



Hygiene Needs: Oral and Denture Care

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After reading the newsletter, the home health aide should be able to:

1. Discuss the importance of thorough and regular oral care for clients.
2. Describe how to provide oral care for clients with natural teeth and dentures.
3. List three signs of oral problems that should be reported to the nurse.

As Taryn, the home health aide, provided oral care for Mrs. Bell, she noticed some white patches inside her mouth that would not wipe off. Taryn notified the nurse, and some tests were ordered. Mrs. Bell had a fungal infection in her mouth, and tests showed that her immune system was weakened. Due to Taryn's good care and observations, Mrs. Bell was able to get appropriate treatment before a more serious infection developed.

This newsletter will discuss oral care needed by clients, including the consequences of poor oral hygiene, factors affecting the mouth and teeth, and care of clients with natural teeth and dentures. Signs of oral problems that should be reported will also be covered.

The Importance of Oral Care

Oral care is an extremely important, yet often overlooked, part of client care. We all know that poor oral hygiene can lead to tooth and gum problems, such as cavities and gingivitis, a gum infection. But did you know that it may also cause serious systemic illness, possibly leading to death? Poor oral hygiene promotes the growth of bacteria in the mouth, and causes inflammation. Pneumonia can result when aspiration of the bacteria occurs. The inflammation caused by gum disease can cause inflammation in other body areas, and is linked to atherosclerosis, heart disease, stroke, and worsening diabetes. This risk can be reduced by providing regular and effective oral care. The results of a number of



studies indicate that effective oral hygiene can significantly reduce the rates of hospital-acquired pneumonia and ventilator-associated pneumonia in hospitalized persons.

Poor oral hygiene can affect the client's ability to eat, due to pain from decayed teeth and gingivitis, an infection of the gums. Malnutrition and weight loss can result. Lack of oral care can also affect the client's self-esteem. A food-caked mouth and bad breath don't promote confidence or the desire to interact with others.

The Mouth and Teeth

Adults normally have 32 permanent teeth, whose purpose is to cut, grind and crush food into small pieces. This is where the process of digestion begins, which is the breakdown of foods into nutrients that can be absorbed by the body. Saliva contains chemicals that help the food to break down, and moistens the food before swallowing.



While these nutrients and moisture in the mouth are helpful, they also promote the development of plaque. This is a slimy substance, also called biofilm, that contains bacteria and collects on the surfaces of the teeth and gums throughout the day. If plaque is not removed regularly, disease-causing bacteria can grow rapidly, increasing the risk of infection. Plaque can also produce acids that cause tooth decay, and can harden into crusty deposits called tartar. Plaque begins forming within just several hours of the last

brushing, and can harden into tartar within 48 hours. This is why it is important to provide thorough oral care at least every 12 hours. Some clients, such as those who cannot eat or have dry mouth, may require oral care every 2 hours.

Providing Oral Care

At a minimum, oral care should be provided to clients who cannot perform it themselves twice daily, in the morning and again in the evening. Personal protective equipment must always be used when providing oral care. Gloves are always required. If splashing or spraying are likely, a gown and face shield (or mask/goggles) should also be used.

For oral care, the client may be sitting in a chair or have the head of the bed raised. After washing hands and donning gloves, place a towel over the client's chest. If the client cannot hold his/her mouth open, a clean, damp washcloth can be rolled and the edge inserted between the teeth, toward the back of the jaw. For clients with natural teeth, moisten a soft toothbrush with water and apply a small amount of toothpaste. Brush all tooth surfaces in a circular motion from the gum line, holding the brush at a 45° angle to the sides of the teeth. Brushing should continue for two minutes. Don't forget to brush the tongue, too, as it can hold germs and pieces of food. Have the client rinse the mouth with water and spit into the emesis basin. The client may then rinse and spit using an antibacterial mouthwash. Mouthwash without alcohol is preferred, as alcohol can be drying to oral tissues. If possible, flossing should also be included in oral care. Hold a 12-inch piece of floss between your index fingers. Slide it gently between the teeth, stopping just under the gum line. Be careful not to cause discomfort by pushing it down into the gums.



Check with the nurse to determine if there are clients who should not receive the usual oral care or who have risk factors for choking. Do not use mouthwash, water or toothpaste with clients who:

- have swallowing problems
- must use thickened liquids
- cannot or will not spit
- are drowsy, unconscious or uncooperative

For these clients, moisten a toothbrush with water or mouthwash to brush teeth. Then wipe the mouth using a sponge swab, such as a Toothette®. These swabs should not be used in place of a toothbrush, as they do not remove the biofilm from teeth.

