

**The Dental Professional's Approach to
Addictive Behavior and Understanding Chemical Dependency:
Developing a Treatment Program for the Dental Setting**

Sponsored by:



Noel Kelsch RDHAP n.kelsch@sbcglobal.net

Eight Most Common Addictions and Dental Considerations	
Anorexia Nervosa	
Dental	Dental-caries, dry mouth, periodontal disease due to osteoporosis, loose teeth, oral manifestations due to malnutrition
Physical, mental and social	Extreme thinness, wears loose clothing, Pale, dry skin, may wear heavy make up, Hair thinning, falling out, Evidence of vomiting, diet pills, laxative use or diuretics, Feels cold, Noticeable discomfort about food-will not eat in front of others, only eats diet foods, guilt or shame about eating, fainting spells, dizziness, headaches, depression, irritability, mood swings
Treatment Plan	Recommendations-MI paste, Perio Balance, Fluoride mouth rinse, multivitamin, calcium with vitamin D
Bulimia	
Dental	Reddened or chapped lips (uses lotions and chap sticks) Irritated pharyngeal wall, irritated esophagus, mandibular posterior and anterior lingual teeth are eroded, tooth translucency and brittleness, sensitivity to temperature change, salivary glands swell (parotid) causing a squarish jaw appearance, caries (due to diet, purging and mint and gum use) callusing of first two fingers of dominant hand, mandibular molar amalgam expansion
Physical, mental and social	Laxative, diuretic, and diet pill abuse, cracked dry skin Broken blood vessels, binge eating, secretive eating, frequent dieting, frequent visits to bathroom after eating, complains of sore throat, involuntary vomit response after eating, weight fluctuations Self deprecation after eating, low self worth, severe self criticism
Treatment plan	Recommendations-Rinse with sodium bicarbonate and water, MI Paste, fluoride rinse regimen
Compulsive Eating	
Dental	Caries due to high carbohydrate diet, periodontal disease due to poor nutrition
Physical, mental and social	Binge eating, obsessed with diet and weight (recipes, restaurants, and different diets), afraid cannot stop bingeing voluntarily, Isolation (not attending activities due to weight), base failures on weight, eat little in public, but maintain high weight, believe they will be a better person if thin, weight is focus of life
Treatment plan	Recommendations-MI paste, Fluoride varnish
Compulsive Gambling	
Dental	Bruxism, periodontal disease due to poor diet, due to fatigue and lack of home care.
Physical, mental and social	High blood pressure, angina, liver disease, high heart rate, alcohol abuse Requests expensive dental work and then cannot pay for final placement, chronic cancellations when patient has an outstanding balance
Treatment plan	Recommendations-See physician for physical

Computer Addiction	
Dental	Poor hygiene, fatigue, nutritional deficiencies, periodontal disease, poor compliance of oral hygiene.
Physical, mental and social	Does not make or keep recall appointments, wrist issues,
Treatment plan	Recommendations-Multivitamin, specific time for oral care, chew gum and mints with Xylitol
Work Addiction	
Dental	Oral health fluctuates according to work schedule, does not feel mouth is as important as job responsibilities
Physical, mental and social	Chronic cancellations Depression and loneliness Fatigue
Treatment plan	Recommendations-Set boundary for cancellations, keep dental home care at the office
Exercise Addiction	
Dental	Maxillary anterior dryness of the tissue, Caries or tooth sensitivity due to juices, clenching while exercising, or damage from exercise equipment
Physical, mental and social	Frequent cancellations of appointments due to exercising Frequent muscle, ligament or bone injuries
Treatment plan	Recommendations-Use dry mouth products before running, no juices/drink water, wear mouth guard before exercising
Sexual Addiction	
Dental	Bruising on hard and soft palate, dislocation of mandible, lesions due to sexually transmitted diseases, broken or chipped teeth
Physical, mental and social	Multiple extramarital affairs, excessive dating through personal ads, unable to form healthy interpersonal relationships, unable to engage in healthy interpersonal relationships, ruins personal relationships, lives a fantasy life
Treatment plan	Recommendations-See physician for physical, HPV eval and education

Five Most Common Miss Used Drugs and Dental Considerations	
Alcohol: Depressant, Metabolized in the liver	
Signs	Lethargic, slow to respond, slurred speech, odor on breath and/or clothes, inability to respond to commands, psychomotor impairment
Dental Considerations	Increased periodontal disease, poor wound healing chronic orofacial infections, iatrogenic injury, and an increased incidence of oral cancer.
Precautions	Hepatic damage may occur and may affect the patient's ability to metabolized medications. Medications that are metabolized by the liver such as acetaminophen. No products containing alcohol should be used or prescribed. Patients who present in the dental office and are intoxicated should not be provided dental treatment. The major concern with the intoxicated patient is there inability to follow directions, chance of being aggressive or combative in the chair and inability to follow post operative directions. Since alcohol a depressant any medication that causes respiratory depression should be prescribed or administered with precaution or not at all.
Marijuana: hallucinogen or perturbator, Metabolized in the liver	
Signs	May not exhibit any sign. Some exhibit: Blood shot eyes, lethargic, slow to respond, slurred speech, memory impairment, inability to respond to commands, odor on breath or clothes
Dental considerations	Green staining, may be removed with common peroxide. Some studies have shown an increase in periodontal disease and tooth loss with smoking marijuana.

Precautions	The major concern with intoxicated patients is the inability to follow directions in the chair slow reaction time and inability to follow post operative directions.
Opiates: Depressant, Metabolized in the liver	
Signs	Pin point pupils, lethargic, slow to respond, slurred speech, xerostomia, glazed eyes, inability to respond to commands.
Dental Considerations	Multiple carious lesions, particularly class V lesions as a result of xerostomia, high intake of sweets and lack of daily oral hygiene.
Precautions	Patients recovering from heroin or any opiate addiction should not be given any kind of opiate analgesic, with it is for sedation or as a postoperative analgesic because of the increased chance of relapse. Nonsteroidal anti-inflammatories should be used to control any postoperative discomfort. Users and recovering users have a higher rate or subacute bacterial endocarditis, HIV and hepatitis. Consult with patients MD before starting treatment or administering anesthesia
Methamphetamine: Stimulant, Metabolized in the liver	
Signs	Dilated pupils, rapid speech, tremendous anxiety, jittery irritable behavior, unable to sit still, twitching, difficult to anesthetize
Dental Considerations	Increased periodontal disease, rampant caries, leading to eventual tooth loss
Precautions	Vasoconstrictor contraindicated if has been used within 24 hours. Confirm with MD the safety of administration. Nonsteroidal anti-inflammatories should be used to control any postoperative discomfort. Users and recovering users have a higher rate or subacute bacterial endocarditis, HIV and hepatitis. Consult with patients MD before starting treatment or administering anesthesia
Cocaine: Stimulant, Metabolized in the liver	
Signs	Dilated pupils, tremors, jitteriness, irritability, talkative, increased blood pressure, short abrupt speech pattern
Dental Considerations	Xerostomia, chapped lips, increased caries and gingivitis
Precautions	NO vasoconstrictor for fear of exacerbating sympathetic response. Can cause cardiac arrhythmias and hypertensive crisis.

Changes I want to make from my chair:

