

## THE NECESSITY OF TEACHING NURSES DENTAL HYGIENE.

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Text books for nurses contain very thorough instructions in the art of giving sponge, tub, and spray baths, infants' cleansing baths, and washing the hair, which is all very well and essential. Little or no instruction, however, is given the nurse in the care of patients' teeth. With our present knowledge of focal infection and its relationship to systemic diseases does not negligence in this line become a serious problem. At least three-fourths of the patients in hospitals need dental prophylaxis, the other one-fourth could profitably stand it. If apparently healthy persons develop secondary infections through focal infection, a patient suffering from a wasting disease or an acute condition, would certainly be more susceptible to disease, and the focal infection would be more potent. X-rays of devitalized teeth of patients suffering from an acute disease show rarefaction, or the attenuation of the bone due to infection. The same teeth on X-ray, subsequent to the illness, show little or no rarefaction at the root ends.

It is true that patients in hospitals give little or no attention to their teeth. This is partly due to the fact that enough emphasis is not laid upon this treatment by the physicians and nurses. The ideal procedure is that carried on by the University of Minnesota hospital. Each patient on entering is provided with a tooth brush. The nurses are trained efficiently to instruct the patients in the care of their mouths, and some are trained to do instrumentation to remove coarser calculus or tartar. Mouths presenting an advanced degree of pyorrhea and an abundant flow of pus are first scrubbed up with a piece of sterile gauze. At this time the nurses demonstrate the proper use of the tooth brush, demonstrating in their own mouths to make it more effective. Wonderful results can be obtained in this manner. The flow of pus can be checked and the puffy and irritated gums nursed back to a semi-healthy state. It is true that the primary irritant, the calculus, cannot be removed in this manner, but the injury which it produces can be reduced to the minimum. By teaching nurses the art of instrumentation, the coarser deposits are removed and the delicate instrumentation necessary in pyorrhea treatment is later done by the dentist. The tooth brushes, with dust shields, are hung in a conspicuous place at the head of the bed, being a daily reminder for diligent use.

Co-operation must be obtained between the

medical and dental professions so that dental surgeons are permanently employed in all hospitals. Surgical cases then, especially, should present healthy mouths at the time of operation, not only for the safeguarding of the patient against possible secondary infection, but also to increase his recuperative power. By healthy mouths, I do not mean simply prophylaxis in the sense of treating pyorrhea, but more important, the removal of all abscessed teeth.

The great menace, tuberculosis, is to-day very efficiently handled by sanitariums and public donations; yet the Bureau of Vital Statistics shows that in the year 1915, 98,000 people died of tuberculosis in all its forms, while 105,202 people died of heart diseases. In the year 1916, 101,396 lives were destroyed by tuberculosis and 114,171 from heart diseases. On account of the developments in the treatment of tuberculosis there has been a decline from 200.7 per 100,000 in 1907, to 141.6 in 1916, a decrease of almost thirty per cent.

What has been done to control heart disease? It is true that heart disease, to a very large extent, is preventable by proper mouth sanitation. The masses of streptococcus viridans, in dental abscesses, on tooth surfaces, in pyorrhea pockets, and tonsillar crypts, enter the circulation and localize in the heart valves, producing disease. This is only one phase of the destructive action of the streptococcus, not dealing with gall-bladder disease, arthritis, neuritis, nephritis, and many other conditions of possible focal origin. How much simpler would it be to control these diseases than tuberculosis? What small expense is connected with the treatment of a disease producing more deaths than tuberculosis and which is on the increase!

It is true that the patients in the hospitals present a very small percentage of these cases, but when suffering from other ailments they present the most susceptible group. As I have said before, the treatment is simple and is threefold: (1) Co-operation between medical and dental professions; (2) Establishing of a dental department in hospitals; (3) Training of nurses in dental hygiene.

The nurse's part in this great work is a very important one. It is she who comes in intimate contact with the patient and can instruct and watch the patient perform his dental toilet. It would be impossible for one man to accomplish that which the nurse could be trained to handle so efficiently. Let us then strive to give the patient a fair chance and make use of the knowledge which we now possess. Let us prepare our nurses with the proper training necessary in carrying on this important work.

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