



Older *and* wiser? Take this quiz to find out!

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How much do you REALLY know about aging and oral health? Whether you're 25, 55, or 75 years old (even 100), you need to be aware of your oral health and the impact it can have on your overall health. You have to get older -- you may as well get wiser!

Circle One

- | | | |
|---|-------------|--------------|
| 1. Losing teeth is a natural part of aging. | True | False |
| 2. Bad breath is an inevitable part of getting older. | True | False |
| 3. My dentist needs to know everything about my medical history. | True | False |
| 4. You can fix uncomfortable dentures yourself by adjusting them at home. | True | False |
| 5. A decrease in the senses of smell and taste are part of the aging process. | True | False |
| 6. I have full dentures so I don't need to go to the dentist anymore. | True | False |
| 7. Only children need fluoride. | True | False |
| 8. Your mouth makes less saliva as you age. | True | False |
| 9. People who have difficulty holding a toothbrush (such as those with painful arthritis) should use a mouthwash instead of brushing. | True | False |
| 10. Oral cancer is more likely to strike after age 40. | True | False |

Turn the page for the correct answers...

1. Losing teeth is a natural part of aging.

FALSE! People lose teeth because of periodontal disease, not aging. When plaque builds on the surface of a tooth, the gum tissue surrounding the tooth begins to recede, exposing and weakening the supporting tissue and bone. If left untreated, periodontal disease may cause the tooth to get loose and eventually fall out. Age has nothing to do with it! To keep your teeth for a lifetime, follow good brushing and flossing habits, and see your dentist regularly.¹

2. Bad breath is an inevitable part of getting older.

FALSE! Bad breath can be caused by many sources, but age is not one of them! Food particles and plaque in your mouth produce a sulfur compound that causes the bad breath known as “halitosis.” The good news is that brushing and flossing can eliminate much of that odor. Some diseases, such as periodontal disease, diabetes, kidney or liver problems can cause bad breath too. Smoking and dry mouth are also bad breath culprits! To help alleviate the problem, try brushing your tongue lightly with your tooth brush or a specially-designed tongue scraper. If you wear dentures, be sure to clean them as recommended by your dentist. And if you’re still experiencing bad breath, see your dentist—he or she can diagnose and address the problem.²

3. My dentist needs to know everything about my medical history.

TRUE! Started any new medications lately? Taking any herbal remedies? How about a recent surgery or medical diagnosis? Your dentist needs to know about all of these things, whether or not you think they’re related to your mouth. Providing a full medical history helps your dentist diagnose dental problems and detect symptoms that may indicate a medical problem.³

4. You can fix uncomfortable dentures yourself by adjusting them at home.

FALSE! Need a little extra adhesive in your dentures? Are certain foods more difficult to eat than usual? Your dentures may need an adjustment. Sometimes the bone and tissue in your mouth can change, making your dentures loose and uncomfortable. If that’s the case, don’t try to fix the dentures yourself. You could break them or make them difficult to repair. And if you’ve already paid for dentures, you certainly don’t want to pay for them again! See your dentist as soon as possible to get your dentures fitting just right.⁴

5. A decrease in the senses of smell and taste are part of the aging process.

TRUE! Take time to stop and smell the roses... while you’re young! As we get older, the number of functioning smell receptors in the brain decreases. Gradually, it takes a more intense smell to be identified and differentiated from other smells. Your ability to taste may decrease as well. As you age, your tongue may lose some of its papillae—the little bumps that contain your taste buds and help grip food while your teeth are chewing. And if you have a hard time tasting food, you might not feel like eating, or you might change how you eat. For example, if it’s harder to taste salty foods, you may add too much extra salt, which could be bad for your body nutritionally. If you’re experiencing a loss in your sense of smell or taste, be sure to talk to your dentist. He or she can help you sort through the various causes and explore ways to help alleviate the problem.⁵

6. I have full dentures so I don’t need to go to the dentist anymore.

FALSE! You should continue to visit the dentist regularly, even if you have full dentures. Your dentist will make sure that your dentures are fitting properly, and perform a complete oral exam to check for any other problems within your mouth. Your dentist will also perform an oral cancer screening. An important test when you consider that according to the American Dental Association more than 25% of oral cancers occur in people who do not smoke and have no other risk factors.⁴

7. Only children need fluoride.

FALSE! Fluoride helps prevent tooth decay and is an important part of your dental hygiene routine. Using a fluoride toothpaste and mouth rinse can help reduce your risk for cavities and periodontal (gum) disease. If you’re susceptible to tooth decay, your dentist may recommend additional fluoride treatments.⁶

¹ American Academy of Periodontology. “Fallacies About Gum Disease,” <http://perio.org/consumer/f1.html>. Accessed 7/7/10.

