

Diabetes - Diabolical Impact on Your Teeth

Diabetes Australia estimates that 1.2 Million Ozzies are Diabetic - but about half of us don't know it!

Diabetes is a disease that results in too much glucose in the blood because the body either doesn't produce enough insulin - a hormone needed for glucose to enter the cells and convert to energy - or doesn't use the insulin it does have, properly.

Type 1 Diabetes accounts for 10-15 per cent of diagnoses - mostly affecting young people.

Type 2 Diabetes is one of the fastest growing chronic diseases in Oz.

Diabetes is Australia's sixth biggest killer leading to heart attacks, strokes, kidney failure, amputations and blindness.

DIABETES HAS A DIABOLICAL IMPACT ON WHAT, IN DENTAL TERMS, IS DESCRIBED AS THE 'ORAL ENVIRONMENT' - YOUR TEETH AND MOUTH.

Urgent: In fact, dentists can pick up symptoms in your mouth that might indicate you have diabetes - because we can recognize the characteristics of a diabetic - there are severe changes that take place in the mouth that the dentist can pick up on, e.g.-

Those disorders that are mainly related to excessive loss of fluids due to urination and the body's altered response to fighting infections and vascular (arteries and veins) changes.

NOTHING TO SALIVATE ABOUT: -

A loss of fluid from the body - and changes in the blood supply to salivary glands causes a decrease in the amount of saliva present in the mouth. This can be devastating to the mouth as saliva is a fabulous (or should be) substance. It performs many important functions for us - for example, saliva contains nutrients for the teeth and gums; it contains anti-bacterial matter to protect us - and saliva lubricates and protects our oral environment.

Poor diabetes management and the presence of calculus - that yucky mixture of food, saliva and bacteria that sets hard, like plaster and sticks to your teeth - increases the severity of periodontal disease, with diabetic patients having more severe cases than people who are not diabetic. Periodontal disease was also found to occur at a younger age in diabetic patients.

The oral complications of uncontrolled diabetes can include but are not limited to:

- Infection
- Poor healing
- Xerostomia - or dry mouth
- Candidiasis - thrush of the mouth
- Increased risk of caries (holes in teeth)
- Gingivitis - gum disease
- Periodontal disease - gum and bone disease
- Abscesses - infection in the bone due to the tooth infection
- Burning mouth syndrome

IT IS ESSENTIAL THAT A HOLISTIC APPROACH BE INVOLVED IN THE DETECTION AND MANAGEMENT AND CONTROL OF DIABETES.

- To avoid or control the above complications, a life-long management program needs to be developed on an individual basis.
- The patient and program must be flexible to cope with any changes in the disease process.
- The goals for a typical patient will be as follows: -
- Continually work with your medical practitioner to maintain normal blood glucose levels,
- Exercise frequently,
- Maintain normal body weight,
- WORK WITH YOUR DENTIST/HYGIENIST TO REMOVE ALL CALCULUS AND PLAQUE ON A REGULAR BASIS,
- BRUSH PROPERLY AND FLOSS DAILY,
- HAVE REGULAR EXAMINATIONS BY YOUR DENTIST EVERY SIX MONTHS - SO THAT ANY PROBLEMS CAN BE DETECTED AT AN EARLY STAGE.

THE REALITY IS, THE EARLIER THE PREVENTATIVE PROGRAM IS PUT INTO ACTION, THE MORE SUCCESSFUL IT WILL BE - SO AS ALWAYS SEE YOUR DENTIST REGULARLY.