



# OPEN YOUR MOUTH

## AN ASSESSMENT AND REFERRAL TOOL FOR HEALTH CARE PROFESSIONALS WORKING WITH PLHIV

Every health care worker can participate in the prevention of oral health problems in PLHIV. Having a conversation with your clients about oral health and using this tool at least annually can help PLHIV maintain a healthy mouth.

### DENTAL CARE ASSESSMENT TOOL

Clients will need to see a dentist if they answer yes to one of the following:

- 1** Has it been more than 1 year since you have been to the dentist?
- 2** Do you have tooth pain, mouth sores, bleeding gums or loose teeth?
- 3** Do you often have a dry mouth or experience a change in your sense of taste?



### REFERRAL PATHWAY FOR TREATMENT

- Access varies according to the local health district based on a client's home postcode.
- Information on financial assistance or subsidised dental services for people with HIV who hold a health care card or pension card can be accessed by:
  - Calling 1800 451 600
  - Going to [www.dental.positivelife.org.au](http://www.dental.positivelife.org.au)
- A list of local private dentists can be found at [www.ada.org.au](http://www.ada.org.au)
- A guide and contact details for public dental care referrals for all health care professionals can be found at [www.health.nsw.gov.au/cohs/contacts.asp](http://www.health.nsw.gov.au/cohs/contacts.asp)
- Doctors may refer particular problems directly to a public dental care specialist, using the 'Oral Health Specialist Referral Form' which can be accessed at [www.slhd.nsw.gov.au/SydneyDentalHospital/pdfs/Specialistreferralform.pdf](http://www.slhd.nsw.gov.au/SydneyDentalHospital/pdfs/Specialistreferralform.pdf)
- A dietitian can provide advice on eating if symptoms are present. Contact your local hospital or clinic or find a dietitian at [www.daa.asn.au/for-the-public/find-an-apt](http://www.daa.asn.au/for-the-public/find-an-apt)

### TAKE HOME ADVICE FOR CLIENTS

- 1 CLEAN WELL**
  - a. Clean teeth with a soft electric or hand toothbrush and fluoride toothpaste.
  - b. Clean between teeth with brushes, sticks or floss.
  - c. The cleaning of special areas (dentures, crowns, bridges, and implants) needs individual advice from a dentist or hygienist.
  - d. Mouthwashes do not substitute for brushing – avoid alcohol based mouthwash if dry mouth is a problem.
- 2 EAT AND DRINK WELL**
  - a. Eat a variety of foods from each of the five major food groups, including; whole grains, fruits, vegetables, lean sources of protein and low-fat and fat-free dairy foods (include at least 2-3 serves each day as these are protective for your teeth).
  - b. Drink tap water between meals or with snacks.
  - c. Avoid sugary and acidic foods and drinks e.g. soft drinks (regular and diet), juices, vitamin waters, sports and energy drinks, lollies, chocolates, biscuits and cakes.
  - d. Limit the number of snacks eaten and choose to have any sugary foods and carbohydrates such as rice, pasta or bread with main meals.
  - e. Refer to a dietitian for best advice.

- 3 QUIT SMOKING**

Contact Quitline 13 7848 for support.

- 4 REDUCE OR GIVE UP ALCOHOL OR DRUG USE**

For support contact Alcohol & Drug Information Service: 9361 8000 or 1800 422 599. The regular and excessive use of recreational drugs and alcohol can cause dry mouth, teeth grinding and jaw clenching which could lead to gum problems and tooth decay.

- 5 PROVIDE CLIENTS WITH A COPY OF THE 'OPEN YOUR MOUTH' BOOKLET**

A guide to maintaining a healthy mouth for people with HIV.

Mouths, lips, teeth and tongues should feel good and work well to enable clear speech and eating a balanced diet. The most common oral health issues for PLHIV are described below:

## THE ROOT OF MANY HEALTH PROBLEMS

**DENTAL PLAQUE** is a bacterial biofilm that grows constantly on everyone's teeth. Its growth can be altered by diet and disrupted by physical disturbance such as brushing or flossing. Chemical defences from antiseptics and antibiotics are less effective in killing biofilms and the infections that arise from them. The biofilm above the gum causes tooth decay (caries) and is most sensitive to diet. The anaerobic biofilm below the gum line is not responsive to diet changes and causes gum disease (gingivitis and periodontitis). Adults will lose their teeth from decay or periodontitis or a combination of both.

**TOOTH DECAY** causes pain with hot or cold or sweet stimuli.

**GUM DISEASE** may not cause any pain until it is very advanced but may cause bleeding and swelling. It is worse and gives less symptoms in smokers. Early and reversible gum disease is called gingivitis.

**PERIODONTITIS** (advanced gum disease) has an effect on diabetes and increases the risk for heart disease. Other conditions such as trauma, fungal and viral infections, autoimmune diseases or cancer can cause pain and ulcers. All of these conditions can present in more aggressive forms in PLHIV such as necrotising ulcerative periodontitis (NUP) which can result in rapid loss of gum tissue and exposure of bone.

**DRY MOUTH** associated with HIV and medications will lead to an increase in oral discomfort, dryness, interrupted sleep, and eating, disseminated discomfort in the mouth, frequent ulceration under dentures and other infections.

**FUNGAL INFECTIONS** may present as red or white patches on gums around teeth or on the oral mucosa of cheeks or floor of mouth. To view the floor of the mouth ask the client to open their mouth and touch their tongue back and up toward the soft palate.

Good hygiene and chlorhexidine mouthwash can relieve simple cases but if persistent it will need treatment such as Fungilin lozenges. Cracks at the corner of the mouth need to be kept dry and treated with anti-fungal cream.

**TASTE CHANGES** can be associated with a number of causes including URTI (upper respiratory tract infection), age related loss of function of taste buds, dry mouth, infections in the mouth or medication. Persistent taste change should be investigated.

**SMOKERS** will have a higher incidence of and more aggressive forms of periodontitis that can lead to a loss of bone around the teeth and is also associated with elevated risk of oral cancer.

**PIGMENTATION** needs to be checked to identify if it is normal, side effect of medication or early Kaposi Sarcoma (KS).

**HUMAN PAPILLOMA VIRUS (HPV)** can present as oral warts on gums and cheeks.

## USEFUL WEBSITES

### [www.ashm.org.au](http://www.ashm.org.au)

For more information on clinical presentation of oral changes, click on [Dentists and HIV](#) for an overview of the oral manifestations and complications associated with HIV infection and treatments.

### [www.hivdent.org](http://www.hivdent.org)

A comprehensive oral health website includes treatment information, advocacy, development, training, integration, and evaluation of oral health services for people with HIV.

### [www.ada.org.au](http://www.ada.org.au)

More information and illustrated instructions on cleaning techniques via Australian Dental Association.

### [www.daa.asn.au](http://www.daa.asn.au)

More information on nutrition including smart eating tips.