

Impact of smoking on oral health and its prevention

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Sir,

Cigarette smoking has been linked to increased risk of heart disease, stroke, poorly controlled diabetes, respiratory disease and premature deliveries. Also, tobacco use is a primary cause of many oral diseases. Approximately one-third of the adult population in the world use tobacco in some form or other. The World Health Organization has designed the oral health programme for effective control of tobacco use.¹ This letter focuses briefly on the effect of smoking on oral health and its preventive measures.

Oral diseases:

Tobacco is a risk factor for oral cancer, oral cancer recurrences, adult periodontal diseases, and congenital defects such as cleft lip and palate in children whose mother smoked during pregnancy.^{2,3} Smokeless tobacco users are also at an increased risk.⁴

Tobacco use suppresses the immune system's response to oral infection, retards healing following oral surgical or accidental wounding as tobacco is a peripheral vasoconstrictor, which influences the rate at which wounds heal within the mouth. It also

promotes periodontal degeneration in diabetics. These risks are enhanced when tobacco is used in combination with alcohol or areca nuts. Most oral consequences of tobacco use include halitosis, oral birth defects, and periodontal disease. Although smoking is a commonly included factor in the analysis of rates of caries there is still inadequate evidence for any an etiological relationship. Tobacco can be damaging to both the initial and long-term success of dental implants.⁵

Prevention:

Dentists should attend training courses to update their knowledge on the subject.⁶ The British Dental Association recommends a three-step method aimed mainly at prevention of the oral diseases caused by smoking:⁷

Primary prevention

The first step in the fight against oral cancer is to change the habits known to increase the risk, like use of tobacco, alcohol intake and poor diet.⁷ Important messages to patients:⁹ don't smoke, don't drink alcohol, reduce the use of betel quid / paan, eat more fresh fruit & vegetables, and improve oral hygiene.

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Secondary prevention

The successful screening and detection of oral diseases, in particular cancers, is very important because of the inherent difficulty of changing individuals' lifestyles. The World Health Organization recommends a simple 3 part methodical examination that examines the extraoral regions of the head and neck, perioral and intraoral soft tissue, and dental and periodontal tissue ⁹.

Tertiary prevention

To stop the recurrence and spread of oral cancers, dentists and other health specialists should work together to provide multi-disciplinary support for patients.¹⁰ Dentists may be able to influence politicians and communities to adopt relevant policies, but importantly they can directly influence smokers to stop using tobacco.

Nicotine gum and patches may help to calm nicotine cravings. Some of these products can be purchased over-the-counter; others require a prescription. Smoking cessation classes are used in conjunction with drug therapy. Further, hypnosis, acupuncture, and herbal remedies may also help to reduce the habit.

Conclusion

The combination of providing opportunistic advice along with regular screening will decrease the overall morbidity and mortality of oral cancer and other oral disorders.

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