Mouth and dental issues in Parkinson’s

Some people with Parkinson’s may have problems with their mouth and dental health. This information looks at issues you may experience and simple things you can do to look after your mouth.

A healthy mouth will help you to chew, taste, swallow and speak properly. Strong, healthy teeth allow you to enjoy your choice of food.

What mouth and dental issues are common for people with Parkinson’s?
Parkinson’s symptoms and Parkinson’s medication might cause some problems with your dental and mouth health (sometimes called oral health).

These can include:

- dry mouth
- difficulty swallowing
- drooling
- difficulty in controlling dentures
- difficulty cleaning your teeth
- increase in tooth decay

Dry mouth (xerostoma)
Saliva is really important for good mouth health:

- It helps you taste your food.
- It lubricates food to help you swallow.
- It is antibacterial and has enzymes to help you eat and digest food.
Without enough saliva you may experience a dry mouth. A dry mouth can lead to higher rates of tooth decay and gum disease. It can increase your risk of getting tooth decay in the exposed roots. It may also cause dentures to become loose and hard to control.

A dry mouth can also increase the damaging effects of sugar on your teeth. Because of this it is important to watch what you eat and when you eat.

Some Parkinson’s drugs can reduce the flow of saliva to your mouth. Tell your dentist if you experience this as they can discuss options which might help. They may ask you what drugs you take, so take a list of your medication to your appointments.

Tell your GP, specialist or Parkinson’s nurse too as they may be able to prescribe different treatments that may not cause this problem. Saliva substitutes are also available. You can ask your dentist or local pharmacist about them.

The following tips may help reduce dry mouth.

**Do:**
- try to take frequent sips of water
- chew sugar-free gum
- use lip salve to protect your lips if needed
- remove dentures at night to give your mouth a chance to recover
- eat a healthy, balanced diet

If you are thinking about changing your diet, a dietitian will be able to help you. You can ask your GP about this.

**Don’t:**
- smoke – it makes the dryness worse
- use mouthwashes that your dentist or doctor have not prescribed – they may contain alcohol, which can increase dryness
- suck sugary sweets to increase saliva – this will increase decay and other mouth problems
- sip sugary drinks between meals – this will also increase decay and other mouth problems

**Burning mouth**
Some people with Parkinson's complain of a burning mouth feeling. This can be due to a dry mouth or taking levodopa. If you experience this, speak to your dentist or health professional.

**Swallowing difficulties**
If you have Parkinson’s you might experience swallowing difficulties because your jaw and face muscles have weakened. This can also affect how well you can chew.

**Find out more:** see our information on eating, swallowing and saliva control.
Drooling (sialorrhea)
Drooling is common for people with Parkinson’s. You may experience this because you cannot swallow as well as you used to.

Drooling happens if you swallow less because saliva pools in your mouth and may overflow from the corners of your mouth. Drooling can lead to a sore mouth and your posture might make it worse. Those who have a stooped, head-down position can find it hard to seal their lips. This can make it harder to control saliva flowing from the mouth. So it’s important to speak to your health professional for the right help and support.

You can also try these simple exercises at home in front of a mirror to try to help prevent drooling. They’ll help you become more aware of what your lips are doing and how tight you need to hold them closed to keep saliva in.

- Close your lips as tightly as possible and hold for a count of four, relax, then repeat five times.
- Smack your lips together.
- Stretch your lips in a wide smile, hold for a count of four and relax.

Find out more: see our information on eating, swallowing and saliva control.

In addition, you can try aids to help you to remember to swallow. For example, a device with a timer that prompts you to swallow. Your Parkinson’s nurse can help you find a device that is right for you. A speech and language therapist may also be able to help.

Find out more: see our information on speech and language therapy.

Visiting the dentist
It is important to visit the dentist regularly. This will identify and treat issues quickly and prevent them from getting worse.

Your dentist will advise you how often you need a check-up. Get any specific problems looked at between appointments.

There are cleaning techniques and equipment that can make good dental and mouth health easier if you have Parkinson’s. For example, a toothbrush with a bigger handle may give you a better grip. Ask your dentist for advice on what is right for you.

If you’re unable to get to your dentist, ask if home visits may be possible. Many dentists do them or they can refer you to a colleague who does. Alternatively, they can give you information on how to get help.

Will my Parkinson’s mean I need to see a specialist dentist?
It’s important to tell your dentist that you have Parkinson’s and how it affects you.

Most dentists will be able to treat people at all stages of the condition.

But tell your dentist about issues you experience because of Parkinson’s. For example, you may find you move a lot during an appointment if you have a tremor or dyskinesia.

If your dentist feels you need specialist care, they will refer you to a colleague on the General Dental Council’s ‘special care’ register.
Dental surgery
If you have to have dental surgery, talk to your dentist about Parkinson's symptoms you experience and how these may affect your operation.
You should also tell your dentist about your drug regime so that you continue to get the right dose when you have your operation.

If you've had deep brain stimulation and you now need to have a dental operation, you will need to take antibiotics. This will help make sure that you don't get an infection or another issue that could affect your deep brain stimulation device.