Clients who are edentulous (having no natural teeth) and use dentures will need denture care. Like natural teeth, dentures develop a bacterial biofilm

that must be removed. Begin care by removing the dentures. If the client cannot remove them, grasp the lower denture firmly and pull up to release it.



Pull down to remove the upper denture. Dentures are very slippery and fragile, so be careful when handling them. They break easily when dropped, and are expensive to replace. Put the dentures in an emesis basin lined with paper towels. Also, place a washcloth in the sink to protect the dentures in case they are dropped. Brush the dentures using a toothbrush and non-abrasive denture cleaner, removing any denture adhesive. Avoid using regular toothpaste, as it may be more abrasive. This may cause minor surface damage on the dentures that can cause build-up of bacteria. After cleaning, the dentures should be rinsed well with cool water. Never use hot water with dentures, since it may damage them. Clean the client's mouth and gums using a moistened, soft toothbrush or sponge swab, followed by rinsing with water and mouthwash. If denture adhesive is used, apply several small amounts to the contact surfaces of the dentures and place them firmly back into the mouth. Denture adhesives containing zinc should be avoided, due to concerns about toxicity. Dentures should be removed at bedtime. Wearing them continuously may increase the risk of denture stomatitis, an inflammation of the gum tissue. When not in the mouth, dentures must be stored covered with water to prevent warping.

As you provide oral care, observe the condition of the client's mouth. Notify the nurse if the client has any problems or complaints with the mouth or teeth, including:

- **oral pain or discomfort:** Pain may be caused by poorly-fitting dentures or conditions such as decaying teeth, gingivitis, mouth ulcers, infection, burns, and even cancer.
- **difficulty eating:** Problems such as tooth loss, pain, mouth sores or other oral issues can affect the client's ability to eat. This may result in weight loss and lack of nutrients, since the client may eat less and may avoid healthy food choices, such as fresh fruits and vegetables, that may be more difficult to chew.
- **abnormalities:** Watch for and report white patches on the tongue and inside cheeks, which may indicate a fungal infection. Also report problems such as dry mouth, bad breath, ulcers/sores, poorly-fitting dentures and drainage or bleeding from gums.

Thorough and regular oral care promotes the client's nutrition and self-esteem, and helps to prevent dental disease and serious systemic illness.



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NAME: _____ DATE: _____ UNIT: _____

Directions: Place the letter of the one best answer in the space provided.

- ____ 1. Poor oral hygiene can lead to:
 - A. gum infection
 - B. systemic illness
 - C. death
 - D. all of the above

- ____ 2. Which of the following is most likely to be caused by poor oral hygiene?
 - A. meningitis
 - B. pneumonia
 - C. cellulitis in the leg
 - D. hepatitis

- ____ 3. The process of digestion begins in the:
 - A. stomach
 - B. small intestine
 - C. mouth
 - D. esophagus

- ____ 4. Plaque is a:
 - A. slimy layer of bacteria on the teeth and gums
 - B. hard, crusty deposit on teeth from food build-up
 - C. stain on the teeth from dark beverages, such as coffee
 - D. normal part of the tooth structure that provides strength and support

- ____ 5. Mr. Walker, a 76-year old client, is edentulous. This means that he has:
 - A. no natural teeth
 - B. difficulty opening his mouth
 - C. a gum infection
 - D. difficulty eating due to mouth pain

- _____ 6. Toothpaste, water and mouthwash (other than for moistening the toothbrush) should not be used for which of the following clients?
- A. Mr. R, who has gingivitis
 - B. Mrs. A, who has diabetes
 - C. Mr. Z, who must have thickened liquids
 - D. Mrs. P, who has many cavities in her teeth
- _____ 7. A client's natural teeth should be brushed for:
- A. 30 seconds
 - B. 1 minute
 - C. 2 minutes
 - D. 5 minutes
- _____ 8. Natural teeth develop a bacterial biofilm, but dentures do not.
- A. True
 - B. False
- _____ 9. Denture care should include which of the following actions?
- A. use a denture adhesive that contains zinc
 - B. clean dentures using a sponge swab, such as a Toothette®
 - C. leave dentures in the mouth at all times to prevent damage or warping
 - D. after cleaning, rinse the dentures well in cool water
- _____ 10. White patches on the tongue are a common sign of:
- A. fungal infection
 - B. gingivitis
 - C. tooth decay
 - D. poorly-fitting dentures

