



Oral Care In Residents living in a residential Care facility who have dry Mouth. Martha Rowe

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Abstract: A Dry mouth syndrome occurs when there is not enough saliva (spit) in the mouth. A dry mouth is a symptom of an underlying problem, rather than a disease in itself. Causes may include drugs or medication, dehydration, mouth breathing, Sjogren's syndrome, infection, nerve problems and some cancer treatments. Our research aims were to Investigate whether implementing an appropriate assessment and treatment regime for residents with dry mouth would assist with an increase in quality of life as well as eating and drinking. Our results showed that treating dry mouth in residents increased quality of life measures and decreased bacteria in the mouth. Dry mouth has been reported to be most prevalent in the aging population. Even though it is clear that dry mouth is not part of aging, the elderly population tends to take more medication as a result of several age-related health conditions [3,4]. This makes elderly more susceptible to drug-induced dry mouth. For instance, diseases such as urinary complications are more prevalent in the adult population. This makes them use urinary continence drugs that have been associated with dry mouth. People with advanced age use over the counter medication often to relieve pain associated with various age-related health conditions. This could expose them to salivary glands hypofunction as well as dry mouth.



Biography: Martha Rowe, Speech Pathologist since 2000 has spent years researching and developing papaya enzyme formulation as a result of her own difficulties with a dry mouth following surgery due to facial trauma in 2008. She has worked in both Public and Private hospitals across Victoria and has been involved in clinical studies and patients management in the areas of dysphagia and dry mouth.

Publications:

1. Jasmonoyl-L-Tryptophan Disrupts IAA Activity through the AUX1 Auxin Permease
2. Overaccumulation of γ -Glutamylcysteine in a Jasmonate-Hypersensitive Arabidopsis Mutant Causes Jasmonate-Dependent Growth Inhibition
3. Overaccumulation of γ -Glutamylcysteine in a Jasmonate-Hypersensitive Arabidopsis Mutant Causes Jasmonate-Dependent Growth Inhibition
4. Jasmonoyl-L-Tryptophan Disrupts IAA Activity through the AUX1 Auxin Permease
5. A tomato enzyme synthesizes (+)-7-iso-jasmonoyl-L-isoleucine in wounded leaves.

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