Neurologic Diseases in Special Care Patients



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KEYWORDS

- Alzheimer disease
 Cerebrovascular accidents
 Stroke
 Parkinson disease
- Multiple sclerosis Neurologic conditions Dental management
- Medically complex

KEY POINTS

- Neurologic diseases can have a major impact on functional capacity.
- Patients with neurologic disease require individualized management considerations depending on the extent of impairment.
- This article reviews 4 of the more common and significant neurologic diseases (Alzheimer disease, cerebrovascular accident/stroke, multiple sclerosis, and Parkinson disease) that are likely to present to a dental office and provides suggestions on the dental management of patients with these conditions.

OVERVIEW

Neurologic diseases can have a major impact on functional capacity. Patients with neurologic disease require individualized management considerations depending on the extent of impairment. This article reviews 4 of the more common and significant neurologic diseases (Alzheimer disease, cerebrovascular accident/stroke, multiple sclerosis, and Parkinson disease) that are likely to present to a dental office and provides suggestions on the dental management of patients with these conditions.

General Considerations for All Patients with Neurologic Diseases

- Determine stability and extent of disease
- Communicate in presence of family or caregiver if patient has cognitive changes
 Determine who is responsible for informed consent
- Determine impact of disease on activities of daily living (ADLs) (Box 1).
 - Performing oral hygiene
- Keep patient free of acute disease

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Box 1

Activities of daily living

(Basic self-care activities essential for independent living)

- Ambulating
- Transferring
 - o Ability to get in and out of bed, chair, or on and off a toilet
- Personal hygiene
 - o Bathing, grooming, tooth brushing
- Bladder and bowel management
- Dressing
- Self-feeding

Adapted from Longtermcare.gov. Glossary - long-term care information. 2015. Available at: http://longtermcare.gov/the-basics/glossary/#Activities_of_Daily_Living. Accessed November 8, 2015.

- Maintain oral function
- Retain esthetics
- Modify treatment plans to allow for physical imitations
- Provide aggressive prevention plan
 - o Enable patient to participate in his or her oral health
 - May require involvement of family member or caregiver
 - Topical fluorides, more frequent recare appointments, modification of oral hygiene techniques

Clinical Considerations for Patients with Neurologic Diseases

- Modifications dependent on amount of physical impairment
- Moderate/severe
 - Short appointments (30–45 minutes)
 - Mid-morning/early afternoon appointments
 - Time with medications taken to control symptoms
- Assess mobility impairment
 - Assistance patient may need getting to and from operatory
 - o Assistance in getting in and out of dental chair
 - Any support needed to maintain patient in upright position in chair
- Patients in wheelchairs
 - Determine if patient can transfer from wheel chair to dental chair
 - If yes, then assist as needed
 - If no, treat in wheelchair
- · Deficits in protective airway reflexes
 - Semi-supine position
 - 45°
 - o Careful suctioning
 - Use rubber dam
 - Judicious use of ultrasonic scalers and air-water syringes
- Difficulty/fatigue keeping mouth open
 - Mouth prop
 - Bite block
 - o Give patient breaks as needed

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