

Relationship Between Oral Health and Behavioral Health



Oral pain can contribute to behavioral effects such as anxiety, fatigue, irritability, depression, and withdrawal from normal activities.

Oral Health Impact on Behavioral & Cognitive Health

- **Cognitive Functioning:**
Inflammation from periodontitis may be a risk factor in exacerbating cognitive issues, including cognitive decline.
- **Dental Phobia/Anxiety:**
Oral health problems can trigger memories of traumatic events.
- **Quality of Life:**
Poor oral health can negatively impact an individual's employment, school, and relationships.
- **Self Esteem:**
Tooth loss, decay, and broken teeth can lead to poor self-esteem.
- **Vital Functioning:**
Poor oral health can impair functional abilities such as eating and chewing, which can impact social functioning and well-being.

Behavioral & Cognitive Health Impact on Oral Health

- **Anxiety:**
Teeth grinding and clenching.
- **Bipolar & Obsessive-compulsive Disorder:**
Overzealous with brushing and flossing.
- **Depression:**
Poor oral hygiene resulting from self-neglect.
- **Eating Disorders:**
Tooth erosion from self-induced vomiting.
- **Trauma:**
Rejection of oral health services, habitual teeth grinding and clenching.
- **Medications:**
Xerostomia or dry mouth.

Oral Health Impact on Substance Use Disorder

- **Oral Pain:**
May interfere with drug treatment, abstinence, relapse.
- **Opioid Prescribing Patterns:**
Oral health providers have been among the top prescribers of opioids.
- **Use of Emergency Rooms:**
Oral health problems treated in the emergency room often utilize pain medication, which can lead to drug-seeking behavior.

Substance Use Disorder Impact on Oral Health

- **Cannabis:**
Can lead to increased risk of oral cancer, dry mouth, and periodontitis.
- **Cocaine:**
Snorting is associated with nasal septum perforation. Crack cocaine smoking produces burns and sores on the lips, face, and inside of the mouth.
- **Methamphetamine:**
Associated with teeth grinding and clenching, excessive tooth wear, dry mouth, and rampant tooth decay.
- **Opioids:**
Associated with tooth loss, tooth extractions, and decay.
- **Medications for Substance Use Disorders:**
Can result in tooth decay and dry mouth.
- **Risky Sexual Behavior:**
Substance use disorders can lead to an increase in risky sexual behaviors resulting in infectious disease such as HIV/AIDS and oral cancer.

CHALLENGE:

The Impact of Oral Health on Child & Adolescent Academic Readiness:

1. Poor oral health can lead to decreased school performance, poor social relationships, and less success later in life. Children experiencing oral pain are distracted, and unable to concentrate on schoolwork.
2. The worse a child's or adolescent's oral health status, the more likely they are to miss school as a result of pain and infection.
3. Among children and adolescents ages 5-18, oral pain and acute asthma similarly impact school attendance.

OPPORTUNITY:

Integration of oral health in behavioral health and substance-abuse prevention curriculum in schools can:

1. Create greater oral health literacy among high-risk children.
2. Build lifelong knowledge, skills, and habits essential to oral-behavioral health.
3. Address powerful determinants of oral disease such as family and peer influences.
4. Raise awareness of the psychosocial factors of substance use disorders on oral health.

Policy Opportunities



> Integration of Care:

- Include oral health training in early intervention home visiting programs for pregnant women and infants.
- Include oral health training in home visiting programs for older adults.

> Education & Workforce:

- Teach dental and behavioral health students and providers about the relationships between oral health and behavioral health.
- Encourage medical and behavioral health providers to integrate oral health messages when reminding patients about the importance of daily care, good nutrition, and healthy habits.
- Encourage referral and care coordination between oral health and behavioral health providers.

> Data, Payment and Quality:

- Build oral health-related quality and access measures into existing state and federal payment and delivery system reform programs that include provision of behavioral health services.
- Fund initiatives that expand data sharing and research across oral and behavioral health systems to help study the reach and impact of coordinated/integrated care models.

> Access & Advocacy:

- Maintain the adult dental benefit in the Medicaid program.
- Advocate for a dental benefit in the Medicare program.

Sources:

1. *Environmental Scan of Oral Health and Behavioral Health Integration Models* • 2. *National Council for Mental Wellbeing* • 3. *Center for Excellence of Integrated Health Solutions*
4. *Oral Health and Learning: When Children's Oral Health Suffers, So Does Their Ability to Learn*, National Maternal & Child Oral Health Resource Center



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