

“Tweaked”, “Cracked” and “Loaded”:
A Profile of the Addicted Dental Patient
Michigan Dental Association-April 28, 2022

Learning Outcomes

At the end of the presentation, the dental professional will be able to:

Detect patients with substance abuse disorders using the physical, oral and behavioral clues of the 3 most commonly abused drugs; depressants, stimulants, and opioids.

Discuss substance abuse with patients and communicate effectively with patients that are drug-seeking or under the influence of a controlled substance.

Select appropriate treatment strategies (preventive, restorative, pain-management and referral) for patients with substance use disorders.

Step 1: Detection

- **Depressants-** Benzodiazepines (Valium, Elavil, Xanax, Klonopin, Ativan), barbiturates (Phenobarbital, Mebaral), sleep aids (Soma, Sonata, Lunesta), alcohol which cause euphoria, calmness and relaxation.
 - Physical Clues: Drowsiness, clumsiness, spider angiomas, dilated pupils, irritability, amnesia
 - Oral Clues: Dry mouth, lingual erosion, oral cancer, periodontal disease



- **Stimulants-** Adderall, Ritalin, Focalin, Concerta, methamphetamine, cocaine, crack, ecstasy which cause euphoria, energy, attention, focus and hypersexuality.
 - Physical Clues: Insomnia, mood changes, dilated pupils, elevated blood pressure, extreme weight loss, skin pops
 - Oral Clues: Dry mouth, “meth mouth” (blackened, broken, rotted teeth), extremely poor oral hygiene, attrition



- **Opioids**-Vicodin, Oxycodone, Methadone, Fentanyl, heroin which cause euphoria, numbness, state of well-being.
 - Physical Clues: Lethargic, constricted pupils, track marks, weight loss, pain intolerant, coldness
 - Oral Clues: Dry mouth, cuspal caries, poor oral hygiene, attrition



Step 2: Discussion

- Use open-ended questions
- Educate your patients about the risks associated with illicit drug use
- Be objective
- Speak about your core professional values of building relationships, improving oral health outcomes, and helping your patients.

Step 3: Selection of Treatment

- Assess each patient's caries risk status (low, medium, high) by evaluating behavioral factors (drug use patterns, dietary habits, consumption of sweetened foods/beverages), and clinical indicators (presence of plaque, white spot lesions, % carious teeth)
 - Reference ***Meth Mouth Treatment Plan Assessment Form***
- Develop an individualized treatment plan that target the patient's current risk level with the goal that these interventions will lower the patient's caries risk status.
- Interventions include:
 - In-office anti-microbials, such as chlorhexidine gluconate, to reduce the periodontal pathogens



Step 3: Selection of Treatment (continued)

- Non-alcoholic mouthwash for home use
 - Dietary education to decrease consumption of fermentable carbohydrates including sweetened beverages
 - Topical fluoride varnishes
 - Use of direct restorations and cautious use of indirect restorations including complex prosthesis
- Refer patients to trained professionals specializing in the treatment and management of substance use disorders

Substance Abuse and Mental Health Services Administration (SAMHSA)
Facility Locator, www.findtreatment.samhsa.gov
1-800-662-HELP

- Contact MDA Health and Well-Being Program which assist dental team members struggling with alcoholism, substance abuse, stress, anxiety, depression and other emotional disorders!

MDA Health and Well-Being Program **517-643-4171**

Additional Resources

A State of Decay, Your Dental Guide to Understanding and Treating “Meth Mouth”, by Ronni Brown, DDS, MPH. Available at Amazon.

©*Meth Mouth Treatment Plan Assessment Form* by Ronni Brown, DDS, MPH. Available at www.DrRonniBrown.com

Brown R. *Ending the Silence: Can We Do Better*. Oregon Dental Association Membership Matter’s Magazine 2022. Reprint from DeW Life Magazine 2020. https://issuu.com/dewlife/docs/dew_autmun2020_digital.



Additional Resources (continued)

Brown R. *“How to use fluoride varnish in patients with “meth mouth”*. Dental Products Report 51(9), 2017.

<http://www.dentalproductsreport.com/dental/article/how-use-fluoride-varnish-patients-meth-mouth?page=0,1>

Brown R, Morisky D, Silverstein S. *“Meth Mouth” severity in response to drug-use patterns and dental access in methamphetamine users*. J Cal Dent Assoc, 41(6), 2013. <http://www.ncbi.nlm.nih.gov/pubmed/23875434>

Patient Brochures on the Oral Effects of Methamphetamine
www.PreventMethMouth.com

Substance Abuse and Mental Health Services Administration,
www.oas.samhsa.gov

Montana Meth Project, www.montanameth.org

National Institute on Drug Abuse.
www.nida.gov/Infofacts/methamphetamine

National Council on Patient Information and Education, www.ncpie.info

Sheff, D. Beautiful Boy: A Father's Journey Through His Son's Addiction. Beautiful Boy chronicles the heartbreaking and inspiring experience of survival, relapse, and recovery in a family coping with addiction over many years.



Additional Resources (continued)

“Warning this Drug May Kill You”, HBO Original Movie. An unflinching look at the devastating effects of addiction on four families that all began with legitimate prescriptions to dangerous painkillers.

www.hbo.com/documentaries/warning-this-drug-may-kill-you.com

“Take Your Pill”, Netflix Original Movie. In a hypercompetitive world, drugs like Adderall offer students, athletes, coders and others a way to do more, faster and better. But at what cost? <https://www.netflix.com/title/80117831>