Review Article | ISSN (0): 2582-0559

Periodontal Health Across Generations: Bridging Gaps in Geriatric and Paediatric Care

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Abstract

Periodontal health is a cornerstone of overall well-being, influencing not just oral functionality but also systemic health. Geriatric and paediatric populations present distinct challenges in maintaining periodontal health due to unique physiological, psychological, and social factors. This review explores these challenges, emphasizing the need for tailored approaches to periodontal care. Through an analysis of physiological considerations, common periodontal issues, and effective management strategies, this article provides insights into optimizing care for these vulnerable groups.

Keywords: Periodontal health, geriatric dentistry, pediatric dentistry, oral health disparities, age-specific dental care, preventive dentistry, systemic health

Introduction

Periodontal health, a fundamental component of oral and systemic well-being, is often overlooked despite its critical role in maintaining overall health. The periodontium, which includes the gingiva, periodontal ligament, cementum, and alveolar bone, provides essential support to teeth, facilitating functions such as chewing, speech, and maintaining facial aesthetics. Diseases affecting the periodontium, such as gingivitis and periodontitis, can have far-reaching consequences, including tooth loss and systemic health complications. Periodontal disease is not confined to specific age groups, but certain populations, notably geriatric and pediatric patients, are particularly vulnerable due to distinct biological, psychological, and social factors.

Geriatric patients face unique challenges to periodontal health due to age-related physiological changes and the cumulative effects of years of exposure to environmental and lifestyle factors.³ Aging is accompanied by a natural decline in immune function, making older adults more susceptible to infections, including those affecting the periodontium.⁴ Additionally, systemic conditions such as diabetes, cardiovascular diseases, and osteoporosis, which are more prevalent in the elderly, can exacerbate

periodontal problems. Polypharmacy, common in this age group, often leads to xerostomia (dry mouth), which compromises the natural protective mechanisms of saliva.⁵ Reduced manual dexterity, visual impairments, and cognitive

decline further impede the ability of older individuals to maintain effective oral hygiene, creating a perfect storm for periodontal disease progression.⁶

In contrast, pediatric patients are at a dynamic stage of growth and development, where oral health directly impacts their physical, emotional, and social well-being. The transitional nature of mixed dentition, characterized by the coexistence of primary and permanent teeth, poses unique challenges for maintaining periodontal health.⁷ Children's developing immune systems render them more vulnerable to infections, while poor dietary habits, including high sugar consumption, exacerbate plaque formation and gingival inflammation.⁸ Behavioural factors, such as dental anxiety or uncooperative attitudes during dental visits, and the reliance on caregivers for oral hygiene practices can further complicate the management of periodontal health in this age group. Pediatric patients with developmental disorders or systemic conditions require even more specialized care, as these factors can significantly affect their periodontal and overall oral health.⁹

(Received 04th Feb 2024; Accepted 25th April 2024; Published 30th July 2024)

The significance of periodontal health extends beyond the confines of the oral cavity. Periodontal disease has been linked to systemic conditions such as diabetes, cardiovascular diseases, and adverse pregnancy outcomes, underscoring the importance of maintaining healthy periodontal tissues. ¹⁰ In special populations like geriatric and pediatric patients, the stakes are higher, as their vulnerabilities amplify the impact of periodontal diseases on their overall health and quality of life. Recognizing and addressing these vulnerabilities is essential to prevent the cascading effects of periodontal disease.

This review delves into the unique challenges of managing periodontal health in geriatric and pediatric populations. Bv exploring physiological, behavioural, and social aspects influencing periodontal health in these groups, it aims to provide evidence-based insights into effective management strategies. Tailored approaches that consider the specific needs of these populations are critical for achieving optimal periodontal outcomes. From preventive measures and early interventions interdisciplinary care and education, addressing the periodontal health of geriatric and paediatric requires a comprehensive compassionate approach.

