

Your Oral Health and Smoking

A guide for smokers and those who want to quit

Your dentist may be able to help you quit smoking and can diagnose and treat some conditions caused by tobacco use

Smoking can have major effects on the health of your gums, teeth, mouth and throat. Some problems caused by smoking are obvious, such as the staining or yellowing of teeth and bad breath. These are annoying or unpleasant but are not a threat to health. However, smoking may contribute to unseen and far more serious conditions, such as:

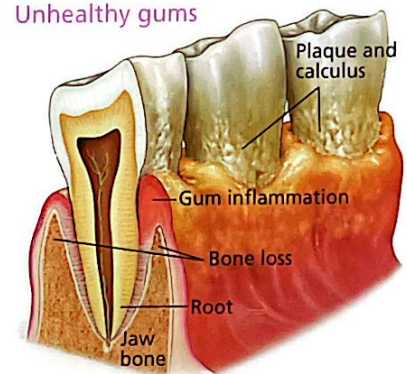
- gum disease that causes tooth loss
- increased risk of tooth decay
- leukoplakia (white patches in the mouth that may be precancerous)

■ changes in mouth and throat tissues that can lead to cancer.

Many diseases of the mouth and throat are linked to the smoking of cigarettes, pipes and cigars. Smoking does not have a "safe" level of use.

The risk of developing a smoking-related disease is "dose dependent". That is, the more you smoke, the greater your risk becomes. Your dentist can diagnose and treat many conditions related to smoking, or can refer you to a specialist, if necessary.

Unhealthy gums



Gum Disease

Gum disease is much more frequent in smokers than non-smokers. Smokers are more likely to lose one or more teeth due to gum disease and have a higher chance of needing dentures compared to non-smokers. The most common gum diseases are gingivitis and periodontitis. They are caused by plaque, a sticky film of bacteria that builds up on the teeth.

Gingivitis is an inflammation of gum tissue that usually results in bleeding gums. While gingivitis does not cause tooth loss, it needs to be treated promptly.

Periodontitis is a more serious inflammation and infection of the gums that can cause:

- pockets of infection around the roots and crowns of teeth
- loss of bone that holds teeth in place
- serious damage to gum tissue around teeth and, consequently, loose teeth
- loss of one or more teeth; in serious cases, many teeth can be lost
- tooth movement or drifting, and over-eruption of teeth.

Some smokers can have gum disease but not have obvious symptoms. Your dentist will examine your gums during

your regular check-up. If you have gum disease, or are at high risk, the ADA patient education pamphlet "Treatment of Gum Infections" may be helpful.

Signs and symptoms of gum disease

- bleeding gums during tooth brushing
- red, swollen or tender gums
- gums that have pulled away from the teeth (receding gums)
- persistent bad breath
- pus between the teeth and gums
- loose teeth
- changes in the way that the upper and lower teeth fit together (occlusion or "bite").

Leukoplakia

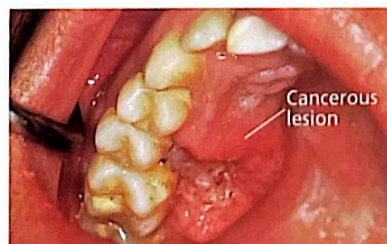
Of unknown cause, leukoplakia is a mostly white patch that involves the skin inside the mouth (mucosa). It is more frequent in tobacco users. Oral leukoplakia has a risk of developing into oral cancer. If your dentist finds a lesion, you will be referred to an oral and maxillo-facial surgeon or to an oral medicine specialist to have it tested.



A white patch inside the mouth may be an indication of leukoplakia, a lesion frequent in smokers.

Oral Cancer

The risk of oral cancer is greater among tobacco users, especially those who drink alcohol. Many early signs of oral cancer are painless and difficult to detect without an oral examination. The cure rate is highest when the oral cancer is diagnosed



Cancerous and precancerous lesions within the mouth can be painless and difficult to detect.

and treated early. The longer an oral cancer is left untreated, the greater the risk of spread to other parts of the body.

