

# by Word of Mouth

FOR THE PATIENTS AND FRIENDS OF DR. JACK B. SHARE

## DIABETES



## Our most frequently asked questions about... DIABETES AND YOUR DENTAL HEALTH

Q. I know that diabetes is a disease that affects the entire body, but I wasn't aware of its affects on the mouth?  
A. Diabetes can affect the teeth, gums, and even the breath. Also, there are many important medical and dental management considerations as well.

Q. What are the types of diabetes?

A. Diabetes mellitus is a group of metabolic diseases whereby the sugar (glucose) from food is not used by the body. The reason the body is not able to use the sugar could be due to one of the following:

In Type 1 diabetes the body doesn't produce enough insulin from the destruction of the insulin-producing cells of the pancreas, the hormone needed to absorb glucose, and patients require insulin injections (5-10% of cases and commonly occurs childhood and adolescence).

In Type 2 diabetes the cells in the body don't interact with the glucose due to impaired insulin function, and patients need to control their diet (90-95% of cases and increases with age, obesity and inactivity).

Q. Are diabetics more at risk for getting cavities than non-diabetics?

A. Not necessarily. If the condition is monitored, the diabetic is at no greater risk. If the condition is not controlled, and the diet consists of foods high in sugar and starch, the diabetic's chances of getting cavities will increase. Also, some diabetics eat smaller and more frequent meals with frequent doses of sugar. Therefore, the diabetic needs to brush and floss more frequently throughout the day. Some diabetics complain of a dry mouth, which increases the risk of cavities as well. Please read our "Word of Mouth" on Xerostomia.

Q. What can gum disease mean for a diabetic?

A. Diabetics have a decreased healing response. Recall that gingivitis is an infection in the gums caused by the bacteria found in plaque. If the infection persists and progresses to the underlying bone that anchors the teeth, the uncontrolled diabetic can have recurring bouts with infection, and substantially lose bone, and their teeth.

Q. Will a diabetic lose their teeth sooner than a non-diabetic?

A. Many factors can contribute to tooth loss in a diabetic. Good oral hygiene habits of flossing and brushing along with regular professional cleanings will help to reduce or eliminate infection. Some diabetics benefit from a prescription mouthwash. The risk of tooth loss can be decreased also by properly controlling your diabetes with medications and/or diet.

Q. I've been told that I have an unpleasant, fruity-sweet smelling breath. Is there anything that I can do about it?

A. It is caused by the disease itself, as a result of the body's natural defense against decreased glucose use. You can try masking the odor with sugarless chewing gum, a mint flavored, non-alcoholic mouthwash, and frequent brushing.

Q. Are there any scheduling concerns in regards to my dental visits?

A. In general morning appointments are advisable. For patients receiving insulin therapy, appointments should be scheduled so that they do not coincide with peaks of insulin activity, since that is the period of maximal risk of developing a low blood sugar (hypoglycemia). It is important to eat normally and take the medications as usual on the day of the appointment.