

Eating Disorders and Looking After Your Teeth

Eating disorders can cause permanent dental and oral health problems. It is important to seek professional advice from a dentist if you have concerns about your dental health or someone else's. It is better to see your dentist as soon as you can, so an oral care plan can be recommended.

This factsheet was prepared using information provided by the National Eating Disorders Collaboration (NEDC) and the Australian Dental Association (ADA).

Common signs and symptoms of dental problems associated with eating disorders

Dental erosion is a common sign in people with eating disorders. Erosion is the loss of tooth mineral due to the chemical attack of acids. Acids come from the sugar in foods or from stomach acid due to reflux or vomiting.

People with bulimia nervosa or binge eating disorder that frequently consume sugary foods and drinks are at higher risk of developing tooth decay. People with bulimia nervosa tend to experience the most damage to their teeth as a result of frequent vomiting.

Dental erosion is commonly seen on the back surfaces of the upper front teeth in patients with bulimia nervosa. This can result in the tooth being sensitive to hot and cold and in some cases may result in more severe pain.

People with all types of eating disorders who have a low intake of water may have poor quality saliva which fails to protect the teeth adequately compared to well hydrated saliva. Due to dehydration, people with eating disorders may experience dry or cracked lips and a dry or burning sensation in the mouth.

Poor intake of vitamins may lead to infections at the corners of the mouth known as angular chelitis or inflammation of the tongue called glossitis.

Long-term dental problems

Your teeth are primarily made up of two hard materials – dental enamel and dentine. The dental enamel is the hard, translucent and highly mineralised outer layer of the tooth. Dentine is a less well-mineralised tissue that forms the bulk of the tooth. This inner material protects the blood vessels and nerves inside the tooth. Dentine is not as strong as enamel and when exposed to the oral environment is dissolved more easily by acid and is more prone to tooth wear.

In people with long-term eating disorders the enamel on certain teeth surfaces can be completely dissolved and may expose the dentine which can then dissolve and wear more quickly. This may result in the nerve inside the tooth being exposed, which may require a root canal filling or extraction. The loss of tooth height may also require dental treatment to restore the appearance and function of teeth. People with long-term anorexia may suffer from osteoporosis, which can weaken the jaw bone, leading to weakened teeth and potentially tooth loss.

Fact Sheet

Should I tell my dentist about my eating disorder?

Yes, if you have an eating disorder you should discuss this with your dentist so that an oral care plan can be developed to limit the damage to the teeth. Dentists, like doctors, will deal with these issues in a non-judgemental and confidential manner. It may be useful to ask someone from your treatment team or support network to help you with this conversation. They could help by writing a letter, email or calling your Dentist to describe your situation.

Any general dentist is able to help, although in some cases you may be referred to a specialist.

How to take care of your teeth regularly

In general, you should brush your teeth twice a day using a normal fluoridated toothpaste; however in some cases a dentist may prescribe toothpaste with higher fluoride to increase the protection of your teeth. A daily fluoride mouth rinse may also be recommended for some people. It is also advised to clean between the teeth at least once per day using dental floss or interdental brushes. Tooth Mousse® is a crème made from milk that contains calcium and phosphate and by applying to teeth can help repair acid damage to the teeth and help neutralise acids. This mousse may be used after vomiting or binge eating to prevent tooth decay. People with milk protein allergies should not use it. Tooth Mousse® can be purchased from your dentist.

Creating a routine around cleaning your teeth is something your support team could help you with. You could explore strategies together and create a plan to make dental hygiene a natural part of your day.

How to protect your teeth from the effects of acid

During the process of vomiting, acid from the stomach flows over the teeth. This acid can dissolve the mineral that makes up our teeth. Some of the outer mineral will dissolve completely but a layer of softened mineral will also remain. This softened mineral can be re-hardened by saliva and Tooth Mousse®.

Try not to brush your teeth after vomiting as the softened enamel or dentine is at its weakest and your toothbrush can wear it away and cause further damage. Instead, immediately after vomiting it is better to try and neutralise the acids.

A teaspoon of sodium bicarbonate (a regular household cooking ingredient – bicarb soda) can be dissolved in water and used to rinse the mouth. This will neutralise any remaining acids and prevent them from damaging the teeth any further.

Rubbing Tooth Mousse[™] around the teeth after vomiting is also beneficial. This will help neutralise the acids and provide calcium and phosphate to reharden the enamel.

Chewing sugar free chewing gum can also be useful in promoting saliva flow, which provides natural calcium and phosphate to repair acid damage to the teeth.

Your dentist or dietitian may have other helpful advice around certain food and drinks that may also damage tooth enamel.

Need more information?

- For further information about dental care and services available to you visit your local dentist or alternatively contact: The Australian Dental Association – Victorian Branch Inc. Phone (03) 8825 4600 Email: ask@adavb.org
- National Eating Disorders Collaboration has worked with the Australian Dental Association to further information www.nedc.com.au
- You can read further information on Tooth Mousse® here www.gcaustralasia.com/ Products/93/Prevention/GC-Tooth-Mousse

Information for dentists and other health professionals:

 Dentistry and Eating Disorders – A professional resource developed by the National Eating Disorders Collaboration www.nedc.com.au/assets/NEDC-Resources/NEDC-Resource-Dentistry-and-EDs.pdf. Eating Disorders and Oral health – A video produced by the National Eating Disorders Collaboration and the Australian Dental Association. www.nedc.com.au/professionaldevelopment/e-learning/show/31/ eating-disorders-and-oral-health

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Contact EDV

For additional support, please contact the EDV Hub on 1300 550 236 between 9.30am – 4.30pm, Monday – Friday or email hub@eatingdisorders. org.au.

Or visit our website: www.eatingdisorders.org.au



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