Depression and periodontal health

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Introduction: Depression is a psychiatric disorder in which negative affect, depressed mood, disturbed thoughts, and altered behaviors persist for a minimum of two weeks, and potentially for more protracted periods. Clinical observations and epidemiologic studies suggest that some negative life events and psychological factors may contribute to an increased susceptibility to oral disease and periodontal disease. Various researches has described a reciprocal relationship between chronic pain and depression, leading to chronic orofacial pain as well as other types of pain in patients which can be diagnostically challenging sometimes. Decreased energy and motivation, as well as negative self-views associated with depression can have a detrimental effect on oral hygiene habits. Negative cognitive distortions, lack self-interest all can further contribute to the depressive spiral in which case the basic self is
neglected. The physiological effects of depression such as altered serotonin metabolism lead to a change in the dietary pattern and favoring the aciduric pathogens leading to an increase in dental caries and progressive demineralization. The increase in cortisol levels associated with stress can lead to impairment in immune function and reduced healing, paving the way for an increase in pathogenic flora and oral disease progression. The depression and antidepressants contribute to an alteration of the endocrine and monoamine regulatory systems leading to dysfunction of neurotransmitter metabolism, which in turn affects the amount and nature of salivary production ultimately leading to xerostomia. The hypo salivation results in oral dryness, nocturnal oral discomfort, and an increased incidence of oral infections e.g. candidiasis and periodontal disease. **Conclusion / Clinical Implications:** Although the dentists cannot treat this condition a familiarity with the patient’s medical history, current prescriptions, and general indicators of depression could alert the dentist to possible problems, inform the treatment intervention, and possibly facilitate an appropriate referral for evaluation of the depressive symptoms.