Special Issue: Osteoporosis

Osteoporosis and Dentistry: An Interdisciplinary Approach to Elderly Oral Health

Ashish Pandey*

Professor & Head Daswani Dental College, affiliated with Rajasthan University of Health Sciences Jaipur, Rajasthan, India

*Corresponding author: Ashish Pandey

Professor & Head Daswani Dental College, affiliated with Rajasthan University of Health Sciences Jaipur, Rajasthan, India.

Tel: +91 8853582863

Email: ashishpande26@yahoo.co.in

Received: September 17, 2024 Accepted: October 07, 2024 Published: October 14, 2024

Abstract

Osteoporosis, a systemic skeletal disorder characterized by reduced bone density and structural deterioration, is prevalent among the elderly. With the growing aging population, this condition increasingly intersects with oral health, impacting alveolar bone density and increasing the risk of tooth loss, periodontal disease, and fractures. The interdisciplinary approach combining dental and medical care is essential for managing osteoporotic patients. Recent advances in diagnostic imaging, pharmacotherapy, and regenerative treatments have provided new tools for oral healthcare professionals. This article aims to provide a comprehensive overview of the relationship between osteoporosis and oral health, exploring its impact on dental management, with an emphasis on recent innovations in treatment strategies and the importance of collaborative care between dentists, physicians, and other healthcare providers.

Keywords: Osteoporosis; Oral health; Elderly; Bone density; Interdisciplinary care; Alveolar bone; Bisphosphonates; Periodontal disease; Dental management; Regenerative dentistry

Introduction

Osteoporosis, often referred to as a "silent disease," primarily affects postmenopausal women and the elderly, leading to diminished bone mass and an increased risk of fractures. Its global prevalence is rising, particularly with aging populations. Osteoporosis impacts not only the spine, hips, and wrists but also has significant implications for oral health. The alveolar bone, which supports the teeth, is particularly vulnerable to osteoporotic changes, resulting in higher risks of tooth loss, delayed healing after extractions, and poor outcomes in dental implant therapy.

Despite the evident connections between systemic bone health and oral health, osteoporosis remains under-recognized in dental practice. Dental professionals play a crucial role in the early detection, management, and prevention of oral complications in osteoporotic patients. This article examines the latest findings and treatment methodologies at the intersection of osteoporosis and dentistry, emphasizing the interdisciplinary nature of care.

Osteoporosis and Oral Health

The link between osteoporosis and oral health is primarily related to the loss of bone density in the alveolar bone, which can exacerbate periodontal disease and increase the risk of tooth loss. Several studies have demonstrated that osteoporotic patients, particularly postmenopausal women, exhibit more severe periodontal bone loss compared to those without the condition. This connection is believed to be due to shared pathophysiological mechanisms governing both systemic and oral bone health, particularly the imbalance between bone resorption and formation [1,2]. Osteoporosis can affect the density and quality of the maxillary and mandibular bones, complicating dental procedures such as extractions, implants, and denture fittings. For instance, dental implant success rates are lower in osteoporotic patients due to impaired osseointegration, which is critical for implant stability [3]. Furthermore, medications commonly prescribed to treat osteoporosis, such as bisphosphonates, can adversely affect oral health, including the risk of medication-related osteonecrosis of the jaw (MRONJ), a serious condition that compromises bone healing [4].

Interdisciplinary Management

Given the significant impact of osteoporosis on oral health, an interdisciplinary approach is essential for optimal patient care. Collaboration between dentists, endocrinologists, and primary care physicians ensures comprehensive management of bone health. Regular bone density screenings and assessments of oral health are vital in elderly patients, particularly those with a history of fractures or chronic conditions that predispose them to osteoporosis [5].

Dental professionals should be aware of patients' systemic health, including medications that may influence oral health outcomes. For example, bisphosphonates, commonly prescribed to reduce bone resorption, can impair healing after invasive dental procedures, increasing the risk of complications like MRONJ [6]. Dentists must communicate with the patient's medical team to evaluate the risks and benefits of dental interventions, particularly surgical ones.

Newer pharmacological therapies, such as monoclonal antibodies like denosumab, have shown promise in reducing fracture risk without the severe oral complications associated with bisphosphonates [7]. However, careful monitoring of bone turnover markers and dental health is required for patients undergoing long-term therapy with any anti-resorptive drugs.

Recent Advances in Diagnosis and Treatment

Recent technological advancements in both medicine and dentistry have facilitated better diagnosis and management of osteoporosis-related oral health issues. Advanced imaging techniques, such as Cone-Beam Computed Tomography (CBCT), offer detailed visualization of bone quality, aiding in the diagnosis of osteoporotic changes in the jaw [8]. CBCT helps assess bone density before procedures like dental implant placement, enabling more precise treatment planning and reducing the risk of implant failure.

