The dental challenges of eating disorders

Professor Andrew Eder explores the effects of bulimia on oral health, most specifically in terms of erosion as a result of self-induced vomiting, and how patients may be helped

With The Costs of Eating Disorders – Social, Health and Economic Impacts report estimating that more than 725,000 people in the UK are affected by an eating disorder, there is a very good chance that more than a few of your patients may need help in this area. The eating disorder that tends to have the greatest effect on oral health is bulimia nervosa, which involves the sufferer caught in a cycle of eating large quantities of food and then vomiting. Known as purging, in order to prevent weight gain. This can result in severe damage to the teeth in the form of erosion, so it is certainly something that we, as dental care professionals, should be keeping an eye out for. Indeed, the extended periods of intentional vomiting suffered by bulimics can have considerable impact on the dentition and result in substantial oral health complications, including:

- The teeth can become rounded, smooth and shiny and lose their surface characteristics
- Incisel edges appear translucent
- Cupping forms in the dentine
- Cervical lesions are shallow and rounded
- Restorations tend to be unaltered by erosion and will therefore stand proud of the surrounding tooth tissue.

Advice is the first step

This can, of course, be a challenging issue to raise with a patient, as shame and denial are common features of an eating disorder. To try to overcome such barriers, it is essential we do our very best to make the patient feel comfortable and not intimidated. Assure them you have time to talk things through and ask questions in a non-judgemental way aimed at encouraging the patient to identify the origin of their oral health problems. One way that can help in this endeavour is to share your examination findings with the patient and explain how their symptoms may be linked. Advice rather than treatment features highly during the initial stage of helping a patient suffering with bulimia. Diet analysis and general guidance on how to reduce the effect of acidic food and drinks should be given, such as:

- Drinking water or low fat milk in preference to other liquids
- Using a straw positioned toward the back of the mouth when drinking acidic beverages
- Avoiding washing acidic drinks around the mouth
- Rinsing the mouth with water or fluoridated mouthwash after consuming acidic foodstuffs.

In addition, oral health advice for a patient whose dentition is compromised by bulimia includes:

- Issuing a fluoride rinse or gel and prescribing a highly-fluoridated toothpaste and a soft toothbrush for daily use
- Not brushing immediately after vomiting or consuming acidic foodstuffs, but rinsing with a fluoridated mouthwash and chewing sugar-free, xylitol-sweetened gum afterwards.

Extra protection can be provided via calcium and phosphate ions, such as those found in GC Tooth Mousse, helping to restore the mineral balance, neutralise acidic challenges and stimulate saliva flow.

In the workplace

According to the charity Beat (b-eat.co.uk), eating disorders are serious mental illnesses affecting 725,000 men and women of all ages and backgrounds in the UK. Last year, the charity surveyed more than 650 people with experience of an eating disorder and found other failings by employers:

- 62% said their employers’ impact on their recovery was ‘unhelpful’
- Two thirds of people were unable to access support for their eating disorder at work

The responsibility for early identification and treatment of these serious mental illnesses should not lie with the health service alone. The whole of society must act if we are to improve the lives of everybody affected by an eating disorder.

The NICE Guidelines on workplace health state that: ‘Employees, senior leadership and managers, human resource teams, and all those with a remit for workplace health should make health and wellbeing a core priority for the top management of the organisation. Value the strategic importance and benefits of a healthy workplace. Employers should establish a strategic and robust plan for promoting health and wellbeing and make clear the link between employees’ health and wellbeing and improved productivity. Ensure all managers in the organisation are committed to the health and wellbeing of their workforce and act as good role models; incorporate health and wellbeing in all relevant corporate policies and communications. Be aware that a return to work from sickness does not necessarily indicate that an employee’s health and wellbeing has improved. When developing return-to-work policies, take into account that aggressive return to work policies can encourage absence or the deterioration of the organisation. Recruit managers who have the positive leadership traits associated with improved employee health and wellbeing. These traits include being open and approachable and encouraging new ideas. Ensure health and wellbeing policies are included in any induction, training and development programmes for new staff.

Incorporate health and wellbeing in all relevant corporate policies and communications. Be aware that a return to work from sickness does not necessarily indicate that an employee’s health and wellbeing has improved. When developing return-to-work policies, take into account that aggressive return to work policies can encourage absence or the deterioration of the organisation. Recruit managers who have the positive leadership traits associated with improved employee health and wellbeing. These traits include being open and approachable and encouraging new ideas. Ensure health and wellbeing policies are included in any induction, training and development programmes for new staff. Have a proactive and visible commitment to health and safety and its role in improving the health and wellbeing of employees, that is, view health and safety as part of the culture of a caring and supportive employer – not only a statutory requirement. For information about the signs and symptoms of eating disorders, go to www.b-eat.co.uk.