² Academy of General Dentistry. “What is Halitosis?” <http://www.knowyourteeth.com/infobites/abc/article/?abc=H&iid=306&aid=1254>. Accessed 7/7/10.

³ Academy of General Dentistry. “Why Do I Need To Share My Medical History with My Dentist?” <http://www.knowyourteeth.com/infobites/abc/article/?abc=D&iid=344&aid=1223>. Accessed 7/7/10.

⁴ American Dental Association. “Dentures,” <http://www.ada.org/2996.aspx?currentTab=1>. Accessed 7/7/10.

⁵ Sense of Smell Institute. “Aging Well with Your Sense of Smell,” www.senseofsmell.org/pdf/AgingWell.pdf. Accessed 7/7/10. University of Southern California, Ethel Percy Andrus Gerontology Center. “Changes with Normal Aging, Oral Soft Tissues,” http://ageworks.com/information_on_aging/oralhealth/softtissue.shtml. Accessed 7/7/10.

⁶ National Institutes of Health, Medline Plus. “Areas of Age-related Change,” <http://www.nlm.nih.gov/medlineplus/magazine/issues/winter07/articles/winter07pg10-13.html>. Accessed 7/7/10.

8. Your mouth makes less saliva as you age.

FALSE! "Side effects may include dry mouth." It's written on your prescription bottle, on your cough medicine, and your over-the-counter pain medicine. Dry mouth, also known as xerostomia (zero-stoh-me-ah), is caused by reduced saliva flow in the mouth and is a common problem among older adults. But age is not the cause. Xerostomia is usually related to certain medical disorders and/or medications. Dry mouth can also cause problems with your oral health. Without saliva to wash away food, plaque and bacteria can build up on your teeth and gums, having the potential to cause decay and periodontal disease. Ask your dentist about any dry mouth symptoms you may be experiencing. Sometimes the solution can be as simple as changing medications.⁷

9. People who have difficulty holding a toothbrush (such as those with painful arthritis) should use a mouthwash instead of brushing.

FALSE! Your teeth need brushing, and no mouthwash can replace that. Brushing removes plaque from your teeth and gums more thoroughly than mouthwash and is essential to keeping your teeth healthy. Sometimes older adults with arthritis have trouble brushing their teeth because they cannot easily hold the toothbrush. The National Institute on Aging recommends the following solutions to help make it easier to brush:

- Slide a bicycle grip or foam tube over the handle of the toothbrush.
- Buy a toothbrush with a larger handle.
- Attach the toothbrush handle to your hand with a wide elastic band.

If you're still having difficulty, your dentist may be able to help find a solution that works for your needs.⁸

10. Oral cancer is more likely to strike after age 40.

TRUE! The National Institute of Dental and Craniofacial Research recommends that you see a dentist or physician if any of the following symptoms last for more than two weeks.

- A sore, irritation, lump or thick patch in your mouth, lip, or throat
- A white or red patch in your mouth
- A feeling that something is caught in your throat
- Difficulty chewing or swallowing
- Difficulty moving your jaw or tongue
- Numbness in your tongue or other areas of your mouth
- Swelling of your jaw that causes dentures to fit poorly or become uncomfortable
- Pain in one ear without hearing loss

Your dentist will screen you for oral cancer at every exam, so be sure to keep routine appointments. Early detection is the best cure.⁹

Check out these online resources to learn more about aging and oral health.

- The American Geriatrics Society Foundation for Health in Aging; www.healthinaging.org
- National Institute on Aging; www.nia.nih.gov
- American Dental Association; www.ada.org

⁷ American Dental Association. "How Medications Can Affect Your Oral Health," http://www.ada.org/sections/scienceAndResearch/pdfs/patient_51.pdf. Accessed 7/7/10

⁸ National Institute on Aging. "Taking Care of Your Teeth and Mouth," <http://www.nia.nih.gov/HealthInformation/Publications/teeth.htm>. Accessed 7/7/10.

⁹ National Institute of Dental and Craniofacial Research. "Oral Cancer," <http://www.nidcr.nih.gov/OralHealth/Topics/OralCancer/OralCancer.htm>. Accessed 7/7/10.

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