



## Oral Health Messages

### ADULTS 20 to 54 YEARS OLD

A basic guide to help you care for your oral health:

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#### More resources

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**N**o matter what our age, prevention is the key to maintaining good oral health. Knowing what particular dental problems you are at risk for developing and how you can reduce those risks will help you decide the most appropriate means to prevent dental problems. Susceptibility to various dental problems change as people age. Each person's risk factors are unique. A thorough understanding of what they are is necessary to adequately reduce those risks.

### Good Nutrition and Oral Health

A balanced, nutritious diet is essential to healthy living. Poor nutrition can lead to many different health issues including oral health problems such as cavities and gum disease, a major contributor to tooth loss in older adults. In fact, studies show that people who have lost teeth or wear dentures don't eat as many fruits or vegetables and tend to have less nutritious diets overall.

Your mouth is your body's initial point of contact with the nutrients you consume. What you eat impacts not only your general health but also the health of your teeth and gums. Your mouth is the body's initial point of contact with the nutrients you consume. Certain foods can put you at risk for cavities and other oral health problems. The first signs of poor nutrition often show up in your oral health.

According to **My Plate**, a website from the Center for Nutrition Policy and Promotion, an agency of U.S. Department of Agriculture, a balanced diet should include:

- **Fruits and vegetables.** Half of what you eat every day should be fruits and vegetables.
- **Grains.** Make sure at least half of the grains you eat are whole grains, such as oatmeal, whole wheat bread and brown rice.
- **Dairy.** Choose low-fat or fat-free dairy foods.
- **Lean proteins.** Make lean protein choices, such as lean beef, skinless poultry and fish. Vary your protein choices to include eggs, beans, peas and legumes, too. Eat at least 8 oz. of seafood a week.

## PREGNANCY AND ORAL HEALTH

Are you pregnant? Congratulations on this exciting time of your life!

Pregnancy causes changes in your body, emotions and mouth. Hormones make your gums more easily irritated by plaque and can cause gums to be red and tender, causing pregnancy gingivitis, which is a mild form of gum disease that is most common between the second and eighth months of pregnancy. It usually goes away after childbirth.

Your oral health habits may affect you unborn baby oral health as well. Poor habits during pregnancy have been associated with premature delivery, intrauterine growth restriction, gestational diabetes and preeclampsia.

If you are pregnant, and would like to learn how to keep your gums healthy, read our oral health during pregnancy messages and talk to your dentist about other steps you can take to keep your oral health healthy.

## CHRONIC DISEASES AND ORAL HEALTH

Oral health has an impact on overall health and disease. Bacteria from the mouth can cause infection in other parts of the body, especially when the immune system is weakened by disease or medical treatments. Taking good care of your mouth is very important.

It is amazing to learn that people have more tiny bacteria living in their mouth than there are people on Earth! However, if these bacteria make their home in your gums, you may get periodontal disease, a chronic, inflammatory disease that can destroy your gums, the tissues and the supporting bone that hold your teeth in your mouth.

**Diabetes and Oral Health:** Periodontal disease is the most common dental disease affecting those living with diabetes, especially with increasing age.

Poor blood sugar control increases the risk for gum problems. In fact, people with diabetes are at a higher risk for gum problems because of poor blood sugar control. As with all infections, serious gum disease may cause blood sugar to rise. This makes diabetes harder to control because you are more susceptible to infections and are less able to fight the bacteria invading the gums.

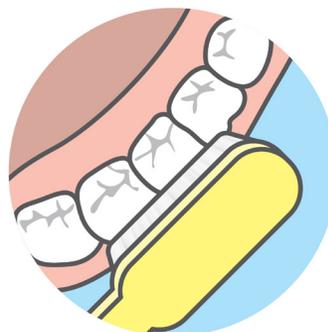
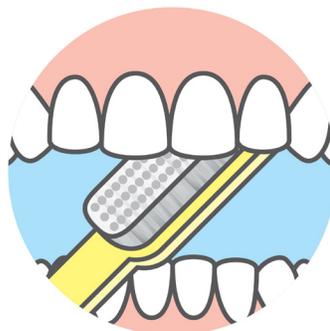
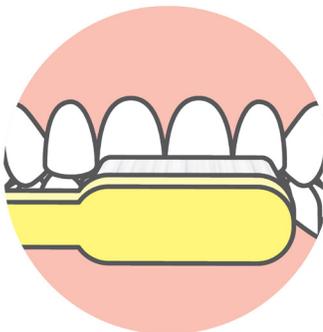
Periodontal diseases are serious bacterial infections that destroy the attachment fibers and supporting bone that hold your teeth in your mouth. When this happens, gums separate from the teeth, forming pockets that fill with plaque and even more infection. The more advanced the disease, the deeper the pockets

