LINKS TO RESOURCES FROM TODAY'S MEETINGS:
DECEMBER 7, 2022

TODAY'S TOPIC: ORAL HEALTH AND VASCULITIS
Click here to see the slides from today’s discussion about oral health and vasculitis.

LINKS TO TODAY'S DISCUSSION

- VIDEO CLIP: Glucocorticoid Side-Effects: Dental
- WEBINAR: Bad to the Bone: Bone health for women
- WEBINAR: Managing Long-Term Corticosteroids
- ONLINE ARTICLE: Mouth Sores: Symptoms and Treatment Healthline.com

Remember: Consult your doctor before making any changes to your care.

VF Announcements for December 7, 2022

Upcoming VF USA Vasculitis Tours
Click here to check out the list of VF Tours scheduled in 2023

Click here to learn about other VF virtual support meetings
- Caregiver Support Group
- Parents of Children Support Group
- EGPA Cafe Zoom Chat
- Patients in the Workforce Virtual Happy Hour Chat

Pregnancy Planning and Vasculitis
Important information for patients and their providers

The best way to plug into VF news and events is our monthly, digital VF E-News newsletter. Subscribe here!
Granulomatosis with Polyangiitis (GPA), Giant Cell Arteritis (GCA) and Behçet's Syndrome are the three types of vasculitis with the most distinctive oral signs/symptoms.

- **GPA**: Vessels supplying teeth and gum (periodontal tissues) may be restricted or blocked (occluded) resulting in phantom toothache and swollen gums with red dots (strawberry gingivitis). This may result in death of the pulp tissue inside your tooth (pulpal necrosis) and damage to teeth and gums (periodontal damage).

- **GCA**: Pain in the jaw or tongue while chewing.

- **Behçet’s**: Persistent mouth sores (oral ulcerations) are very characteristic of this type of vasculitis and may be the first sign of the disease.
What effects can prednisone have on your teeth and gums?

- The bone that holds your teeth may become thin, which could lead to tooth loss.
- Teeth may become very sensitive/painful.
- Gums may swell or become more sensitive and bleed easily.
- You may be more susceptible to fungal infections such as oral thrush.
- There is some evidence that you may be more prone to cavities.
Consider seeing your dentist 4 times a year. This can help your dentist spot and treat dental problems more quickly.

Use a water flosser (WaterPik) instead of floss. Gentler on your gums. Less likely to cause bleeding and irritation.

Ask for a prescription for “Magic Mouth Wash.” If pain from ulcerations is severe or making it difficult to eat, a prescription strength anesthetizing mouth rinse can help.
The use of corticosteroids can lead to dental hypersensitivities and can weaken your teeth. Use fluoride-based toothpaste and sugarless products.

Seek medical care if you get a white exudate on your tongue or mouth. This is most likely a fungal infection (candidiasis) that can occur when you are taking corticosteroids.

You may need to take a (bone strengthener) bisphosphonate to limit the negative impact of corticosteroids on bones. If you have dental surgery planned talk to your doctor before starting bisphosphonates as they may cause necrosis (death) of the jaw bone.

Let your healthcare provider know about upcoming dental procedures as they may want to work with your dentist to adjust your medications or prescribe prophylactic antibiotics.
IT’S TIME FOR A QUICK QUIZ
Why should you notify your dentist if you are on high dose steroids?

- A. So they can be prepared for mood swings.
- B. To prevent a potentially life threatening reaction.
- C. So they know to look for signs of tooth decay and gingivitis.
- D. All of the above.
B. TO PREVENT A POTENTIALLY LIFE THREATENING REACTION.

- HOPEFULLY YOUR DENTIST IS ALREADY LOOKING FOR SIGNS OF TOOTH DECAY AND GINGIVITIS, EVEN WITHOUT BEING TOLD YOU ARE ON PREDNISONE. (IF THEY ARE NOT, YOU MIGHT NEED A NEW DENTIST.)

- THERE IS A VERY LOW RISK OF A RARE, BUT SERIOUS, CONDITION CALLED ACUTE ADRENAL INSUFFICIENCY WHEN YOU UNDERGO STRESSFUL DENTAL OR MEDICAL PROCEDURES WHILE ON PREDNISONE. EVEN THOUGH THE RISK IS EXTREMELY LOW, MOST DENTISTS WANT TO KNOW IF YOU ARE ON HIGH-DOSE STEROIDS.

- JUST AS WITH ANY MEDICAL PROCEDURE, YOUR HEALTHCARE PROVIDER, IN THIS CASE, YOUR DENTIST, NEEDS TO KNOW ALL MEDICATIONS YOU ARE TAKING. SOME VASCULITIS TREATMENTS, FOR EXAMPLE, MAY INCREASE YOUR CHANCE OF INFECTION FOLLOWING DENTAL PROCEDURES. CHECK WITH YOUR DOCTOR AND DENTIST TO SEE IF YOU NEED TO TAKE ANTIBIOTICS BEFORE DENTAL PROCEDURES.
Why is good oral hygiene so important?

- A. To prevent gingivitis and tooth decay.
- B. To increase your kissability factor.
- C. To reduce your risk of infection.
- D. All of the above.
D. ALL OF THE ABOVE

- The mouth is a primary entry route for many germs. Good oral care may help to reduce your risk of infection.

- A recent VA hospital pilot program found that better oral care for patients (simply brushing patient’s teeth regularly) resulted in a 92% decrease in non-ventilator related hospital acquired pneumonia.

- Additional studies in areas such as wound care and sepsis have shown markedly improved outcomes when patients received good oral care.
Time to Share

• What dental issues have you noticed that seem to be caused by vasculitis or the medications you are taking to treat the vasculitis?

• What has worked for you? What helpful tips have you gotten from your healthcare provider or dentist?

• What are some things you know now that you wish you had known sooner about vasculitis and oral health?