



DOWN SYNDROME PROGRAM
www.massgeneral.org/downsyndrome

Dental Care Tips for People with Down Syndrome

Taking care of your mouth, including your teeth and gums, is an important part of caring for your overall health. In this handout, learn about common challenges that people with Down syndrome may experience and tips to address those.

WHAT CAN MAKE DENTAL CARE TOUGH FOR PEOPLE WITH DOWN SYNDROME?

There are a few things that can make dental care challenging for people with Down syndrome. This can include certain features present at birth and lack of access to proper dental care or to dental care providers who care for people with Down syndrome. Often, people with Down syndrome need a caregiver to help with dental care.

Facial features

- **Low** tone in the face can impact breastfeeding, swallowing, chewing, and speaking
- Protrusion of tongue and lower jaw may lead to open mouth breathing, which is associated with increased drooling and dental infections

WHAT ARE COMMON DENTAL HABITS IN PEOPLE WITH DOWN SYNDROME?

- **Bruxism** (tooth grinding)
- Infrequent tooth brushing
- Infrequent dentist visits
- Pocketing food in cheeks while eating
- **Pica** (a condition in which a person ingests or mouths non-edible items)

WHAT ARE COMMON REASONS FOR NOT BRUSHING TEETH AT LEAST TWICE A DAY?

- Sensory overload, such as disliking the feeling of toothbrush in the mouth or the smell, taste or texture of toothpaste
- Gagging during toothbrushing
- Bleeding gums, which could be due to poor brushing technique, brush type or sensitive gums. It can also be a sign of gum disease.

WHAT ARE TIPS TO HELP WITH DENTAL CARE IF MY LOVED ONE IS NOT BRUSHING THEIR TEETH TWICE A DAY?

Caregivers should encourage regular brushing or flossing despite minor gum bleeds. However, excessive bleeding should be checked for other underlying conditions, such as gum disease.

Hygiene

- Daily use of **chlorhexidine** (in a rinse, spray bottle or toothbrush), an antimicrobial agent if necessary. This prevents gum disease.
- Use fluoride toothpaste or fluoride rinse

Change up brushing habits

- Special **manual** (non-electric) toothbrush, such as the three-sided toothbrush, can help reduce gum inflammation compared to other brushes
- Use a flosser that comes with a handle instead of traditional floss
- If an electric toothbrush provides too much vibration, use a manual toothbrush

Diet

- Avoid excessive sweets, refined carbohydrates and medicines that contain sugar
- Encourage your loved one with Down syndrome to drink water more often. Limit sweetened beverages, such as soda or juice.

WHAT IS GINGIVITIS AND PERIODONTAL DISEASE?

Periodontal disease occurs when there is an infection and **inflammation** (swelling or irritation) of the gums and bones around the teeth. Periodontal disease is the most common oral health problem in people who have Down syndrome. It is often caused by plaque build-up that irritates the gums. The best way to prevent this is to continually practice good dental care habits, like brushing teeth at least twice a day and flossing daily when possible.

WHAT IS GINGIVITIS AND PERIODONTAL DISEASE?

Gingivitis is a milder form of periodontal disease affecting the gums around the base of the teeth. Daily tooth-brushing and flossing between the teeth can prevent gum disease and gingivitis.

WHAT ARE CAVITIES?

Cavities (tooth decay) can affect **primary** (baby) and **permanent** (adult) teeth, leading to problems with eating or speaking and causing pain. Although periodontal disease is more of an issue for people with Down syndrome, cavities (also called **caries**) are also very common. Cavities in primary teeth and permanent teeth need to be **restored** (filled) in a timely manner because they can spread to other teeth.

Restoring cavities can be an overwhelming or stressful experience for anyone. Your loved one's care team may recommend finding a dentist that specializes in caring for patients with Down syndrome, such as the Division of Dentistry at Massachusetts General Hospital and MassGeneral Hospital for Children (MGHfC). You can also help prevent cavities by practicing good dental care habits, such as regular brushing, flossing, using fluoride rinses and limiting sugary foods and drinks.

WHAT ARE THE SIGNS OF BRUXISM?

Bruxism is very common in people with Down syndrome. The main signs of **bruxism** are clenching and grinding of teeth. People can have bruxism while they are awake, asleep or both. It can be caused by behavioral (as part of harmless repetitive habits), psychosocial, anatomical or sleep position concerns. Bruxism could also be related to stress, anxiety and sleep-related disorders, such as sleep apnea. Sometimes, bruxism can lead to further changes in tooth shape and cause jaw pain.

WHAT ARE SOME TIPS TO MANAGE BRUXISM?

There are many ways to manage bruxism. It is important to talk with the care team to figure out what works best for your loved one. Bruxism can stop on its own over time. Patient or caregivers should check for new pain symptoms or tooth **anomalies** (unusual changes in tooth shape, size or symptoms). Let your dentist know. If symptoms do not go away, your care team will do sleep studies to check whether your loved one may have sleep apnea or sleep-related disorders.

WHAT ARE SOME TIPS TO MANAGE BRUXISM? (CONTINUED)

Bruxism can be managed at home in the following ways:

- Reduce stressors and promote a relaxing night-time routine
- Head, neck, or jaw massage to relieve muscle pain
- Avoid hard to chew foods before bed
- Use additional or structured pillow for appropriate head and neck support
- Ask the dentist or sleep doctor about proper mouth and jaw positioning during sleep
- Practice mouth exercises from The Sleep Foundation® at sleepfoundation.org/bruxism/tips
 1. Close lips gently while also preventing top and bottom teeth from touching
 2. Tongue is pressed against roof of the mouth without touching teeth
 3. Hold position from step 1 and 2 for as long as you can

ARE THERE DENTAL DEVICES THAT THE DENTIST OR ORTHODONTIST CAN RECOMMEND TO HELP WITH BRUXISM?

Yes, there are many dental devices that can help manage bruxism, including:

- Mouth guards (not usually recommended for children because of the risk of choking)
- Mandibular advancement devices (MAD, or a device used to treat sleep apnea that opens the airway by gently moving the lower jaw forward)

Most importantly, visit the dentist at least every 6 months.

- Refer to the following links for a list of dentists who have experience caring for children with Down syndrome
 - www.massgeneral.org/dentistry/about/doctors
 - www.scdonline.org/page/Referral

Down Syndrome Program

Mass General Hospital for Children
55 Fruit Street, Suite 6C
Boston, MA 02114


www.massgeneral.org/downsyndrome

888-MGHfC4U (888-644-3248) | massgeneralforchildren.org

For more information please call

617-643-8912

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