Matters

Dental Care for the Cancer Patient Part 1 of 3



Chemotherapy and radiation for the treatment of many cancers have proven to be lifesaving or life prolonging for millions of people around the world. Although major technical and medical advancements have improved the effectiveness of chemotherapy and radiation, many cancer patients still experience significant side effects from damage that can be done to our normal cells while trying to eradicate the cancerous ones. The gastrointestinal tract, including the mouth, is particularly prone to damage. While most of these complications are manageable they can sometimes become severe enough that cancer treatment must be completely stopped.

patients Many receiving aggressive radiation and/or chemotherapy for treatment of cancer anywhere in the body, and nearly all patients being treated for head and neck cancer will experience some oral complications.

The most common oral problems occurring after radiation and chemotherapy are mucositis (an inflammation of the mucous membranes in the mouth), infection, delayed healing and excessive bleeding. Dehydration and malnutrition, brought on by difficulties in swallowing, may also occur. Radiation therapy to the head and neck may injure the salivary glands leading to dry mouth, damage to the jaw muscles and joints, and can cause permanent destruction of the blood vessels that supply the jaw bones with vital nutrients and oxygen.

During and sometimes long after cancer treatment these altercations to the oral environment can lead not only to increased likelihood of tooth decay and other oral infections but also to delayed healing after infection or surgery, and an increase in the rate and severity of complications following oral surgery.

Pre-existing oral conditions may increase the risk of infection or other problems. Tartar on the teeth, broken teeth, failing dental restorations, gum disease and ill fitting dentures can turn into major problems during and after cancer thera-

Bacteria and fungi that normally live in the mouth may develop into an infection when the immune system is not working well, or when white blood cell counts are low. Both of these issues can be brought on by either radiation or chemotherapy. These complications can result in a significant reduction in the quality of life for the patient. It's important for anyone who is

about to undergo chemothera-

py and/or radiation to consult a dentist who is well informed about the special preventative and treatment needs for cancer patients. This should always be done in consulta- It's important for with anyone who is the treating oncologist about to undergo who can chemotherapy advise the and/or radiation dentist about the to consult a specifics of the cancer treatments

since the type, area dosages for both radiation and chemotherapy will determine the potential for oral and dental concerns.

dentist.

Next week in part 2 of this article, we will be discussing the specifics of oral health management for the cancer patient and the following week will focus on reconstruction for the patient who has undergone cancer surgery involving the maxillofacial area.

Yours for better oral health,

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