



Now and then, everyone has complained that getting older is a pain in the behind.

But, a pain in the teeth?

“Never in the history of mankind have we had to deal with the senior citizen’s teeth - at least not like this,” said Dr. Michael Thompson, past president of the Arizona Dental Association, “The Baby Boomer generation’s parents wore dentures, but today’s seniors live longer in retirement, have more of their own teeth and have more complex medical conditions.”

This means today’s seniors have a greater need for dental care than all previous generations.

### **The Facts**

The majority of Baby Boomers had neither fluoride in the water, nor pre-cavity sealants. As a result, many in this generation had fillings as children and teens, which weakened the structure of their teeth. Fast forward to a Boomer in his/her 40s. The weakened teeth begin to break down and require crowns.

“Crowns can last 20 to 30 years,” said Dr. Thompson. “That means in retirement there is a significant need for replacements.

However, this time around there will probably be no insurance, our income stream has stopped, and there is a limited amount of savings.

According to the American Dental Association, oral health issues among senior citizens abound:

- 25% of the senior population will be managing severe gum disease
- Increased prescription drug use and gaining itself lowers saliva production, thereby increasing the rate of tooth decay
- Changes in memory, dexterity and mental health can also lead to ineffective dental hygiene
- Oral cancer rates are the highest in populations over 65

“One person dies each hour in the United States as a result of head and neck cancer, which includes cancers of the mouth, throat and tongue,” said Dr. Murali Murty of Arizona Center for Cancer Care.”

As April is Oral Cancer Month, it is a perfect to educate oneself about symptoms, detection and protection against this disease, most common in seniors but growing among all age groups.

### **Oral Cancer**

According to Murty, dentists are among the first to catch oral cancers in their earliest forms among the senior population during regular, routine check-ups, which should always include a full exam of the tongue and neck, in addition to the traditional tartar removal and X-rays.

“Often oral cancer starts in the tongue, and in the floor of the mouth, and many can move into the neck - even the lungs,” said Dr. Murty.

According to Dr. Murty, symptoms can include patches on the inside of one’s mouth, sores that won’t heal, chronic bleeding, loose teeth and even on-going earaches.

If a doctor or dentist sees signs of oral cancer, he/she will often order a biopsy to confirm.

“If cancer is present, treatment is based on stage of disease,” said Dr. Murty. “Patients are more likely to get surgery and/or radiation for early stage of cancer. Chemotherapy is used in more advanced disease, but there has been an increasing role for chemotherapy and drug treatment in earlier stage disease in order to prevent the cancer from spreading elsewhere in the body.”

In addition, targeted drug therapy based on the biology and genetics of the cancer cells is an exciting and evolving technology being used for many types of cancer. Improvements in radiation targeting in the past 10 years have increased doctors’ ability to use radiation to cure patients while minimizing the side effects of therapy.

*For more information on oral cancer and other critical oral issues, please visit [WWW.ADA.ORG](http://WWW.ADA.ORG).*