting the amount of sugar in their children's diet. This is a subject Elleven feels strongly about and external input can often be very productive. **DH&T**



Sameer qualified from Birmingham University having been awarded the Centenary Prize and nominated for the Clinical Excellence Award. He continued his postgraduate education at Oxford University, whilst working in practice, before moving to Guy's Hospital, London. After his training, Sameer was awarded, by examination, Membership of the Faculty of Dental Surgery. He has also completed training in Implantology at the Eastman Hospital and is a member of the ITI. Sameer is an active committee member of the British Academy of Cosmetic Dentistry (BACD) allowing him to give you the perfect smile.