Understanding Periodontal Health

The periodontium includes the gingiva, periodontal ligament, cementum, and alveolar bone, forming the foundational structures that support teeth. Maintaining its health ensures effective chewing, speech, and aesthetics. Gingivitis, characterized by gum inflammation, is a reversible condition, whereas periodontitis involves irreversible destruction of periodontal tissues and often progresses to tooth loss if untreated.²

Periodontal Health in Geriatric Patients

Aging induces various physiological changes that challenge periodontal health. Xerostomia, or dry mouth, is common among older adults due to polypharmacy or systemic conditions such as diabetes. The absence of adequate saliva impairs the natural cleansing of the oral cavity, promoting plaque accumulation and increasing the risk of periodontal disease.⁵ Additionally, immune

function declines with age, reducing the body's ability to counteract infections, including those caused by periodontal pathogens. Bone density reduction due to osteoporosis affects the alveolar bone, leading to increased susceptibility to resorption and tooth loss. 11 Changes in gingival tissues, such as reduced vascularity and slower healing, further complicate periodontal management. 12

Older adults frequently encounter periodontal issues such as gingival recession, which exposes tooth roots, making them more susceptible to decay and sensitivity. Chronic periodontitis is prevalent, often resulting in tooth mobility and loss if untreated.¹³ Oral mucosal lesions are more common in the elderly, adding complexity to periodontal treatment. Root caries, stemming from exposed root surfaces due to gingival recession, pose treatment challenges due to their location and nature.¹³

Managing periodontal health in the elderly involves addressing several challenges. Comorbidities such as cardiovascular disease, diabetes, and arthritis often complicate treatment plans and require interdisciplinary coordination. Medications prescribed for systemic conditions frequently result in side effects like dry mouth or gingival overgrowth.14 Reduced dexterity can effective impair oral hygiene practices. like necessitating adaptive tools electric toothbrushes. Accessibility to dental care, limited by physical, financial, or logistical barriers, further exacerbates the issue. Cognitive impairments such as dementia compromise the ability to maintain oral hygiene, requiring caregiver support for effective management.15

Periodontal Health in Pediatric Patients

Children's dynamic growth and development influence their periodontal health, requiring age-appropriate care strategies. The eruption of teeth often results in transient inflammation and susceptibility to gingivitis. Mixed dentition, with the presence of both primary and permanent teeth, complicates oral hygiene practices, increasing the risk of periodontal issues. A developing immune system in children also affects their ability to combat periodontal pathogens effectively.¹⁶

Common periodontal conditions in pediatric patients include gingivitis, which is largely attributed to inadequate oral hygiene practices. Aggressive periodontitis, though rare, leads to rapid destruction of periodontal structures and requires prompt intervention. Orthodontic appliances, frequently used in this age group, can hinder oral hygiene and elevate the risk of periodontal complications. Additionally, children are more prone to dental trauma, which can impact the health of periodontal tissues.¹⁷

Managing periodontal health in pediatric patients involves addressing several unique challenges. Behavioral factors, including dental anxiety and uncooperative attitudes, can make examinations treatments difficult. Dietary particularly high sugar consumption, increase the risk of plaque accumulation and periodontal disease.16 Parental involvement plays a critical role in ensuring effective oral hygiene practices, but inconsistent participation can undermine preventive efforts. Limited awareness about the significance of periodontal health among parents and caregivers often results in delayed interventions.¹⁸ Developmental disorders, such as Down syndrome or autism spectrum disorders, pose additional challenges in maintaining oral hygiene and necessitate specialized care strategies.19

Strategies for Effective Management

Managing periodontal health in geriatric patients requires a comprehensive approach. Conducting thorough medical and dental assessments helps identify underlying conditions and their impact on periodontal health. Customized oral hygiene practices tailored to individual capabilities, such as the use of interdental brushes and electric toothbrushes. can significantly outcomes. Regular dental visits for professional cleanings and periodontal maintenance enable early detection and management of issues. Coordinating care with other healthcare providers ensures a holistic approach to periodontal health management. Patient and caregiver education is essential to improve with oral hygiene practices, compliance emphasizing the interconnection between oral and systemic health.20 Nutritional counseling supports oral health, especially for patients with compromised chewing ability. For xerostomia, salivary substitutes and stimulants alleviate symptoms and improve oral hygiene.⁵

