**Oral Manifestations and Considerations**

**Oral**
- Oral/dental trauma from TBI or self-injurious behaviors
- Bruxism
- GERD
- Inadequate oral hygiene due to cognitive impairments, spasticity and ataxia

**Other Potential Disorders/Concerns**
- Seizures
- Depression/Anxiety
- Post-traumatic stress disorder
- Personality disorders
- Substance abuse

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**Oral Side Effects of Commonly Prescribed Medications**

**Medication:** Manifestations from TBI vary; therefore a range of medications may be prescribed:

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>MEDICATION</th>
<th>SIDE EFFECTS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Muscle Relaxants</strong></td>
<td>Xerostomia</td>
</tr>
<tr>
<td>Repetitive Behaviors</td>
<td><strong>Antidepressants</strong></td>
<td>Xerostomia, dysgeusia, stomatitis, gingivitis, glossitis, sialadenitis, bruxism, dysphagia, discolored tongue, oral edema</td>
</tr>
<tr>
<td>Aggressive Behaviors</td>
<td>A. <strong>Anticonvulsants</strong> (Dilantin)</td>
<td>A. Gingival hyperplasia, xerostomia, stomatitis, glossitis, dysgeusia</td>
</tr>
<tr>
<td></td>
<td>B. <strong>Antipsychotics</strong></td>
<td>B. Xerostomia, sialorrhea, dysphagia, dysgeusia, stomatitis, gingivitis, tongue edema, glossitis, discolored tongue</td>
</tr>
<tr>
<td>Hyperactivity</td>
<td>A. <strong>Antihypertensive</strong></td>
<td>A. Xerostomia, dysphagia, sialadenitis, dysgeusia</td>
</tr>
<tr>
<td></td>
<td>B. <strong>CNS Stimulant</strong></td>
<td>B. Xerostomia</td>
</tr>
</tbody>
</table>
Parent/Caregiver Support and Guidance

- Discourage consumption of cariogenic foods and beverages.
- Prescribe sugar-free medications, if available.
- Recommend preventive measures, such as topical fluoride and sealants.
- Advise the use of fluoridated toothpaste twice daily and support the family in following dental care instructions.
- Instruct caregiver on appropriate protocol following dental trauma (locate/preserve missing tooth and put in cold milk; seek immediate professional care).
- Review safety issues appropriate to the age of the child, such as mouth guards to prevent oral-facial trauma.
- Discuss habits that may harm the child’s teeth, such as propping baby bottles, putting child to bed with bottle.
- Refer to dentist any oral developmental abnormalities.

Additional information: Special Needs Fact Sheets for Providers and Caregivers

References


Additional Resources

- NIH Institute for Traumatic Brain Injury
- Special Care: an Oral Health Professionals Guide to Serving Young Children with Special Health Care Needs
- Bright Futures Oral Health Pocket Guide
- American Academy of Pediatrics Oral Health Initiative
- MCH Resource Center
- ASTDD-Special Needs
- Block Oral Disease, MA
- NOHIC-NIDCR publications