Tips for people with natural teeth
It is important to clean all parts of your teeth, especially the area where the tooth leaves the gum. Don't forget to clean both sides of your teeth as well as the biting surface.

You should use whichever technique you find easiest. Your dentist or hygienist can show you some aids to help you clean between your teeth.

If you find cleaning your teeth difficult or tiring, you could clean one part of your mouth in the morning and another part in the afternoon.

Ask your dentist for help on choosing the best toothbrush for you. They will also be able to help you find the best way to clean your teeth and the gaps between them.

Your dentist may advise you on toothbrush handle adaptations which can help improve your grip. You may find it easier to use a three-sided toothbrush or one with an angled head. A small head may also help you reach all your teeth.

You could consider an electric or battery-operated brush, as the extra weight may help to reduce hand and arm tremors.

If you have a carer who cleans your teeth, they may find it easier to stand behind you like dentists do. Or, they could clean one side of your teeth from behind you, and the other side while standing in front of you. This could help your carer use their strongest, writing hand to reach all parts of your teeth.

Tips for people with dentures
If you have dentures, removing them will help you clean all surfaces more easily.

Plaque can build up on dentures, as it does on natural teeth. This can cause irritation to your cheeks, gums and the skin on the roof of your mouth.

You may find it helpful to do the following things:

- Always clean your dentures over a sink full of water. That way, if you drop them, you can avoid breaking them.
- Soak your dentures overnight in water and then brush them gently underwater.
- Never use toothpaste on your dentures because it's too harsh. Denture pastes are available.
- Cleaning your dentures with a nailbrush, soap and water can be as effective as using denture pastes or soaking solutions.
If you do use a soaking solution for cleaning your dentures, follow the instructions. Leaving your dentures in the solution for too long can damage the plastic.

- Make sure your denture solution is not too hot, as heat can damage the denture plastic.
- Avoid using a soaking solution if you have metal dentures.
- Do not use bleach on your dentures.
- If you find stains on your dentures that you can't get rid of, ask your dentist to clean them for you.

It is vital that you get advice from a dentist about any specific problems you have. This will mean your dentures are working as well as possible for you.

**Controlling dentures**
If you wear dentures Parkinson's may mean you have difficulty controlling them. This could be because of:

- problems controlling your facial muscles
- loss of muscle tone
- dry mouth
- pooling of saliva
- poorly designed dentures
- old and very worn dentures
- loose dentures that rub parts of your mouth and cause blisters or ulcers. (Loose dentures may also make it more difficult for you to eat and speak properly.)

Ask your dentist to check your dentures and suggest any improvements. This will help if you find your dentures difficult to control.

**General tips for good mouth health and avoiding tooth decay**
Parkinson's can make it more difficult to look after your teeth and mouth health and might lead to certain issues including drooling, swallowing and dry mouth (see pages 1 - 2). The following general tips can help you keep control of these problems.

To keep up the very best mouth health and avoid tooth decay you should:

- brush your teeth twice a day with a toothpaste containing at least 1350 ppm fluoride. Ask your dentist if you are not sure about the level of fluoride in your toothpaste – they may be able to prescribe you a toothpaste with a higher concentration of fluoride
- use a daily fluoride mouthwash at a different time to brushing
- brush last thing at night and one other time during the day
- try not to rinse your mouth after spitting out your toothpaste

Your dentist may also advise a fluoride mouth rinse or gel to use when you are not brushing your teeth. This is important if you have a dry mouth as you are more likely to get tooth decay. They may also apply a fluoride varnish to your teeth, which strengthens the enamel.
Sugar
The bacteria in plaque changes sugar into acid, which attacks your teeth. Cutting down on sugar in your diet can reduce tooth decay.

The following can help you balance the amount of sugar in your diet:

- You should try not to have more than 30 grams of sugar (7 sugar cubes) per day.
- Try not to eat or drink sugary things more than four times a day. How often sugar is in contact with your teeth can be more damaging than the amount.
- Your snacks between meals should be sugar free, for example cheese or vegetables.
- You should try and restrict sugary drinks to meal times. Try drinking water or sugar-free tea or coffee between meals.
- Cut down on foods such as biscuits and cake.
- Be aware of the sugar in fruit juice, smoothies, honey and syrups (like maple and golden) as these foods and drinks can also lead to tooth decay.
More information and support

The British Society of Gerodontology
www.gerodontology.com
contact@gerodontology.com

British Dental Association
www.bda.org
enquiries@bda.org
020 7935 0875

The British Society of Disability and Oral Health
www.bsdh.org

NHS
How does sugar in our diet affect our health?

Parkinson’s nurses
Parkinson's nurses provide expert advice and support to people with Parkinson's and those who care for them. They can also make contact with other health and social care professionals to make sure your needs are met.

The role of the Parkinson's nurse varies. Each will offer different services, aiming to meet local needs. Some nurses are based in the community, whereas others are based in hospital settings.

Many Parkinson’s nurses are independent prescribers. This means they can prescribe and make adjustments to medication, so someone with Parkinson's doesn't always need to see their specialist for changes to or queries about their Parkinson’s drugs.

