

DHYG 243-EXAM #1 PAPER

WHAT I WANTED TO KNOW AND WHY IT'S WORTH KNOWING.

Dentifrices-What I want to know about dentifrices are the basic components of toothpaste. I also want to know what types of dentifrices are available for patient selection, such as: caries control, gingival health (antimicrobial), calculus prevention, desensitization, whitening, and halitosis. I feel that these topics are worth knowing because it provides science-based evidence of which type of dentifrice is right for each patient's needs.

Working for Hearing Impaired Patients- What I want to know about working with hearing impaired patients are the differences in the types of hearing impairment. I also want to know the different methods of communication used for communicating with patients with hearing impairment. I feel that these topics are worth knowing because knowing the differences in hearing impairment can help a clinician determine how to better communicate to a hearing impaired patient.

Special Needs and Geriatric Dentistry- What I want to know about working with special needs and geriatric patients is recognizing the possible complications these patients may have and how to properly care for these patients. I feel that this information is worth knowing because it will help me to address the needs of these patients and to help them feel comfortable in the dental environment.

Endocrine and Metabolic Diseases- What I want to know about these diseases is the differences between hyperadrenalism, hypoadrenalism, hyperthyroidism, and hypothyroidism. I also want to know the signs and symptoms of these diseases, including types I and II diabetes. I feel that this

information is worth knowing because I want to be able to recognize the signs and symptoms of these diseases in order to help my patients. Some patients may not realize that they have a disease until they go to the dental clinic. A dental professional may be the first to refer the patient to the physician.

WHAT I DID TO FIND OUT.

What I did to find the information I wanted to know was to review the information in both the power point handouts and the text book, *Dental Management of the Medically Compromised Patient*. I found that both sources were an excellent source of information. The power point handouts were good for a brief overview of the information. The text book had more in-depth information over each topic.

WHAT I FOUND OUT.

Dentifrices- The basic components of dentifrices include: detergents to lower surface tension, penetrate and loosen deposits and emulsify debris and foam; cleaning and polishing agents to clean and polish the teeth; binders prevent separation; humectants to retain moisture, prevent hardening and stabilize the dentifrice; preservatives to prevent microbial growth and improve shelf life; sweeteners to flavor the dentifrice, flavoring agents for patient acceptance and masking; and coloring agents for attractiveness. Patients that want to control caries should use products that contain fluoride which includes, stannous fluoride, sodium fluoride, sodium monofluorophosphate, and amine fluoride. Patients that want gingival health with antimicrobial agents can use products that contain Triclosan, silica, chlorhexadine, lactoperoxidase, zinc, and stabilized stannous fluoride. Products for calculus prevention are pyrophosphate system, zinc system, and silica. Patients that have problems with sensitivity can use products that contain fluoride, potassium nitrate, strontium chloride, and sodium citrate. For whitening, products such

as triclosan and carbamide peroxide are recommended. If a patient has problems with bad breath, products that contain hydrogen peroxide are great.

Working with Patient with Hearing Impairment- Hearing loss can be conductive, sensorineural, or mixed. Conductive is a reduction in sound level due to inefficient sound conduction which may be corrected through surgery. Sensorineural hearing loss occurs when there is damage to the cochlea or the 8th cranial nerve. This type of hearing loss is permanent. Mixed is when both types of hearing loss are present. The causes of hearing loss can include diseases, medications, trauma, and exposure to harmful noise levels or aging. A good tip for communicating with a hearing impaired patient is to ask the patient what their preferred method of communication is such as: sign language, fingerspelling, oral communication, speechreading or writing. Also an important note is for patients to remove their hearing aids when the ultrasonic or drill is being used.

Special Needs and Geriatric Dentistry- Possible complications concerning this population can and usually include physical and mental impairments, decreased visual and hearing abilities, arthritis, insulin controlled diabetes mellitus, and depression. Oral considerations can include xerostomia, decreased wound healing, root caries, root exposure, and denture care. To address the needs of this population, a dental hygienist should prevent medical emergencies by taking vital signs, access to oxygen, consulting with physician or care provider, antibiotic prophylaxis, scheduling, good communication, performing oral evaluations, adapting services to patient environment, patient positioning, appliance care, and providing preventative education such as: power brushes and flosses, salivary substitutes.

Endocrine and Metabolic Diseases- Symptoms of type I diabetes include polydipsia, polyuria, polyphagia, and weight loss. Symptoms of type II diabetes include slight weight flux, nausea,

blurred vision, parasthesia, dry flushed skin, loss of sensation, postural hypotension and increased thirst. Symptoms of hyperadrenalism or Cushing's disease are weight gain, moon face, buffalo hump, hypertension, and acne. Symptoms of hypoadrenalism or Addison's disease are brown pigmentation of skin or melanotic macules on oral tissues. Symptoms of hyperthyroidism are nervousness, fatigue, increased heart rate, heat intolerance, weight loss, and warm and moist skin. Symptoms of hypothyroidism are dwarfism, weight gain, broad flat nose, weight set eyes, thick lips, protruding tongue, delayed eruption of teeth, and malocclusion.

WHAT I THINK THIS MEANS.

I feel that reviewing this information has provided a wealth of important information for proper patient care. This knowledge will help me to understand and be more knowledgeable on dental and patient considerations, recommendations on dentifrices, differences in diseases and hearing impairment, and how to meet the needs of the special needs and geriatric population.

HOW I THINK I MIGHT BE ABLE TO USE WHAT I'VE LEARNED HERE.

The information reviewed for dentifrices will help me provide the right recommendation for each patient's needs. Every patient has different needs whether it's whitening, halitosis, gingival health, caries control or sensitivity. I feel confident that I can make the right recommendations. The information reviewed for working with patients with hearing impairment has helped me understand the differences in hearing loss and the possible causes. I learned more about the types of communication used for patients with hearing loss. I feel confident that I can properly communicate with my hearing impaired patients. I also am more aware that using high pitched instruments, such as the ultrasonic, can have an effect on my hearing in the future. The information reviewed for working with patients with special needs and geriatric patients has helped me understand the possible complications these patients may have and how certain

medications can play a role in oral care. I also learned more about patient considerations such: scheduling, appliance care, patient positioning, preventative care, oral screenings, and antibiotic prophylaxis. The information reviewed on endocrine and metabolic diseases has helped me better understand the differences between the diseases and their symptoms. Overall, I have learned how to better meet the needs of my patients.