Regenerative techniques, including bone grafts, Platelet-Rich Plasma (PRP), and stem cell therapy, are emerging as promising solutions for managing bone loss in osteoporotic patients. Although these techniques are still experimental, they hold significant potential for improving outcomes in osteoporotic patients undergoing dental treatments [9]. Digital workflows and 3D printing have also revolutionized the fabrication of dental prosthetics, allowing for more accurate and customized solutions in patients with compromised bone structures due to osteoporosis [10].

Challenges and Ethical Considerations

Despite advancements, managing osteoporosis in dental practice presents challenges. One main issue is the potential adverse effects of anti-osteoporotic medications on oral health. While bisphosphonates and other medications effectively reduce fracture risk, they can lead to severe oral complications, such as MRONJ, if not carefully managed [4,11]. Therefore, dentists must balance the need for dental procedures with the potential risks associated with these medications. Ethical considerations arise when deciding on treatment plans for elderly patients with multiple comorbidities. Given the complexity of their health conditions, invasive dental procedures should be carefully considered, and alternative, less invasive treatments may be prioritized. Patient autonomy and informed consent are paramount, particularly when discussing the risks and benefits of dental surgery in the context of osteoporosis treatment [12].

Conclusion

Osteoporosis significantly impacts oral health, particularly in the elderly population. The condition's effects on alveolar bone density, periodontal health, and the success of dental procedures make it a critical concern for dental professionals. An interdisciplinary approach, involving collaboration between dentists and medical professionals, is essential for managing osteoporotic patients and minimizing the risk of oral complications. Recent advancements in imaging, regenerative techniques, and pharmacotherapy offer promising solutions, though ethical considerations and careful management of medication-related risks remain crucial. The evolving landscape of osteoporosis treatment presents new opportunities for improving dental care for osteoporotic patients, emphasizing the need for continued research and collaboration between the fields of dentistry and medicine.

References

- Rizzoli R, Reginster JY, Boonen S, Breart G, Diez-Perez A, Felsenberg D, et al. Adverse reactions and drug-drug interactions in the management of women with postmenopausal osteoporosis. Calcif Tissue Int. 2011; 89: 91-104.
- Watts NB, Bilezikian JP, Camacho PM, Greenspan SL, Harris ST, Hodgson SF, et al. American Association of Clinical Endocrinologists Medical Guidelines for Clinical Practice for the Diagnosis and Treatment of Postmenopausal Osteoporosis. Endocr Pract. 2010; 16: 1-37.
- Khan AA, Morrison A, Hanley DA, Felseberg D, McCauley LK, O'Ryan F, et al. Diagnosis and management of osteonecrosis of the jaw: a systematic review and international consensus. J Bone Miner Res. 2015; 30: 3-23.
- Pazianas M, Miller P, Blumentals WA, Bernal M, Kothawala P. A review of the literature on osteonecrosis of the jaw in patients with osteoporosis treated with oral bisphosphonates: prevalence, risk factors, and clinical characteristics. Clin Ther. 2007; 29: 1548-1558.
- Chrcanovic BR, Albrektsson T, Wennerberg A. Dental implants in patients treated with antiresorptive drugs: a systematic review. Int J Oral Maxillofac Surg. 2016; 45: 525-530.
- 6. Söderpalm E, Abrahamsson KH, Hakeberg M. Oral health-related quality of life, oral status, and xerostomia in elderly individuals with osteoporosis. Gerodontology. 2020; 37: 142-148.
- Manavella V, Ruggero C, Torchio F, et al. Management of patients at risk of bisphosphonate-related osteonecrosis of the jaws. J Oral Pathol Med. 2021; 50: 433-443.
- Baim S, Miller PD. Perspective: Challenges in the clinical application of trabecular bone score (TBS). J Clin Densitom. 2020; 23: 343-349.
- Papapoulos SE, Cremers SC. Prolonged bisphosphonate release after treatment in children. N Engl J Med. 2012; 366: 2059-2060.
- 10. Khosla S, Shane E, Weitzmann MN. Pathophysiology of osteoporosis. Endocr Rev. 2010; 31: 504-507.
- Watts NB, Bilezikian JP. Bisphosphonates: Mechanism of action and clinical use. Endocr Pract. 2005; 11: 28-35.
- Manolagas SC, Jilka RL. Bone marrow, cytokines, and bone remodeling. In: Rosen CJ, editor. Primer on the Metabolic Bone Diseases and Disorders of Mineral Metabolism. 8th ed. Washington (DC): American Society for Bone and Mineral Research. 2013: 160-6.