



Geriatric Dentistry

CARING FOR OUR AGING POPULATION

EDITED BY **PAULA K. FRIEDMAN**

WILEY Blackwell



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EDITED BY

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Dedication

This book is dedicated to a number of significant individuals in my life:

My mother, Beatrice Gibbs, who demonstrated every day of her life what it meant to age successfully. She was my inspiration, my supporter, and a role model of a woman achiever in a time when there were very few women pushing boundaries.

My husband Emanuel, who encouraged me throughout the extensive and demanding writing

and editing process. He never complained about the amount of time I spent on this legacy project. He shares my passion for accomplishing goals, and I am grateful for his continual support.

My patient, committed, responsive, and receptive contributors. The book could not have happened without all of you.

Introduction

Caring for and about our aging population has been a priority for me since I was a child. I had a close relationship with my grandmother and grandfather. They were warm, wonderful people. When my grandmother was in her 60s, she developed Alzheimer's disease. It was painful to witness her slow, inexorable decline. My grandfather was a strong man in his youth – a wrestling champion, in fact, before he immigrated to the United States. But he too suffered the wounds and arrows of aging. Although he retained his mental sharpness, his physical status belied his mental acuity.

From the moment that each of us is born, we are aging. For some, the prospect of aging is a very serious matter. And there is no doubt that there may be serious issues associated with aging, including health issues, mental status, financial considerations, and housing and transportation challenges. However, there is humor associated with the aging process. Consider that aging is a very relative term. To a teenager, someone aged 25 is “old.” Many of our patients, themselves senior citizens (often in their late 80s), refer to neighbors, friends, co-residents in assisted living facilities as “they are so old,” when, in fact, the people to whom they refer are in their 90s and the person speaking may be aged 88 or 89. New phraseology has arisen to describe our aging phenomenon, such as “60 is the new 40,” or professionally speaking, “Age is just a number; it is functional status that counts.” Here is an important fact about the US population:

The age cohort of 85 and older is the most rapidly growing age cohort in the country, and the subset of that population called the “centenarians” is the quickest growing segment percentage-wise.

The rapidly growing baby boomer cohort in the USA is turning 65 at the rate of approximately 10 000 people per day, and will continue to do so for approximately 15 more years by the time this book is

published. The paradox that faces us is that although the aging population is increasing, to a large extent they are invisible – in a social sense, in a healthcare sense, and in a public policy sense.

The “demographic imperative,” or the mandate of the numbers, makes clear that the training of all health professionals must include information about how to care for our aging population. This book was conceived on the premise that there were a number of very good books on geriatric dentistry that were robust reviews of the literature and full of evidence-based information and conclusions. There is far less resource information available on the practical aspects of treating and caring for elders, a “how to” guide, of sorts. This book is intended to address that void in the literature. The intended audiences are widely defined: dental students, dentists, hygiene students, hygienists, mid-level providers, allied (non-dental) health providers, and the lay public. Each of the author contributors was charged with providing the most practical information possible in their assigned/chosen area. We tried to include case studies, where appropriate, in each chapter to illustrate the content in a practical clinical application.

The reader will note a number of terms used throughout the book that are intended to be synonymous. They were not changed out of respect for the integrity of each contributor's work. Throughout the text, the terms “aged,” “geriatric,” “older adults,” “senior citizens,” and “elders” are all interchangeable. Terms like “cognitively impaired,” “Alzheimer's disease,” and “dementia” are similarly synonymous. We did not make all chapters read with the same terminology because all of those terms are commonly used in discussions by and with patients and families. Although the editor contributed to each and every chapter, the editor elected not to include her name as a co-author because the primary work of each chapter is that of the listed contributors.

A word about the process of writing and editing a book: I am confident that few of the contributors fully understood the magnitude of the time commitment that each was making in agreeing to participate in this endeavor. We are fortunate to have a combination of well-known, esteemed experts in the field and some newer authors whose contributions are equally valued. Our original timeline was extended a little bit due to a number of factors; the overarching theme for people not being able to meet original commitments is that “life happens.” During the process of writing this book, we collectively experienced health, marriage, birth, death, illness, and recovery. Despite the powerful impact of life on the authors, people maintained their dedication and commitment to getting the job done. The motivation that drove everyone, I believe, was that we each want to leave a legacy of our knowledge and experience to pass on to dental providers of the future. There is no doubt that techniques, methodology, and materials may change over time, but the underlying tenet of the importance of caring for our aging population will always remain the same.

The book is organized into six sections: Underlying Principles of Aging, Clinical Practice, Decision Making and Treatment Planning, Common Geriatric Oral Conditions and their Clinical Implications, Care Delivery, and Future Vision. Each section contains a number of chapters and topics. In the section on Underlying Principles of Aging (**Part 1**), we will learn about implications for the oral cavity, racial and ethnic disparities in oral status and aging, death and dying, palliative care, and functional status. The next section (**Part 2**) is Clinical Practice. In this section, legal and financial considerations for the provider including living arrangements (assisted living and continuous care communities), informed consent, and advanced directives/living will, the Palmore’s “Facts on Aging” attitudinal instrument, and practical tips and techniques for creating a senior-friendly dental

office are discussed. **Part 3** covers Decision Making and Treatment Planning. In this section, assessing the elderly patient, treatment considerations, and evidence-based practice are covered. **Part 4** addresses common geriatric oral conditions and their clinical implication. In this section, we learn about root caries, periodontal disease, diseases of the pulp, diseases of the oral mucous membranes, xerostomia, prosthetic considerations, and medical complexities. **Part 5** focuses on care delivery, including delivery systems – nursing home dentistry, portable dentistry, home visits, and senior centers. Additionally, this section informs the reader about oral health care in long-term care facilities (including policies and practice); dental professionals as part of an interdisciplinary team and the expanding oral health team. The final part, **Part 6**, consists of a visionary and challenging chapter “Planning for the Future,” which includes political implications and potential professional initiatives. Chapters may complement/supplement other chapters, but each is designed to provide information independent of other chapters.

Everyone who worked on this book is a champion. The contributors each gave of himself or herself to make this the best book possible. My liaison with Wiley Blackwell, Nancy Turner, gave regular guidance and support and was an additional invaluable interface with the authors. It is our collective hope and expectation that the many years of expertise reflected in the pages of these chapters will help to reinforce the importance of oral health to overall health in our aging population, and moreover will provide the tools, techniques, and resources for those committed to improving the oral health status of our aging population. We hope that you will use the valuable contents to benefit someone you care for, care about, or will care for in the future.

Paula K. Friedman, DDS, MSD, MPH
Editor

About the Companion Website

This book is accompanied by a companion website:

www.wiley.com/go/friedman/geriatricdentistry

The website includes:

- Powerpoints of all figures from the book for downloading
- Discussion questions and answers

Scan this QR code to visit the companion website:



PART 1

Underlying Principles of Aging