

# DENTAL CARE IN SCLERODERMA

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Scleroderma poses particular challenges to maintaining oral health. People living with scleroderma are more likely to be affected by conditions such as microstomia (small mouth opening), xerostomia (dry mouth), loosening of teeth, jaw pain and gum disease. Reduced manual dexterity may make flossing and brushing teeth more difficult. Please speak to your dentist about adaptive devices or tools that can help. More frequent dental check-ups are also important in managing dental care and minimizing oral health care problems.

### Suggestions for your dental appointments:

- Tell your dentist you have scleroderma. Discuss your condition and how it affects you and your oral health
- Schedule short appointments for one area or one tooth at a time, or longer exam and care appointments with breaks
- Keep your lips lubricated with petroleum jelly
- Do your physiotherapy immediately before your appointment
- Schedule appointments at the best time of day for you
- Wear gloves and bring a blanket in case the office is cold

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## MICROSTOMIA (SMALL MOUTH)

### PROBLEMS

- Small opening makes it difficult for patients and professionals to clean teeth
- Tightness of the mucosa (lining of the mouth) may pull gums away from the teeth
- Can be difficult to insert and remove dentures; upper dentures become more easily dislodged

### SOLUTIONS

- Work with dentist and hygienist to develop accommodations for effective brushing and flossing
- Ask your dentist to use children's instruments if necessary
- Exercises to improve flexibility of mouth, lips and jaw muscles
- Periodontal (gum) surgery may improve mobility of the tongue and cheeks
- 2-part dentures to ease their passage into the mouth; osseointegrated implants (titanium screws within the jaw) to secure dentures and bridges

## LOOSENING OF TEETH

No treatment specific to scleroderma: traditional treatment for periodontal disease may include surgery and extraction.

## XEROSTOMIA (DRY MOUTH)

### PROBLEMS

- Harder to swallow food
- Increased incidence of fungal infections (thrush)
- Increases tooth decay and gum disease

### SOLUTIONS

- Pay special time and attention to brushing and flossing
- Stay hydrated: drink plenty of water
- Avoid alcohol and smoking, which can worsen existing dryness
- Use medication to increase saliva production or use artificial saliva
- Sugar free hard candies to increase salivary flow.

## JAW PAIN

### PROBLEMS

- Affects the ability to chew
- May be confused with tooth ache

### SOLUTIONS

- Exercise and massage
- Dental appliances
- Medications: muscle relaxants and/or anti-inflammatories
- Ask your dentist to schedule breaks in your longer dental appointments to allow you to rest your jaw

## PREVENTION OF GINGIVITIS AND DENTAL DECAY

Scleroderma can have a significant adverse effect on oral health.

A number of strategies can help lessen the risks of long term consequences of oral disease (such as extractions, loose teeth, tooth loss, gum disease, abscesses):

### DIET

- Avoid excess sticky or sweet foods, which increase the accumulation of dental plaque leading to decay
- Avoid soda and carbonated/fizzy drinks, which cause mild chemical erosion of the tooth surfaces
- Limit spicy and acidic foods which may exacerbate gastrointestinal reflux disease (GERD/acid reflux)

### DENTAL HYGIENE

- Clean teeth at least twice daily
- Floss between teeth daily
- Use a toothbrush with a small head and soft nylon bristles that can reach all areas of the mouth
- Use toothpaste and mouthwash containing fluoride

### LIFESTYLE

- Use massage and oral exercises to keep your mouth and face more flexible
- Limit smoking and alcohol consumption
- Get assistance from a helper/caregiver

**DISCLAIMER:** This pamphlet is meant to provide information on scleroderma and is not meant to be used as a diagnostic tool or to suggest treatment or medications. Always consult your physician regarding details of symptoms, diagnosis, and treatment.

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