Dental Complications of Eating Disorders
Information for Dental Practitioners

Did You Know?

Despite the wide array of physical symptoms and medical complications that accompany eating disorders (i.e. osteoporosis, electrolyte imbalance, heart failure, and gastric or esophagus ruptures), it is often the pain and discomfort related to dental complications that first causes patients to consult with a health professional.

Dental hygienists and dentists are often the first health professionals to observe signs and symptoms of disordered eating habits.

However, recent studies cite two deterrents to dental practitioners addressing eating concerns with their patients:

• Lack of knowledge of the scope and severity of eating disorders, and
• Lack of comfort in discussing their concerns or suspicions.

In spite of these deterrents, the role of dental practitioners in early detection, identification, and intervention is crucial. This information is being provided to enable dental practitioners to recognize the effects of eating disorders and talk with their patients about these concerns.

WHAT SHOULD I SAY?

The following script provides basic guidelines for dental practitioners to initiate a conversation with a patient presenting signs of disordered eating.

Introduce the Issue

• I am noticing (name the conditions) on your teeth, gums, tongue, throat, etc.
• This is something I have seen in individuals who engage in (name the behavior: e.g.: vomiting, consuming excessive diet soda, etc.).

Ask for More Information

• Can you tell me about any behaviors you may be currently engaged in that could be having this effect on your mouth?

Provide Resources

• Are you currently seeking professional help related to these behaviors?
• Because eating disorders impact your oral, mental, and physical health, it is very important to seek professional help from a counselor, medical doctor, nutritionist, support group, or some combination of these. For eating disorders information and local or national treatment referrals, contact the National Eating Disorders Association at 800-931-2237 or visit www.NationalEatingDisorders.org

Discuss Next Steps

• While you are seeking help and establishing healthier eating behaviors, I would like to suggest some immediate options for improving your oral health (i.e. mouth guards, avoid brushing immediately after vomiting, etc.).

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Effects Of An Eating Disorder On Teeth And Gums

The frequent vomiting and nutritional deficiencies that often accompany eating disorders can have severe consequences on one’s oral health.

Studies have found that up to 89% of bulimic patients show signs of tooth erosion.

Signs and Symptoms

• Loss of tissue and erosive lesions on the surface of teeth due to the effects of acid. These lesions can appear as early as 6 months from the start of the problem.
• Changes in the color, shape, and length of teeth. Teeth can become brittle, translucent, and weak.
• Increased sensitivity to temperature. In extreme cases the pulp can be exposed and cause infection, discoloration, or even pulp death.
• Enlargement of the salivary glands, dry mouth, and redness, dry, cracked lips.
• Tooth decay, which can actually be aggravated by extensive tooth brushing or rinsing following vomiting.
• Unprovoked, spontaneous pain within a particular tooth.

Changes in the mouth are often the first physical signs of an eating disorder. If you notice any of these symptoms, talk with your patient about ways to care for their teeth and mouth.

Contact the National Eating Disorders Association for more information and free brochures for your waiting room (available while supplies last).

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