

Dental Health

The health of the teeth and gums is related to the health of the whole person, just as the well-being of a person relates to the health of the entire community. Because of this, the usual separation between dentistry and general health care is neither reasonable nor healthy.

David Werner, in Dickson, M. (updated 2006). *Where there is no dentist: A book of methods, aids, and ideas for instructors at the village level*. Berkeley, CA: Hesperian Foundation.

Bob's Story

One day a week, Bob McGonagle walks past the drug dealers and prostitutes, making his way to the McMicken Dental Center in Cincinnati, Ohio. He unlocks the door, walks in, pulls out the bucket, mop, and cleansers, and begins to clean. With great pride and careful attention to detail, Bob cleans the dental clinic where he once received services. Twice a year, he strips and waxes the floor so that the patients who come in feel that they are worth something.

"I walked around for two years putting my hand over my mouth when I talked because my teeth were such a mess," Bob remembers. Then he met Judith Allen and the staff at McMicken Dental Center. "Dr. Allen got me new teeth," Bob says, smiling to show them off.

Bob is articulate and engaging. His energy is effusive. "I've traveled all over the country. I was a businessman. I wore \$500 suits." Now, as Bob tells his story, openly and with great self-awareness, he focuses more on kindness and compassion than on jet-setting and expensive wardrobes.

Somewhere along the way, alcohol began to guide Bob's decisions. He eventually became homeless, and by 1997, he stumbled into the Salvation Army. Bob describes himself as a "severe alcoholic...beyond chronic, just nuts." He pauses, then continues, "I've been in zillions of jails. In 1999, they were chasing me for my tenth DUI."

After his last arrest, he spent four months in jail, a long fall from his successful career. This time, he stood in front of Judge Mattingly and said, "Put me in a lock-down treatment center." The judge obliged and sent him to Talbert House, part of the Department of Corrections.

Ninety days later, after successfully completing the program, Bob again stood in front of Judge Mattingly, who said, "You've done exactly what you said you would do. Now get out of my courtroom. I don't ever want to see you again."

"The people who helped me were the hand of God in my life at that time," Bob recalls. He felt like he had been given a new life. He began to work as the handyman for an Episcopal church in Cincinnati. The church sent him to a master gardener's course, and now Bob takes as much pride in creating beautiful landscapes with plants as he does in cleaning the dental clinic each week. Bob also began visiting the jail every Wednesday evening to do outreach for Alcoholics Anonymous. He is an Inter-group Representative for AA.

Bob is always looking for more ways to "get out of self and serve others, because once you're comfortable in your own skin, you can do that," Bob says with a smile. He's now a consumer advocate and board member for the Cincinnati Health Network. "This body has been gifted with the ability to breathe and to help," Bob says, "so I give it away every day."

Bob shakes my hand with the firm shake of a businessman, smiles an infectious smile, then turns and walks away.

Interview by Jeff Olivet. Originally published in Olivet, J. & Horn, A. (2005). Every success story is a great story. Nashville, TN: National Health Care for the Homeless Council.

Why Dental Care Matters to People Experiencing Homelessness



Tooth pain is the number one reason for hospital emergency room visits in the greater Cincinnati area, reports Judith Allen, D.M.D., clinical director of the McMicken Dental Center for the Homeless in Cincinnati, Ohio. “Most ERs just dispense pain pills and tell patients to find a dentist elsewhere,” she says. “Limited access to free or low-cost dental care forces many homeless people to fend for themselves. Some get desperate and try to remove their own teeth, leaving root tips that eventually abscess and increase their pain,” says Dr. Allen.

Dental pain can be excruciating. It interrupts sleep, makes people irritable, and interferes with regular attendance and performance at work or school. “Homeless children, who experience higher levels of dental disease than other children, often do poorly in school for this reason,” says Dr. Allen. “People with rotten or missing teeth look unhealthy, uneducated, unintelligent, and unreliable to employers. They often have trouble eating and avoid social interactions, exacerbating the isolation of homelessness.”

More advanced disease

There are more serious oral health problems among people who are homeless than in those with stable housing, according to Health Care for the Homeless (HCH) providers. Among the most common problems are profound dental decay requiring extractions or root canals, periodontal (gum) disease, missing teeth, and dental problems associated with medical conditions, according to Amalia Torrez, C.D.A., manager of the HCH dental clinic in Albuquerque, New Mexico.

Rampant dental cavities

“It is not unusual to see young homeless people in their twenties who require extraction of all 28–32 teeth,” observes Dr. Allen. Use of alcohol and illicit drugs such as cocaine or methamphetamine is common among youth who are homeless. These drugs dull the perception of pain, interfere with nutrition, and can cause dry mouth. All of these conditions can have a devastating effect on oral health.

Teeth can decay easily at the gumline and even if the decay is not too deep, infection of the nerve can occur, which requires root canal therapy to salvage the tooth. Gumline cavities are the most devastating because they are the least fixable. Without early treatment, the tooth can be lost. Regular dental cleaning and checkups, the main ways to prevent these pathologies, are not available to many people experiencing homelessness.

Periodontal disease

This type of dental disease is the leading cause of tooth loss, and may play an important role in heart disease, uncontrolled diabetes, low birth weight, and premature births. Smoking exacerbates periodontal disease, and over two-thirds of people who are homeless smoke.

