Good oral health for older adults is critical to maintain overall health and well-being. As we age, we enter another phase of cavity prone years. Because we only have one set of permanent teeth, it is important to take care of them, not just in childhood, but throughout our entire lives.

**Good Nutrition and Oral Health**

A balanced, nutritious diet is essential to healthy living for all of us. 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.

As we get older, some kinds of food may become more difficult to chew. Studies show that people who have lost teeth or who wear dentures do not eat the recommended servings of fruits and vegetables and, in fact, tend to have a less nutritious diet overall. If you have lost any of your teeth, it’s a good idea to replace them. A full set of teeth will enable you to eat a variety of nutritious food that you enjoy such as meats, beans, fruits, grains, and vegetables. Ill-fitting dentures may lead to a diet of very soft food that is low in nutrients and does not help your mouth stay clean.

Because aging also affects our sense of taste (and smell!), you may find that you lose interest in eating some foods, which could also affect the amount of nutrients you consume. Find ways to make meals more enjoyable by trying new foods or experimenting with herbs and spices. Some medications can also affect the taste of food, your food preferences or your appetite. Report any changes you notice in your eating habits to your physician or dentist.

Calcium is an important part of everyone’s diet. Calcium-rich foods include milk, kale and other leafy greens, sardines, yogurt, cheese, and other foods that are fortified with added calcium such as orange juice. Calcium helps to prevent bone loss or osteoporosis, a disease that causes very fragile bones. Osteoporosis in the jawbone may lead to teeth that are loose and may fall out. Calcium doesn’t work alone, however. Other nutrients are important to healthy teeth such as phosphorus and vitamin D, which is needed to help absorb, carry and deposit calcium in the bone that supports your teeth.
Oral Hygiene

Older adults today have benefited from fluoride in toothpaste and drinking water that helps to prevent cavities. As you get older, good oral hygiene becomes more challenging and the risk of cavities increases. One common side effect of many medications is a condition known as dry mouth where there is not enough saliva to keep the mouth wet. Saliva helps protect our teeth against cavities by helping to wash away food debris and reduce plaque. It also contains minerals that help to repair early cavities. Dry mouth contributes to increased tooth decay as well as problems with chewing and swallowing food, hoarseness, sore throat and difficulty wearing dentures. Talk to your doctor or dentist about how to treat dry mouth and remember to brush after each meal, floss daily and drink plenty of water.

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.

**DIFFICULTY BRUSHING AND FLOSSING**

If you have arthritis, you may find it difficult to brush and floss. Ask your dentist for ways to overcome this problem. Certain dental products are designed to make oral care more comfortable. You may want
to try strapping the toothbrush to a larger object, such as a ball, to make the brush more comfortable to handle. Electric toothbrushes are good at removing plaque and can help by doing some of the work for you. Tools to help make flossing easier are available in most drug stores.

HOW TO CLEAN DENTURES

Not only does bacteria stick to your teeth, it also sticks to full or partial dentures. If you wear dentures, remember to clean them daily with cleaners made specifically for dentures. Do not use toothpastes for natural teeth or household cleaners, which are too abrasive and can damage dentures that can be expensive to replace. Take your dentures out for at least four hours every 24 hours to keep the lining of your mouth healthy. It’s best to remove your full or partial dentures at night. Your dentist will provide you with instructions about how long to wear your dentures each day. Proper denture care will ensure they last for a long time.

- Rinse your dentures before brushing to remove any loose food or debris.
- Use a soft bristle toothbrush and a non-abrasive cleanser to gently brush all the surfaces of the dentures so they don’t get scratched.
- When you brush, clean your mouth thoroughly to remove plaque—including your gums, cheeks, roof of your mouth, and tongue. This can help reduce the risk of oral irritation and bad breath.
- When you’re not wearing your dentures, put them in a safe place covered in water to keep them from warping.
- Occasionally, denture wearers may use adhesives. Adhesives come in many forms: creams, powders, pads/wafers, strips or liquids. If you use one of these products, read the instructions, and use them exactly as directed. Your dentist can recommend appropriate cleansers and adhesives; look for products that have the ADA Seal of Acceptance which means they have been evaluated for safety and effectiveness.

If you have any questions about your dentures, if they stop fitting well or if they become damaged, contact your dentist. Be sure to schedule regular dental checkups, so your dentist can examine your mouth to make sure your dentures continue to fit properly.

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.

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 American Dental Association (ADA) seal of approval.

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.

Diabetes and oral health: Gum disease such as gingivitis (an early stage) or periodontal disease (a more severe form) is the most common dental disease affecting people living with diabetes. If your blood sugar is poorly controlled, you may be more likely to develop serious gum disease and lose more teeth than people who do not have diabetes. People who
have diabetes are also at increased risk because they are more susceptible to infections and may be less able to fight bacteria that invade the gums.

Regular dental visits are important. Research suggests that treating gum disease can help improve blood sugar control in patients living with diabetes. Good oral hygiene and professional cleanings by a dentist can help to lower your hemoglobin levels (A1C), this is a lab test that shows your average blood sugar level over three months and indicates how well you are controlling your diabetes.

Cancer and oral health: Cancer patients can develop complications that affect the mouth such as mouth sores, sensitive gums, dry mouth or infection. Cancer and its treatments (such as chemotherapy and radiation) can weaken the immune system and make you more susceptible to infection. And serious infections can result in delayed cancer treatment.

Keep your mouth healthy:

- Eat a balanced diet.
- Do not use any tobacco products. If you smoke, quit. Seek help if you need to.
- Limit alcoholic drinks.
- See your doctor or a dentist if you have sudden changes in taste and smell.

Going to the Dentist

It is important to visit your dentist at least once a year. If you wait until you have pain, it may already be too late! As we age, the nerves inside the teeth become smaller and less sensitive. By the time a tooth starts to hurt from a cavity, you may be at risk of losing the tooth. There are other serious conditions that your dentist will look for, like cancer and gum disease, which do not always cause pain until the advanced stages of the disease. By then, it will be more difficult and more costly to treat.

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 for all health care providers, doctors, and your previous dentist
- Information about your dental insurance or a Medicaid (Medi-Cal/Denti-Cal) card
- Your dentures or partials, even if you don’t wear them regularly

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.

**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.

**Paying for Your Oral Health Care**

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

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](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.ucsfidentalcenter.org](http://www.ucsfidentalcenter.org)

**OTHER RESOURCES**

- Are you over 60 or 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 near you.
- Medicare does not cover dental services. Medicare beneficiaries need to purchase a separate dental plan.
- If you don’t currently have a dentist, search for one at ADA® Find-a-Dentist™. Simply type 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:

- 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?

“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