

Parkinson's disease and oral health status: an approach to the public health aspect

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EDITORIAL

Parkinson's disease (PD) is a serious neurodegenerative disorder that is estimated to affect thousands of people worldwide (1). Its main features are the presence of intracellular α -synuclein-positive inclusions, known as Lewy bodies and Lewy neuritis, and the nigrostriatal cell loss (2).

It is worth highlighting that the PD prevalence increases steadily with age. Regarding to the prevalence by sex, a higher prevalence has been reported in males. Moreover, interestingly, individuals from North America, Europe and Australia appear to be more susceptible to this disease than individuals from Asia (1).

PD patients, in turn, present several motor and non-motor symptoms. Hyposmia, sleep disorders, depression and constipation are examples of some of the non-motor symptoms (2,3). Among the motor symptoms are the rigidity, rest tremor, bradykinesia, and postural and gait impairment (2). Thus, tasks that may be simple, such as the oral hygiene care, often they become quite hard.

Recent researches have shown that PD patients have more serious problems in oral health status than the general population (4,5). Some of these disorders include increased prevalence of caries and periodontal disease, sialorrhea and drooling, xerostomia, orofacial pain, mastication disorders, bruxism and taste impairment (5).

Considering that oral health problems and several systemic diseases are closely interlinked (6), a change of habits as well as the reinforcement of oral health care are indispensable for PD patients (4,5). For this, the role of caregivers and dentists is essential (7). In case this does not occur, other health problems may arise, which makes it more difficult to achieve any success in PD treatment.

It must also be borne in mind that PD patients require specialized services with multidisciplinary teams. Medicine, psychology, speech therapy, physiotherapy and nursing are examples of disciplines involved in PD treatment (7).

Consequently, it is clear that the dentists should also be included in these teams. This is undoubtedly very important for the integral healthcare of these patients.

Another point that should be mentioned concerns the organization of health systems in the various countries of the world. In this sense, the institutions

should provide health services with different levels of complexity. In addition, they need to be integrated in order to ensure the integral care for all PD cases.

In Brazil, for example, the health public system (Unified Health System) has as one of its principles the integrality of assistance (8). Therefore, with a view to enhancing treatment outcomes for PD patients, such legislation can serve as a model for other countries.

In conclusion, the implementation of effective policies and programs aimed at the integral treatment of PD patients is of extreme importance. Furthermore, new researches in this area may contribute to improvements in health promotion through development of interventions that take into account social and cultural influences on the health of these patients.

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