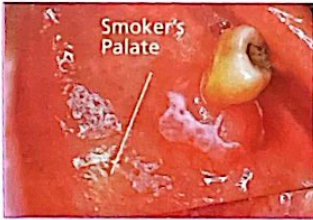
Early detection through regular oral examinations can significantly increase the chance of successful treatment. Signs and symptoms of oral cancer are:

- sores in the mouth that bleed easily or fail to heal
- white or red patches in the mouth that do not go away
- lumps or soreness in the mouth, throat or tongue
- difficulty in chewing or swallowing food
- changes in occlusion or "bite".

OTHER ORAL CONDITIONS CAUSED BY TOBACCO

Smoker's Palate

A condition where the hard palate (roof of the mouth) develops a whitish discolouration, often combined with red dots. It usually disappears when the smoker quits.



Pathology photos courtesy of Dr Michael McCullough

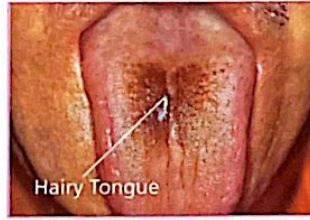
Smoker's Melanosis

A darkish discolouration on the cheeks and gums. It affects about one in 10 smokers. In most cases, mucosa colour slowly returns to normal when the person stops smoking.



Hairy Tongue

An overgrowth and thickening of hair-like protuberances. The back of the tongue turns brown or black. It also has been related to certain medicines and poor oral hygiene.



Tobacco stains

These can penetrate into tooth enamel and dentures, and discolour the teeth. A dentist can often clean or bleach the teeth, but some discolouration can be permanent.



Set a "quit" date in the near future. Have your dentist check your mouth to see what damage smoking may have caused and whether any immediate treatment is necessary.

By visiting your dentist, you are putting together a "quit" team. Your dentist can provide support throughout the quit process and advise you about additional help. Other team members such as your dental hygienist can provide encouragement and more information. Ask your family GP, family and friends to join your support group.

Quit tips from your dentist

- Contact Quitline on 137 848, and ask about the Quitline support services in your state. Quitline is a free telephone information and advice service for people who want to stop smoking and other tobacco use. A free Quit Pack containing self-help materials will be sent to you on request. See: www.quitnow.gov.au
- Avoid places and situations that put you in contact with other smokers.
- Reward yourself for reaching small goals. For example, have dinner at your favourite restaurant to celebrate one smoke-free week.
- Anticipate triggers to smoking, such as stressful situations. Prepare strategies to deal with them.
- Chew sugarless gum.
- Sip water when you have cravings.
- Use QuitCoach (www.quitcoach.org.au)
- Consider the use of nicotine replacement therapy (NRT) or the non-nicotine tablet to help you stop smoking.

How to Quit Smoking

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Nicotine replacement therapy (NRT)

Six types of NRT are available in Australia: patches, gum, lozenges, mouth sprays, oral strips and inhalers. Nicotine is absorbed through the skin (patches) or the lining of the mouth (gum, lozenges, mouth sprays, oral strips and inhalers).

NRT addresses the physical addiction to nicotine and helps to ease withdrawal symptoms during the quitting process. If you are highly motivated to quit, you are twice as likely to succeed with the help of NRT. People will also benefit from psychological and behavioural support.

NRT is available over-the-counter at pharmacies. Discuss with your dentist, pharmacist or family GP which type is most suitable for you.

Bupropion

Bupropion is a non-nicotine antidepressant tablet approved for the cessation of smoking. You will need a medical practitioner's prescription. Like NRT, bupropion works best for motivated quitters who seek extra support. Read the consumer medicine information (CMI) leaflet for bupropion, which is available from your pharmacist.

Relapse prevention

Quitting is a process, not a single event. At least five or six genuine attempts to

quit are made by most smokers before permanent success is achieved. A past attempt to quit smoking should be viewed as a positive learning experience, not as a failure.

Stay in touch with your dentist, family GP, Quitline and support team to maximise your opportunity to quit successfully.

TALK TO YOUR DENTIST

This pamphlet is a summary of diseases of the mouth linked to tobacco use. It outlines how your dentist may be able to help you quit. If you do not understand any of this information, or are not sure about the benefits of stopping smoking, your dentist will be pleased to answer questions or concerns you may have. When you have your regular check-up, tell your dentist if you smoke.

This pamphlet does not replace advice from your dentist and does not contain all known facts about the harmful effects of smoking on oral health. This information will change with time. Use this pamphlet only in consultation with your dentist.