Regular dental visits are important. Research suggests that treating gum disease can help improve blood sugar control in patients living with diabetes, decreasing the progression of the disease. Practicing good oral hygiene and having professional deep cleanings done by your dentist can help to lower your hemoglobin levels (A1C). (This is a lab test that shows your average level of blood sugar over the previous three months. It indicates how well you are controlling your diabetes.)

## Oral Hygiene

Here are some tips that you can follow to maintain good oral hygiene:

- **Toothbrush:** The best toothbrush head allows you to easily access all surfaces of your teeth. For most adults, a toothbrush head that is one-half inch wide and one inch tall will be the easiest to use and the most effective. For the vast majority of people, a soft-bristled toothbrush will be the most comfortable and safest choice. Look for an ADA-recommended toothbrush and pick one that is easy for you to hold. If you have arthritis or another



condition that limits your movement, try an electric toothbrush.

- **Frequency of replacing brushes:** Most dentists agree that toothbrushes should be replaced every 3 months. After 3 months of normal wear, brushes are less effective at removing plaque and reaching those tricky in-between spaces in your teeth. It is also important that you change your toothbrush after a cold, flu or mouth infection. Bacteria can hide within the bristles leading to re-infection.
- **How to store brushes:** It is important to rinse your toothbrush well after each use. Let it dry in an upright position and try to keep it from touching other toothbrushes to avoid passing germs from one brush to another. Use a standard toothbrush holder with slots for hanging toothbrushes upright. When traveling, you can use a plastic case to prevent toothbrush bristles from damage.
- **Toothpaste:** Use an ADA-accepted fluoride toothpaste.
- **Water flossers** that clean between teeth can be a good option if you have trouble flossing by hand or if you have dental work that makes flossing difficult, like permanent or fixed bridges.

## HOW TO BRUSH

Thorough tooth brushing at least twice a day, and always before bedtime, helps to remove plaque from your teeth and prevent cavities, gum disease and tooth decay. Brush gently along the gum line. Clean between your teeth with floss or interdental brushes and remove any dentures or partials before brushing (see below for more information about how to clean them). Remember, you don't need to be standing at the bathroom sink, just make it part of your daily routine.

## HOW TO FLOSS

It is important to clean between your teeth daily too. You can use dental floss or other products designed to clean between the teeth such as pre-threaded flossers, tiny brushes that reach between the teeth, water flossers, or wooden plaque removers. Talk to your dentist about proper flossing technique.

## Oral Health Begins at Home

Prevention is the best medicine to keep your mouth healthy for life. Think of your mouth as a gateway and

one of the easiest ways for bacteria to enter the body. Some of these bacteria can cause cavities and gum disease and others contribute to medical problems such as diabetes, heart disease and stroke. Research suggests that people with diabetes, for example, are at higher risk for some oral health problems. Not taking care of your oral health can lead to serious problems.

**Drinking water:** No matter your age, drink fluoridated water to help prevent tooth decay. Fluoride is nature's cavity fighter and many community water systems contain added fluoride. If you prefer bottled water, read the label and choose water that contains fluoride. Some home water filters remove fluoride from tap water. Search for products that have the ADA seal of approval.

## WHY DID MY TEETH CHANGE COLOR?

Over time, your teeth can go from white to "not-so-bright" for a number of reasons:

- **Food and drink:** Coffee, tea and red wine are major stain culprits.
- **Tobacco use:** Tar and nicotine are two chemicals found in tobacco that create stubborn stains.
- **Age:** The outer enamel layer gets thinner with time and brushing reveals more of the yellow dentin.
- **Trauma:** If you've been hit in the mouth, a tooth may change color.
- **Medications:** Tooth darkening can be a side effect of certain antihistamines, antipsychotics and blood pressure medication. Chemotherapy and head and neck radiation can also darken teeth.

**Sweetened beverages:** Limit your intake of sugar sweetened beverages. Juice, soda, sweet tea or energy drinks can leave behind unwanted sugar on your teeth. The cavity-causing bacteria in your mouth get energy from the sugar and produce an acid that wears away enamel, the outer shell of your teeth, and cause cavities.

