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| **Name:** |
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| 9B-4 |
| **Pathology Question:** |
| How does MS affect a patients oral health and what are some oral manifestations? |
| **Report:** |
| MS is a demyelinating disease that causes damage to the central nervous system. Some of the first signs of MS are numbness, pain, muscle weakness, and spasms to the body and muscles. This is an autoimmune and inflammatory disease. MS has a negative impact on an individuals oral health. For many suffering from MS, access to dental care becomes exceedingly more difficult because they may require physical assistance. Due to the nature of the disease, medications are used only to treat the sympotms. Some of these medications may side effects affecting the oral health.  With these muscle spasms it may become harder to maintain good oral health. Something as simple as holding a toothbrush or floss may seems impossible due to the muscular pain and spasms. Therefore, it is usually a good idea to have an in-home nurse or caretaker to aid in many activities especially those dealing with oral hygiene. Having said that, because these activities become tough, adequate oral hygiene will become very hard to achieve given the fact that they may be on many medications that have significant side effects and they may not be visiting their dentist as much because of their need for physical assistance. Another issue that arises with MS, is dysarthria. This happens because the muscles that aid in speech become damaged making it hard to swallow and speak. Some other manifestations include paresthesia in the mouth, hands, and feet due to nerve damage, trigeminal neuralgia which in the mouth can cause excrutiating pain when simply brushing teeth or flossing, and numbness to the orofacial structures.  One specific medication that is used to treat the pain assiociated with MS, is Dilantin. However, taking Dilantin may cause a serious side effect of gingival hyperplasia which can be painful and lead to red and bleeding gums. Having already mentioned muscle pain, it may be very difficult to maintain this for an MS patient especially alongside the many other issues that are already causing them pain. It is important to remember that these patients may require physical assistance due to their muscle weakness. More than likely they will have bad inadequate oral hygiene practices because they are incapable of doing them do to the nature of their disease. Appointments for MS patients should be short and in the morning in order to reduce the likelihood of a relapse. Finally, when considering an FPD/RPD it is important to consider the physical ability of that patient to maintain that prosthesis in order to maintain good oral health |
| **References:** |
| Fallata, A., Salter, A., Tyry, T., Cutter, G., & Marrie, R. (2017). Trigeminal Neuralgia Commonly Precedes the Diagnosis of Multiple Sclerosis. Retrieved October 22, 2020, from https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5649347/  O;, H. (n.d.). Prevalence and characteristics of dysarthria in a multiple-sclerosis incidence cohort: Relation to neurological data. Retrieved October 22, 2020, from https://pubmed.ncbi.nlm.nih.gov/10782009/  S;, F. (n.d.). Multiple sclerosis and oral care. Retrieved October 22, 2020, from https://pubmed.ncbi.nlm.nih.gov/12222018/ |