



Caring for Smiles

Oral care for older people
who need support:
a guide for families and friends

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About this booklet

This booklet has been developed for family members and close friends of people living in care homes who depend on carers to look after their oral health.

What is Caring for Smiles?

Caring for Smiles is a national programme that provides oral care training for care home staff to ensure they know how to look after the oral health of their residents. This requires regular assessment of an individual's mouth and the development of a care plan with details of his or her particular needs.

If the care home your relative/friend is living in is participating in the programme, some or all staff will have undergone oral care training and the care home will have a copy of *Caring for Smiles – Guide for Care Homes*, which contains information on how to assess and care for residents' oral health. This document can be downloaded from <http://hub.careinspectorate.com> (search for 'Caring for Smiles').



Why good oral health is important for older people

Many people are not fully aware of how important a healthy mouth is for older people, or think that poor oral health is inevitable as they grow older. Poor oral health, especially in frail older people, is increasingly being linked to a number of health problems such as pneumonia. There is also a link to poor nutrition, heart problems and diabetes.

Good day-to-day care is vital, not only to prevent oral disease and pain, but also to safeguard a person's overall health and, importantly, their quality of life and ability to eat and drink.

In the past, most care home residents would have had dentures. Many more people are now keeping their natural teeth into old age – this is a very positive outcome.

However, once a person becomes dependent on a carer to provide this aspect of personal care it is crucial that it is not overlooked.



Whether a resident has natural teeth, dentures, or no teeth, it is important that their oral health is given equal priority with all other aspects of their personal care.

Oral care for people with natural teeth

Toothbrushing is the only way to remove plaque, a sticky film of bacteria that forms on teeth. It causes gum disease and is a factor in tooth decay.

If someone is able to brush their own teeth, they should be encouraged to do so. Some people with physical disorders (for example, arthritis, stroke or Parkinson's disease) or cognitive impairment (for example, dementia) may depend on a carer to do this for them.

For someone who depends on another person to care for their natural teeth, a soft, small-headed toothbrush is often best. Only a pea-sized amount of fluoride toothpaste should be used.

For people who have difficulty spitting after brushing, a non-foaming type of toothpaste can be used.

Toothbrushes can be adapted to help people with dexterity problems. Electric toothbrushes can also be helpful for people who have difficulty gripping a normal toothbrush.

The Caring for Smiles team can offer more information if needed. (See back of this booklet for contact details.)



Diet and nutrition

Someone with mouth discomfort or pain will be at a higher risk of eating and drinking problems. Unexpected weight loss is often a result of oral problems. Many older people are also at risk of dehydration, which can have an impact on a person's oral health. See the section on dry mouth on page 11.

One of the usual oral health messages is to keep sugary foods and drinks to mealtimes, as a diet high in sugar causes tooth decay. It is the frequency, rather than the amount, of sugar intake that causes damage. However, many care home residents may need or prefer high-sugar foods and snacks. It is therefore important that oral hygiene is given high priority.

If you are bringing food gifts for your relative or friend, do keep in mind the possible risk to their health, especially if they still have some of their own teeth. For residents not at risk of undernutrition, it is always better to keep sugary foods and drinks to mealtimes.



Oral care for people with dentures

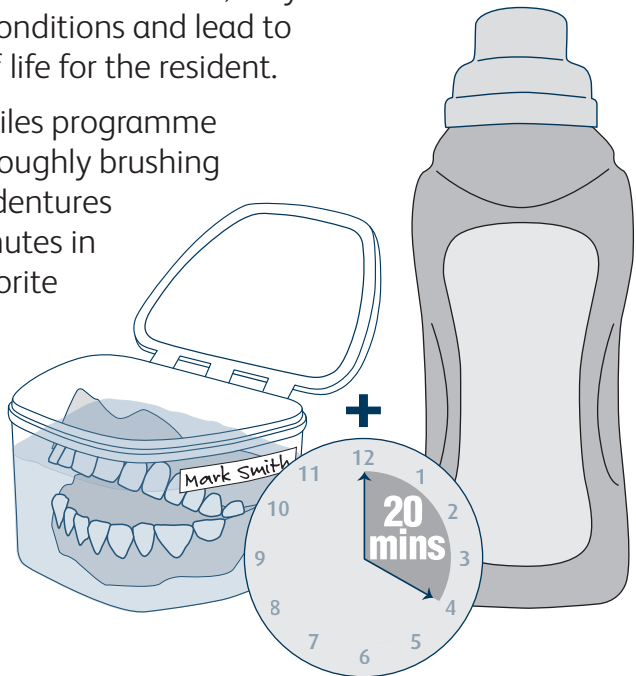
Many older people will wear full or partial dentures (commonly known as a plate). It is important that dentures are kept clean to keep the mouth free from infection. They should be removed and brushed well with a denture or regular toothbrush and non-perfumed soap or denture cream (normal toothpaste is too abrasive).

Denture-related infections are relatively common in older people who wear dentures. These can be caused by a number of factors such as:

- not removing dentures at night
- poorly fitting dentures
- poor oral hygiene
- some health conditions.

If these problems are not resolved, they can aggravate other conditions and lead to reduced quality of life for the resident.

The Caring for Smiles programme recommends thoroughly brushing then soaking the dentures for at least 20 minutes in a sodium hypochlorite solution.



Why is sodium hypochlorite recommended?

Commonly used effervescent cleaners are not as effective as sodium hypochlorite for eliminating denture-related infections. If a person is being treated for an infection, not removing the infection from the dentures means that it can be reintroduced.