Oral cancer

Heavy use of tobacco by people who are homeless increases their risk for oral cancer. Use of smokeless tobacco is particularly toxic because it stays in the mouth for hours at a time. “Dips” contain additives (slate, sand) that can exacerbate cell changes in the mouth. Some also contain sugar, which will decay teeth.

Trauma

Providers frequently see teeth damaged due to assault in people who are homeless. “One woman who slept in doorways was kicked by kids while she slept, resulting in a fractured jaw,” recalls Dr. Allen. “When the swelling didn’t subside after three weeks, she went to a city clinic, where she was told she had an abscess, given antibiotics, and asked to come back, but did not return. Unable to eat, she finally came to the HCH clinic, where providers found a fractured jaw and maggots living in her cheek. She required extraction of a tooth and hospitalization to clean out the wound and stabilize her fracture.”

Co-Morbidities

Diabetes and HIV/AIDS are among the chronic conditions frequently seen in patients experiencing homelessness. Both of these diseases have oral manifestations. People with diabetes do not heal well and are three times more likely to have periodontal disease than patients with normal blood sugar levels. Reports indicate that uncontrolled blood sugar has a direct relationship to the patient’s periodontal health.

There are approximately 30 different oral problems that can arise with HIV/AIDS. Candidiasis (oral thrush, or yeast infection) is one of those problems. Immunocompromised patients who receive chemotherapy can also suffer from thrush.

Certain medications, taken for chronic conditions, can exacerbate existing dental disease. For example, Dilantin (phenytoin), used to treat seizure disorders, can cause gingival hyperplasia, an overgrowth of the gum. In addition, most psychotropic drugs cause xerostomia, which is dryness in the mouth that can lead to dental problems.

Many cardiac medications can also cause this overgrowth. Several medications can cause dry mouth. Dry mouth significantly reduces the flow of saliva. Saliva acts as a lubricant buffers acids in the mouth. Without a proper amount, decay progresses rapidly.



and

Photo by Judith Allen © 2007

Self-Esteem

Many times, eliminating dental disease involves removing someone’s teeth. But promoting oral health and well-being involves much more than eliminating disease. It involves giving the patient a fully functioning dentition. Providers of homeless health care should consider the effects of dental problems on how people present to others.

Amalia Torrez recalls a patient experiencing homelessness with heart and lung problems who came to the HCH clinic for smoking-cessation services. “Toothless except for a couple of broken teeth in his lower jaw, he initially responded to questions in a gruff manner and seemed extremely embarrassed and self-conscious. When asked what would most improve his life, he answered, ‘Dentures.’ Getting dentures dramatically improved his self-confidence and attitude toward his health. He has since cut down on smoking, communicates easily with others, and can eat nuts, the food he missed most when he didn’t have teeth.”

Cavity Killer

If you tend to get cavities, you should be aware that gum sweetened with xylitol can help prevent tooth decay. Studies show that people who chewed on gum with xylitol after meals had far fewer cavity-causing bacteria in their mouths five minutes afterward than people who chewed gum sweetened with sorbitol or people who did not chew gum at all. Check the label on your favorite gum to see if it contains this cavity-fighting ingredient. What gums have the most xylitol? Carefree Koolers has the most with 60 mg per piece, but Dentyne Ice[®], Trident Whitening[®], and Altoids[®] all have 10 mgs per piece.

Adapted from: Why dental care matters to homeless people. (2003). *Healing Hands*, 7(3).

How You Can Help Alleviate Oral Health Problems

When you meet with an individual or family experiencing homelessness:

- Observe for missing or decayed teeth.
- Observe the person's mouth for bleeding or swollen gums, bad breath, or lesions.
- Offer a toothbrush, toothpaste, and/or dental floss. Encourage regular use.
- Provide information about the importance of oral health.
- Ask, "Are you able to see a dentist?" If the person is unable, or more than a year elapsed since the last visit, try to help the person get an oral health exam. There are resources available in most communities for those people with little or no money. Find out what those resources are and give out that information. Check with your local health department.
- Recognize that people with trauma histories may be reluctant or have difficulty receiving dental care due to the experience of someone leaning over them, or into them, and thus feeling trapped. Also, having instruments inserted in one's mouth can feel very intrusive and may exacerbate pre-existing trauma responses such as anxiety, helplessness, feeling overwhelmed, anger, rage, or needing to flee. Paying attention to these issues can go a long way in building trust.

DENTAL EMERGENCIES

Excessive bleeding after extractions:

- Place a wet tea bag with gauze wrapped around it in the bleeding area. Have the person bite hard for 20 minutes. Check the area and reapply for another 20 minutes if the bleeding continues. If it still does not stop, get to a dentist or a hospital emergency room.

Knocked out tooth:

- **Adult tooth**—pick up the tooth by its root and attempt to reinsert it in the socket if you can. Otherwise, place the tooth in milk and take the tooth and the person to the dentist.
- **Baby tooth**—do not try to reinsert the tooth. Check the person's lips or tongue for bleeding...apply pressure to stop it.

Lost or broken filling:

- Rinse the mouth and remove any food. Then, place wax (or even sugarless gum) in the hole and get to a dentist.

Swelling, fever, or excessive pain:

Get to a dentist or hospital emergency room.