**Medications:** Be sure your dentist knows what, if any, prescription medications and over-the-counter drugs you are taking. This information will help your dentist determine what type of prescription, if any, to write for you. Your dentist can consult with your physician to choose medications—such as pain relievers or antibiotics.

## Going to the Dentist

Cavities are preventable. Preventive practices, such as visiting a dentist twice a year, can keep all of us cavity-free from birth through adulthood. If you wait until you have pain, it may already be too late.

### BEFORE THE VISIT

When you go to your dentist for a check-up bring the following information:

- List of medications you are taking including vitamins, herbal remedies, and over-the-counter medications
- List of medical conditions and allergies
- Information and phone numbers of all health care providers, doctors, and your previous dentist
- Information about your emergency contacts, someone who can help make decisions on your behalf in the case of a medical emergency
- Dental insurance or Medicaid card

### DURING THE VISIT

Your dentist or hygienist will ask about your recent medical history and will examine your mouth to decide if you need X-rays or not. This will help detect any changes in your teeth or jaw.

Your dentist will examine your teeth with a gentle instrument to find out if you have any gum disease and will conduct an oral health cancer screening. This exam can spot oral health problems at an early stage, before they develop and while they are still easy to address.

Your hygienist will perform a basic cleaning and will polish your teeth with a flavored paste. S/he will also review how to brush and floss your teeth properly.

Once your dentist finishes the exam, s/he will discuss your oral health with you, the condition of your teeth and whether there are any treatment needs.

Build a relationship with your dentist and keep her/him informed about any changes in your oral health. Only your dentist can determine what the best treatment plan is for you.

Do not hesitate to ask questions about any procedure or recommended treatment plan. If necessary, ask your dentist to explain it to you step by step.



**Medications:** Be sure your dentist knows what, if any, prescription medications and over-the-counter drugs you are taking. This information will help your dentist determine what type of prescription, if any, to write for you. Your dentist can consult with your physician to choose medications—such as pain relievers or antibiotics—you may safely take during the pregnancy.

## Paying for Your Oral Health Care

In California, adult Medi-Cal beneficiaries have access to a partial benefits dental plan. Beginning in January 2018, adults with full scope Medi-Cal now have more dental benefits too!

If you need assistance to pay for dental care, there are programs that can help.

### IN CALIFORNIA

**Medi-Cal (Denti-Cal):** Available for low income adult citizens, legal residents and PRUCOL participants (Permanent Residing Under the Color of Law). Effective January 2018, the Department of Health Care Services restored full-scope dental coverage for adult Medi-Cal beneficiaries, including pregnant women.

**Covered California:** Available for purchase by middle to higher income citizens and residents with legal status in the United States. Participants will need to buy additional coverage for dental services.

**Insurance by employers:** Your employer may provide you with health coverage, however, not all employers offer dental benefits. If you need to purchase

additional coverage for dental services, read the policies carefully. Benefits can vary considerably depending on the dental plan you purchase.

**Medicare:** Some person's over 65+ years old might qualify to receive Medicare services. Unfortunately, Medicare covers just so little dental services and usually through Medicare Part A while in an emergency visit. Medicare beneficiaries might need to buy a supplemental coverage or combine it with Medi-Cal if eligible. (Medi- Medi Coverage).

## BY COUNTY

Regardless of their immigration status, low income adults in Los Angeles County receive health coverage, including basic dental services, delivered at a qualified community clinic that accepts Denti-Cal.

Dental school clinics are another source of low-cost dental care. Dental fees are generally reduced and may only include the cost of materials and equipment. Dental school clinics include:

- **Herman Ostrow School of Dentistry of USC** [www.dentistry.usc.edu/patient-care/becoming-a-patient](http://www.dentistry.usc.edu/patient-care/becoming-a-patient)
- **University of California Los Angeles School of Dentistry (UCLA)** [www.dentistry.ucla.edu](http://www.dentistry.ucla.edu)
- **Western University, Pomona School of Dentistry** <http://westernupcc.com/dental-center>
- **University of the Pacific School of Dentistry (UOP)** [www.dental.pacific.edu/dental-services](http://www.dental.pacific.edu/dental-services)
- **University of San Francisco School of Dentistry (UCSF)** [www.ucsf dentalcenter.org](http://www.ucsf dentalcenter.org)

## OTHER RESOURCES

- Are you the caregiver of an older adult in need of dental care? Visit Oral Health America's Tooth Wisdom for a list of the resources available in your state.
- Medicare program does not have dental plan. Beneficiaries need to buy a separate dental plan.
- If you don't currently have a dentist, you can search for one at ADA® Find-a-Dentist™. Simply put in your address for a list of ADA member dentists near your home.

