



Eating Disorders & Oral Health

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Information for Eating Disorder Sufferers
and their Carers

In association with



Eating Disorder
Centre **Cork**



UCC

University College Cork, Ireland
Coláiste na hOllscoile Corcaigh

Dental School & Hospital

Information for Eating Disorder Sufferers

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This booklet is designed to improve your understanding of how having an eating disorder (ED) can affect your oral health.

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INFORMATION FOR EATING DISORDER SUFFERERS

Can an eating disorder do harm to my teeth and mouth?

Unfortunately, yes. The most common harm seen in the mouths of those who vomit often is dental erosion, where the acid from your stomach softens the outer coating of the teeth and wears it away over time.

In other ED sufferers who frequently eat very sugary foods (such as in emotional eating), dental decay may be evident. Many ED sufferers also have altered saliva and feel like they have a dry mouth which can be uncomfortable.

How will I know if I have damaged my teeth and need to see a dentist?

The most common signs of dental erosion are sensitive teeth, teeth that are getting yellower /darker in colour and chipping or shortening of your top front teeth. However, there are more subtle signs on the backs of your teeth, which appear sooner than this and a visit to your dentist will identify any problem at the earliest opportunity.

The earlier damage is identified, the sooner steps can be put in place to halt or slow down it's progression. If you do frequently vomit, it is important that you see your dentist regularly and do not wait for visible signs to develop.

Can the damage be reversed?

Once teeth have been worn away by stomach acid there is no way to "grow back" the lost tooth surface. Thankfully, dental filling materials are available in a wide range of natural tooth colours. The use of these materials can restore the original shape of any short or chipped teeth and can reduce the sensitivity caused by dental erosion.

In more severe cases, porcelain crowns may be needed. Complex dental work may not be an option until the dental erosion (and the eating disorder itself) are under control. Even if you are not at this point, there are some practical tips to minimise the damage of vomiting.

Can I reduce the damage if I am currently suffering from an eating disorder?

Yes you can. Dental erosion, dental decay and dry mouth are common issues affecting sufferers of eating disorders. However, there are certain measures you can take to reduce the damage caused by these effects.



Dental Erosion

After vomiting, do not brush your teeth for at least an hour. During this time, the tooth has been softened by your stomach acid and is most vulnerable to being worn away. Instead, rinse with water mixed with a little baking soda (1 teaspoon in an 8oz glass) or plain tap water.

Sugar free chewing gum is useful to reduce the acidity in your mouth but should not be used

immediately after vomiting as even the chewing action can be harsh on your softened teeth.

If your teeth are sensitive from dental erosion your dentist may be able to paint a protective varnish on them or may even prescribe a high fluoride toothpaste for you to get from your pharmacist. You should also reduce any other acid exposure to your teeth such as fruit juices, smoothies or fizzy drinks (even diet or sugar free versions). Even sparkling water is acidic so stick to still instead.

You should also use a soft-bristled toothbrush and change it frequently – a medium or hard bristled toothbrush is too harsh to acid damaged teeth and can accelerate dental erosion.

Dry Mouth

If you feel that your mouth is dry (which can result from the eating disorder itself or as a side effect of medications you may be prescribed in the management of the ED), there are saliva substitutes available for you to try out. This may make your mouth more comfortable, particularly at night time when dry mouth can be most troublesome.

Dental Decay

If your eating disorder involves frequently eating high sugar foods (such as Emotional Eating or Night Eating Syndrome), you will be at a high risk of dental decay. Inform your dentist. They can prescribe you toothpaste to reduce your risk and will let you know how often you should be seen for your dental check-ups.

Do I need to tell my dentist that I have an eating disorder?



It is helpful if you do. Often your dentist may suspect it after they examine your teeth and having an open and honest conversation with your dentist allows them to tailor their treatment and advice to best help you. You can also give your dentist permission to contact your GP and dietician and this allows all of you to plan a strategy together.

"it is important to keep your dentist informed of your eating disorder diagnosis"

Many medications used in the treatment of eating disorders can cause dry mouth as a side effect and also some patients with Anorexia Nervosa can have heart rhythm disorders which may be affected by local anaesthetics. That is why it is important to keep your dentist informed of your eating disorder diagnosis, your management of it and any health complications you may have as a result.

INFORMATION FOR CARERS OF EATING DISORDER SUFFERERS

It is important to note that the approach to oral health management for someone in active recovery from an eating disorder, is different, than for the person who is not yet willing to admit they have the condition. In addition, the role of a parent (when the ED sufferer is a child) is different to that of family and friends of an adult with an ED.

Should I tell the dentist that my child has an eating disorder?

If your child is comfortable talking to their dentist, and acknowledges that they have an eating disorder, it may be best to let the child tell the dentist. This also gives the dentist an opportunity to find out from the children (in their own words) what their feelings may be about their teeth and if the appearance of their teeth may be contributing to a negative body image.

If the parent speaks for the child, they run the risk of voicing their own fears for the child's teeth using negative language (e.g. "I'm afraid they will ruin their teeth forever..."). This may lead to further anxiety in the child about their appearance.

Can I stay with my child during their dental treatment?

Although the age of majority is 18, the law in Ireland recognises that 16 and 17 year olds have the capacity to consent to dental treatment on their own behalf. Even if your child is under 18, your dentist may still prefer to treat your child without you in the room, particularly if this is your child's preference.

Of course, it is no problem if your child would feel more comfortable with you present but it is important to let your child answer any questions from the dentist for themselves. If the dentist needs more information about your child's eating disorder, they may speak with the GP, dietician or therapist.

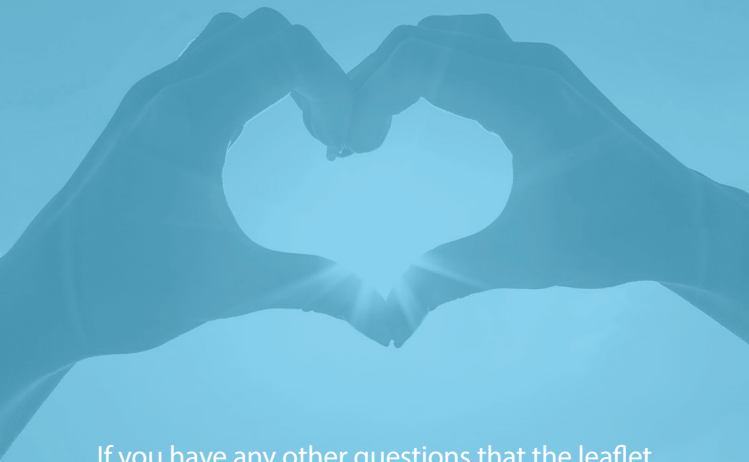
I suspect my child is making themselves vomit, can I ask the dentist to check for signs?

This is a difficult situation, as your dentist may feel bound by confidentiality and may not feel comfortable discussing a child (who is their patient) behind their back. The dentist may also not feel adequately trained to broach such a sensitive topic with the child themselves if an eating disorder had not been diagnosed.

It would be reasonable however, for your dentist to contact the child's GP and report any findings of dental erosion or oral signs of malnutrition to the GP. The GP can then combine this information with any other information they have (such as BMI) to determine if an eating disorder is likely.



Eating Disorder Centre Cork is a not for profit treatment centre which provides compassionate professional therapy and support for those recovering from an eating disorder.



If you have any other questions that the leaflet does not answer or you would like further explanation, please contact the Eating Disorder Centre Cork for more information.

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