Sodium hypochlorite is commonly used for disinfecting baby feeding bottles and the same manufacturer's instructions on dilution should be followed. It is available in liquid and tablet form.

This product should only be used on full plastic dentures, not on any dentures with metal parts. Care should be taken to remove any risk of a resident mistaking soaking solution for drinking water.

Dentures with metal parts

Dentures which have any metal parts should not be soaked in sodium hypochlorite. The Caring for Smiles programme recommends using chlorhexidine, available on prescription or over the counter from pharmacies. In rare cases people may be allergic to chlorhexidine, so always check for this.

Dentures should always be rinsed well in cold water before replacing in the mouth.

Denture marking

Losing or misplacing dentures is a common (and costly) problem in care homes. It is important, therefore, that a person's dentures are marked with their name or another way of identifying them. Some newer dentures may already be permanently marked with the person's name, but if not then your Caring for Smiles team will be able to advise on how this can be done safely.

When dentures don't fit any more

When their dentures become loose or ill-fitting, the older person should be referred to their dentist to be assessed for new dentures. Care should be taken not to dispose of current dentures. There may come a time when it is in the resident's best interests to stop wearing dentures. This may be because they can no longer tolerate them or the dentures no longer fit. Poorly fitting dentures can make eating difficult, which increases the risk of undernutrition.

It can be upsetting for some family members to see their relative without their dentures. **However, the best interests of the older person must take priority.** A dentist or doctor should be consulted if there are any concerns.

In some cases, a dentist can reline poorly fitting dentures, but this may only provide a temporary solution. Some older people will be able to tolerate the process of having new dentures made, but it can be very distressing for others.



Oral care for people with no natural teeth or dentures

Even when a person has no teeth and has stopped wearing dentures, it is still important that their oral soft tissues are cared for and kept clean. Dampened gauze around a gloved finger is recommended to clean a person's oral soft tissues.

Oral care for people with dementia

Having someone else brush your teeth can be difficult to get used to, and some people, especially those with dementia, may become distressed. Knowing the person, their preferences and how they respond is important for the carer to prevent a negative cycle of oral pain or discomfort leading to increased distress.

Every person with dementia is different and how they respond to care can be different from day to day. Sometimes family members can help as they will know the person and may be able to make suggestions, or even undertake the oral care themselves. It is important to do what is best for the resident.

Caring for Smiles – Guide for Care Homes suggests a number of strategies to help overcome care-related distress. It also includes a flowchart designed to help care homes and staff follow the guidelines set out in the Adults with Incapacity (Scotland) Act 2000. These can help when a resident continues to refuse oral care to the point where it may become damaging to their health. The care home should have a copy of this booklet, or it can be downloaded here: <http://hub.careinspectorate.com> (search for 'Caring for Smiles').

Oral care for people in palliative stages or at end of life

Paying attention to mouth care becomes even more crucial when a person is receiving palliative care or is nearing the end of life. To prevent or relieve mouth pain or discomfort, regular assessment, good care and a sensitive approach are essential:

- If the person can tolerate brushing, a very soft, small-headed toothbrush is recommended.
- Dentures must be kept scrupulously clean.
- For a person who is unconscious or can't tolerate a toothbrush, damp gauze around a gloved finger can be used.
- Saliva-replacement gels on lips can be used to stop lips becoming dry.



If the resident shows any signs of a painful mouth, mouth ulcers, redness of the soft tissues or oral thrush, a dentist should be consulted without delay.

Access to specialist palliative care advice is available from specialist palliative care teams, based in general hospitals and hospices.

Dry mouth

Dry mouth (xerostomia) is a very common, uncomfortable condition for older people. It is often a side effect of medication or treatment which affects the flow of saliva, causing the mouth to feel dry. Saliva keeps the mouth clean and healthy, and helps with eating and speaking. Having a dry mouth puts a person at a higher risk of tooth decay, and can make wearing dentures difficult.

What are the signs of dry mouth?

- Prickly or burning feeling in the mouth.
- Dry, cracked tongue.
- Thick, stringy saliva.
- Difficulty with eating and/or speaking.

What can help?

- Encourage frequent sips of water.
- Saliva replacements – a gel, a spray or mouthwash can be very effective.
- High-fluoride toothpaste, prescribed by a dentist, is helpful in preventing tooth decay.



Swallowing problems

Some older people will have eating, drinking or swallowing problems (dysphagia). For people with natural teeth, a small-headed toothbrush and a smear of non-foaming toothpaste should be used. For people with dentures, extra care should be taken with denture adhesives.

Dental treatment

Whether a person has natural teeth, dentures, or no teeth, they should still see a dentist at least once a year. If you would like more information on dental treatment options and what service might be most appropriate for your relative/friend, see the *Caring for Smiles – A guide to dental services, treatment charges and exemptions for care home residents* booklet.



Dental helpline in your area

For general information or advice on your local dental services, contact the dental helpline in your NHS Board area.

NHS Board	Helpline phone number	NHS Board	Helpline phone number
Ayrshire & Arran	01563 507950	Highland	0845 644 2271
Borders	0845 300 0930	Lanarkshire	08453 130130
Dumfries & Galloway	0845 602 6417	Lothian	0131 536 4800
Fife	01592 226555	Orkney	01856 875348
Forth Valley	0844 800 6886	Shetland	01856 888280
Grampian	0845 456 5990	Tayside	01382 596982
Greater Glasgow & Clyde	0141 232 9704	Western Isles	01851 707500
Highland (Argyll & Bute)	0845 833 2310		

Please note that these phone numbers are correct at summer 2015 but are subject to change.

If you have any questions regarding the Caring for Smiles programme, contact your local Caring for Smiles team: