



Dr. Deborah Stymiest

“Success in addressing the oral health needs of seniors will require a collective effort, including the sharing of resources and ideas, and above all, strong working partnerships.”

Seniors Deserve Optimal Care

I recently visited a long-term care facility to see an 87-year-old female resident with Alzheimer's disease who required my care as a dentist. The staff and family were concerned about this lady because she was not eating, had been losing weight and was complaining of pain in her mouth. Equipped with my Dremel tool and flashlight, I headed to the nursing home, relieved that this patient had complete upper and lower dentures and not a mouth full of restorative work devastated by a lack of oral hygiene and regular care.

I was able to provide relief for my patient by adjusting her ill-fitting dentures. I recommended that the dentures be left out at night and that a diet of soft foods be followed. However, I realized that I would be lucky if this dear lady even recognized me on my next visit, let alone comprehend what to do with her dentures. I added my directions to the long list of other special instructions posted for the already overworked staff. As I left the residence, it struck me that to enjoy the late stages of life, it is essential to have a healthy, pain-free mouth and smile.

In my previous column, I indicated that the CDA Board of Directors has chosen seniors' oral health care as our priority issue for the coming year. We are acutely aware that the oral health of Canadian seniors needs to be recognized as an essential component of overall health and quality of life. There is a great deal of work to be done before we can ensure that all Canadian seniors have adequate care today and in the future.

As a profession, we are fortunate to have many dedicated volunteers working on this complex issue. In 2008, CDA's Committee on Clinical and Scientific Affairs submitted a comprehensive report on seniors' oral health care to the Board. The report contains a collection of cur-

rent oral health care initiatives for seniors from across the country along with sound recommendations and actions that we must consider. These recommendations include developing service models for delivery of care to seniors and developing standards for daily oral hygiene in long-term care facilities.

The current system of private practice based on fee for service creates profound disparities for those in older age groups and does not ensure adequate dental care for all. Access to care and the inability of some to afford care will continue to pose a challenge. As a profession, we must be willing to open our minds to a variety of models of care. Furthermore, an infrastructure must be put in place to encourage the development of innovative ideas and non-traditional approaches to meet the oral health care needs of seniors. This should include special training for dental professionals geared to the aging population.

The profession must be committed for the long term on the issue of senior oral health care. It will require collaboration between many groups, including the dental and medical professions, governments, educators, caregivers and seniors. The report of the Committee on Clinical and Scientific Affairs will guide CDA's future efforts and we will continue to work diligently on this issue, most notably during the upcoming "Days on the Hill" government relations event. As we move forward, success in addressing the oral health needs of seniors will require a collective effort, including the sharing of resources and ideas, and above all, strong working partnerships.

In closing, I am pleased to tell you that I returned to the long-term care facility and the lady with the denture sore spots is doing well. She is eating again and enjoying her food. She is now pain-free and smiling at her visitors. I know this well because I saw her just a short while ago. The 87-year-old lady who needed my care so much is my mother.

Deborah Stymiest, BSc, DDS
president@cda-adc.ca