For pediatric patients, early intervention is crucial. Dental visits initiated by the age of one establish a foundation for good oral hygiene practices. Educating parents and caregivers about their role in maintaining their child's oral health participation encourages active supervision. 18 Age-appropriate educational tools, such as interactive videos and storytelling, help children understand the importance of oral hygiene. Preventive measures, including fluoride and sealants, protect against treatments periodontal diseases. Behavioral management techniques, such as positive reinforcement and distraction, facilitate cooperation during dental visits. Coordination with orthodontists ensures that periodontal health is maintained during orthodontic treatments. For children with developmental disorders, individualized care plans and close collaboration with caregivers and other healthcare professionals outcomes.21

Conclusion

Maintaining periodontal health in geriatric and paediatric patients demands a tailored approach that addresses their unique physiological and psychological needs. By understanding the challenges and implementing appropriate strategies, dental professionals can enhance periodontal care for these populations, contributing significantly to their overall wellbeing. Prioritizing education, preventive care, and interdisciplinary collaboration ensures that both elderly and paediatric patients achieve optimal oral health outcomes, thereby improving their quality of life.

References

- 1. Sedghi LM, et al. Periodontal disease: The good, the bad, and the unknown. Front Cell Infect Microbiol. 2021;11:766944.
- Könönen E, et al. Periodontitis: A multifaceted disease of tooth-supporting tissues. J Clin Med. 2019;8(8):1135.
- 3. Wulandari P. The aging process and its relation to periodontal conditions. Explor Immunol. 2023;3:207-16.
- 4. Razak PA, et al. Geriatric oral health: A review article. J Int Oral Health. 2014;6(6):110-6.

- 5. Marcott S, et al. Where dysphagia begins: Polypharmacy and xerostomia. Fed Pract. 2020;37(5):234-41.
- 6. Desai JP, Nair RU. Oral health factors related to rapid oral health deterioration among older adults: A narrative review. J Clin Med. 2023;12(9):3202.
- 7. Stoica SN, et al. The pathology of the first permanent molar during the mixed dentition stage—review. Appl Sci. 2023;13(4):483.
- 8. Morales F, et al. Effects of malnutrition on the immune system and infection and the role of nutritional strategies regarding improvements in children's health status: A literature review. Nutrients. 2023;16(1):1.
- 9. Popescu SM, et al. Dental anxiety and its association with behavioral factors in children. Curr Health Sci J. 2014;40(4):261-4.
- 10. Nazir MA. Prevalence of periodontal disease, its association with systemic diseases and prevention. Int J Health Sci. 2017;11(2):72-80.
- 11. Wang Z, et al. Deciphering the biological aging impact on alveolar bone loss: Insights from α -Klotho and renal function dynamics. J Gerontol A Biol Sci Med Sci. 2024;79(9):glae172.
- 12. Cho Y-D, et al. Periodontal wound healing and tissue regeneration: A narrative review. Pharmaceutics. 2021;14(5):456.
- 13. Janto M, et al. Oral health among elderly, impact on life quality, access of elderly patients to oral health services and methods to improve oral health: A narrative review. J Pers Med. 2022;12(3):372.
- 14. Chan AKY, et al. Common medical and dental problems of older adults: A narrative review. Geriatrics. 2021;6(3):76.
- 15. Waldron C, et al. Oral hygiene interventions for people with intellectual disabilities. Cochrane Database Syst Rev. 2019;5:CD012628.
- 16. Mandura RA, et al. Assessment of oral hygiene, gingival, and periodontal health, and teeth eruption among Type 1 diabetic Saudi children. Int J Clin Pediatr Dent. 2022;15(6):711-6.
- 17. Oh TJ, Eber R, Wang HL. Periodontal diseases in the child and adolescent. J Clin Periodontol. 2002;29(5):400-10.
- 18. Sree S, et al. Effectiveness of parental participation in a dental health program on the oral health status of 8-10-year-old school children. Int J Clin Pediatr Dent. 2022;15(4):417-21.
- 19. Alyahya FA, et al. Dental care and challenges for children with Down syndrome. Int J Community Med Public Health. 2023;10:xxx-xx.
- 20. Sepolia S, Verma P. Periodontal oral health in geriatric patients: An observational study. J Adv Med Dent Sci Res. 2020;8(11):223-8.
- 21. Baakdah RA, et al. Pediatric dental treatments with pharmacological and non-pharmacological

interventions: A cross-sectional study. BMC Oral Health. 2021;21:186.