

Arthritis: Considerations for Dental Care

OCCUPATIONAL THERAPY DEPARTMENT

There are more than 100 types of arthritis and related conditions. The following is a very brief summary of some Rheumatic Diseases along with considerations for dental care:

Osteoarthritis:

A degenerative type of arthritis characterized by deterioration of the articular cartilage - can lead to secondary inflammation - this is the most common type of arthritis. Large joints such as the hips and knees are commonly involved. Dental care may be difficult because of pain in the following joints: neck & back, hands (interphalangeal jts and CMC jt at base of thumb).

Rheumatoid Arthritis

A chronic, inflammatory type of arthritis. It is a systemic disease and may involve the lungs, blood vessels, heart, or eyes. Usually the small joints in the hands and feet are affected, large joints and the cervical spine can also be involved. Joints may be hot, swollen, and enlarged. Dental care may be difficult because of swelling and pain in the following joints: TMJ, elbows & shoulders, neck, hands (wrist & MCP jts).

Scleroderma

Common symptoms include gradual hardening, thickening, and tightening of the skin. Also experience pain and stiffness of the joints. It is very important for clients to regularly do exercises and stretches to maintain the ability to open the mouth. Dental care may be difficult because hard, tight skin may cause contractures of the hands (difficulty holding brush or floss) and around the mouth (difficulty opening mouth wide enough for dental care).

Temporal Arteritis

Also known as Cranial Arteritis or Giant Cell Arteritis. Closely associated with Polymyalgia Rheumatica. Affects people over 50, women more than men. 10% diagnosed at dentist when missed by GP or specialist. Chewing creates pain - pain is relieved when stops. Pain on palpating temporal artery. Temporal artery is prominent when quite inflamed.

Psoriatic Arthritis

30 to 50% have polyarthritis similar to Rheumatoid Arthritis, 30 to 50% have axial disease like hip and shoulder involvement, spondylitis and sacroillitis. Often DIP joints of fingers affected. Of particular interest to dentistry is proliferation of bone at the TMJ joint resulting in decreased motion and decreased ability to open jaw. In extreme cases, osteotomies are performed by dental surgeons to enhance jaw motion.

Lupus

An inflammatory rheumatic disease that effects joints, muscles, and other systems (including skin, kidneys, nervous system, lungs, heart). Blood problems - including anaemia, low white cell count, low platelet count, and increased tendency to form clots. Immune system problems - increase risk of infections. Joint involvement is similar to rheumatoid arthritis - see above.

Sjogrens Syndrome

Frequently occurs with Rheumatoid arthritis, Lupus, and Scleroderma. An autoimmune disease causing drying of body tissues, primarily of the eyes and mouth. May also experience inflamed, achy joints, muscle pain, and weakness. Produce much less saliva than normal therefore fewer antibacterial enzymes are produced. Consequently, teeth may develop cavities more easily, particularly at the gumline. Early Rx: Salogen tablets

Ankylosing Spondylitis

An inflammatory arthritis typically affecting the spine - over time, the vertebrae may fuse together resulting in decreased movement of the spine, including the neck. The hips, shoulders, knees, and ankles may also be involved. Dental care may be difficult because of pain and/or limited ROM of neck and spine.

Arthritis in Children

The above mentioned types of arthritis can also affect children. The most common type of arthritis in children is Juvenile Rheumatoid Arthritis. TMJ involvement can cause pain, stiffness and altered growth - the jaw may not develop properly and surgery is sometimes indicated. Children may have difficulty brushing and flossing due to joint pain.

Other Considerations

Many medications for rheumatic conditions may have side effects including dry mouth, mouth sores, nausea, anaemia. Gold treatment can result in 'black mouth' (discolouration of mucosal tissue). Drugs like penicillamine, methotrexate and cyclosporin can cause gum hypertrophy. Prolonged use of oral steroids can lead to increased cavities, poor healing. Patient may need antibiotics before dental work.

Recommendations

Dry Mouth

See handout: Dental Care in Scleroderma – www.scleroderma.org

Fatigue

Shorter appt times, schedule appt during part of the day when client usually feels the best.

Grips

Bigger handles, friction for better grip, altered handles on toothbrushes for easier grip. Electric toothbrushes. Water Pik. Floss holders, toothpicks....again with bigger grips

Positioning

Small neck pillow - may need to be repositioned throughout appt, small pillow or rolled towel for lumbar support. If client has neck involvement, avoid twisting neck to side. (If they use a soft neck collar, encourage them to wear it during the appt to make both of you aware of keeping neck in neutral position). Make sure chair is at easiest height for client to get on and off low seats can be very difficult for people to get off if they have arthritis in their back or lower extremities - also consider having a raised cushion for the waiting area.

Breaks

Provide frequent opportunity to change positions (e.g., encourage client to close mouth each time you are changing tool, or reaching for something). Pre-arrange a “signal” the client can give you if they need to close their mouth or change position.