Parkinson’s nurses may not be available in every area, but your GP or specialist can give you more details on local services.

You can find out more at parkinsons.org.uk/nurses

Information and support from Parkinson’s UK
You can call our free confidential helpline for general support and information. Call 0808 800 0303 (calls are free from UK landlines and most mobile networks) or email hello@parkinsons.org.uk.

We run a peer support service if you’d like to talk on the phone with someone affected by Parkinson’s who has faced similar issues to you. The service is free and confidential – ring the helpline to talk to someone about being matched with a volunteer.

Our helpline can put you in touch with one of our Parkinson’s local advisers, who give one-to-one information and support to anyone affected by Parkinson’s. They can also provide links to local groups and services.

We have a self-management programme for people with Parkinson's, partners and carers. It is an opportunity to reflect on life with the condition, learn about self-management and think about the future. To find out if there is a group near you, visit parkinsons.org.uk/selfmanagement
Our website parkinsons.org.uk has a lot of information about Parkinson's and everyday life with the condition. You can also find details of your local support team and your nearest local group meeting at parkinsons.org.uk/localtoyou

Visit parkinsons.org.uk/forum to chat to other people with similar experiences on our online discussion forum.

Thank you
Thank you very much to everyone who contributed to or reviewed this information sheet:

Stella Gay, Advanced Nurse Practitioner – Parkinson’s, St Thomas’ Hospital

Christine Arnold. Senior Dentist, Specialist Special Care Dentistry, Countess of Chester Hospital

Thanks also to our information review group and other people affected by Parkinson’s who provided feedback.

Can you help?
At Parkinson’s UK, we are totally dependent on donations from individuals and organisations to fund the work that we do. There are many ways that you can help us to support people with Parkinson’s.

If you would like to get involved, please contact our Supporter Services team on 0800 138 6593 or visit our website at parkinsons.org.uk/donate. Thank you.

Our information
All of our most up-to-date information is available at parkinsons.org.uk/informationsupport. If you’d prefer to read one of our printed leaflets or booklets, find out how to place an order at parkinsons.org.uk/orderingresources or by calling 0300 123 3689.

We make every effort to ensure that our services provide current, unbiased and accurate information. We hope that this will add to any professional advice you receive and help you to make any decisions you may face. Please do continue to talk to your health and social care team if you are worried about any aspect of living with Parkinson’s.

If you’d like to find out more about how we put our information together, including references and the sources of evidence we use, please contact us at publications@parkinsons.org.uk
1. Please choose the option that best fits you.
   - I have Parkinson's and was diagnosed in
   - I care for someone with Parkinson's
   - I have a friend or family member with Parkinson's
   - I'm a professional working with people with Parkinson's
   - Other (please specify)

2. Where did you get this information from?
   - GP
   - Specialist
   - Parkinson's nurse
   - Parkinson's UK local group
   - Parkinson's UK local adviser
   - Ordered directly from us
   - Call to the helpline
   - Other (please specify)

3. Has it answered all your questions?
   - Yes, completely
   - Yes, mostly
   - Not sure
   - Partly
   - Not at all

4. How easy was it to understand?
   - Very easy
   - Easy
   - Not sure
   - Quite difficult
   - Very difficult

5. Has it helped you manage your condition better, or make choices that have improved your life in some way?
   - It helped a lot
   - It helped a little
   - No change
   - It didn't help
   - It made things worse

6. What is your ethnic background?*
   - Asian or Asian British
   - Black or Black British
   - Chinese
   - Mixed
   - White British
   - White other
   - Other (please specify)

*We ask about your ethnicity to ensure our information is reaching a broad range of people. However, this question is optional.

Want to hear more from us?
   - I would like a response to my feedback
   - I would like to be a member of Parkinson's UK
   - I'm interested in joining the Information review group, to offer feedback on Parkinson's UK information

If you've answered yes to any of these options, please complete your details below.

Name
Address
Email
Telephone

How would you prefer us to contact you?   Email   Post   Phone

We will not pass on your details to any other organisation or third party. To find out more, read our privacy policy at parkinsons.org.uk/termsandconditions
Every hour, two people in the UK are told they have Parkinson’s – a brain condition that turns lives upside down, leaving a future full of uncertainty.

Parkinson’s UK is here to make sure people have whatever they need to take back control – from information to inspiration.

We want everyone to get the best health and social care. So we bring professionals together to drive improvements that enable people to live life to the full.

Ultimately, we want to end Parkinson’s. That’s why we inspire and support the international research community to develop life-changing treatments, faster. And we won’t stop until we find a cure.

Together we can bring forward the day when no one fears Parkinson’s.

Parkinson’s UK
Free confidential helpline 0808 800 0303
Monday to Friday 9am–7pm, Saturday 10am–2pm. Interpreting available.
NGT Relay 18001 0808 800 0303 (for use with smart phones, tablets, PCs and other devices).
For more information see www.ngts.org.uk
hello@parkinsons.org.uk
parkinsons.org.uk