## What Does Your Dental Plan Cover?

Dental coverage depends on the type of plan you have. For example, dental benefits vary between public programs, such as Denti-Cal, and a private health plan. Most plans pay all (or most) costs for preventive care such as cleanings and fluoride treatments.

It is important to know that many dental plans have an annual benefit limit and a deadline of December 31. This means that any unused benefits do not roll over into the New Year. However, because some plans may terminate at different times of the year, check your dental plan documents to be sure. And take advantage of your dental benefits before they expire!

Once you determine what your dental needs are, work with your dentist and benefits provider so that you understand what services are covered. Often, your dentist's office will look into this for you. You can also call your plan using the customer service 800 number on your identification card, or go to their website for more information.

## THE SYSTEM

It can be tempting to base your dental care decisions on what your plan will pay for. However, the least expensive option is not always the healthiest option. Before you commit to a dental plan, make sure you understand how you and your plan will share costs. This can be done in several different ways:

**Deductible:** A deductible is applied to all services and the full deductible amount must first be paid by you before your plan kicks in and starts to pay for covered services. Most plans don't require a deductible for preventive and diagnostic services.

**Co-payment:** In most cases, you will be expected to pay a co-payment, a percentage of the dentist's charge or allowed benefit amount. This is called coinsurance. For example, if your plan pays 80% of the amount owed to your dentist, you will be required to pay the remaining 20%.

**Annual Maximum:** This is the maximum dollar amount a plan will pay during the course of the plan year. You will be required to pay anything over that dollar amount. For example, if your annual maximum is \$1,500 and your dental expenses are \$3,500, you will be responsible for the additional \$2,000. If the annual

maximum of your plan is too low to meet your needs, you may want to ask the plan how to get a higher annual maximum.

**Fixed Dollar Amount (Capitation) Programs:** You pay a fixed dollar amount for each dental visit or specific treatment. The remainder of the treatment cost is covered by the program.

## PRE-EXISTING CONDITIONS

Your dental plan may not cover any health conditions you had before you enrolled even though treatment may still be necessary. For example, benefits may not be paid to replace a tooth that was lost before the effective date of coverage. You are responsible for paying those costs.

“Previously existing” doesn’t necessarily equate with “pre-existing.” In other words, although the conditions that led up to the person’s current problems existed beforehand (for months, possibly even years), the dental needs these conditions created, such as a filling or a crown, are not defined as pre-existing conditions and will be covered.

So, if you have a new insurance plan and your dentist discovers that you have untreated cavities, a tooth that needs to be pulled, ongoing gum disease, or even large fillings you had intended to replace with dental crowns, you should be covered for these treatment services as if your policy had been in effect for many years.

## Choosing the Best Dental Home for Your Needs

If you are looking for a new dentist, search for someone who will do more than just clean your teeth. Dental health is a vital part of your overall health and it is important that everyone have a dental home where they feel comfortable.

A dental home gives you a safe and trusted place to turn to whether it is for a routine visit or a dental emergency. Here are some strategies to help you find the best dental fit for you and your family.

### START WITH THE BASICS

Regular visits are key to good health and a beautiful smile, so start with the details that work best for you, your lifestyle and your family’s dental care needs. Some things to consider:



“Look for a dentist who can be a coach to motivate you, a trusted advisor to turn to when health issues arise and a partner to make dental care decisions with.”

—DR. TAYLOR-OSBORNE.

- Is the office easy to get to from your home or job?
- Does the dentist have office hours that are convenient for you?
- If you have dental coverage, is the dentist in your dental plan’s network?
- Do you feel comfortable there?
- Doctor-patient communication is very important. Will you need translation or interpreter services?
- Is the dentist a member of the American Dental Association (ADA)?

To find a dentist that is right for you, make a list of possible candidates. Don’t be shy. Call or visit the dentists’ offices before you make a decision. Some questions to ask:

- Will the dentist explain how you can prevent dental problems? Do they provide instruction about how to care for your teeth?
- How does the dentist and office staff handle emergencies that happen outside of office hours?
- Is the office staff familiar with your dental plan’s benefits? Do they offer financial options for treatment costs?
- Will your medical and dental history be recorded? Is it secured in a safe and permanent file?