

## Policy Statement

# Alcohol as a Risk for Oral Health



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## FDI World Dental Federation

### Key Words:

Alcohol  
Counselling  
Cancer  
Oral health  
Rehabilitation

### Context

Alcohol is a psychoactive substance (affecting mental processes like moods, emotions and perceptions) with addictive properties. The use of alcohol contributes to approximately 3 million deaths annually. Excessive alcohol consumption is associated with the risk of developing malignancies such as breast cancer, colorectal cancer and cancer associated with the oral cavity, oropharynx, larynx and oesophagus as well as chronic non-communicable conditions such as cardiovascular disease and liver cirrhosis. In addition, oral health impacts may include an increased likelihood of the occurrence of dental caries, periodontal disease, tooth wear, staining, halitosis and trauma. Drinking alcohol to excess increases the risk of facial and oral injuries from falls, traffic accidents and violent confrontations. Non-communicable diseases (NCDs) or their treatments can impact the delivery of dental care to patients. Brief interventions from healthcare practitioners can reduce alcohol consumption among hazardous and harmful drinkers, indicating the important role of all oral health practitioners in delivering these educational interventions.

### Scope

This policy statement seeks to outline the oral health impacts of alcohol consumption and to highlight the important role of oral healthcare practitioners in the provision of alcohol brief interventions.

### Definitions

**Alcohol dependence:** A combination of behavioural, cognitive and physiological factors that often include a marked desire to drink alcohol and difficulties in controlling its use. Someone who is alcohol-dependent may persist in drinking,

despite harmful consequences. They will also give alcohol a higher priority than other activities and obligations.

**Harmful drinking:** A pattern of alcohol consumption that is causing mental or physical damage.

**Excessive drinking:** The level of consumption that minimises health loss, is zero. Even so, if the consumption habit is already installed, an ingestion greater than 15-40 grams per day is considered excessive for a healthy adult man.

**Hazardous Drinking:** A pattern of alcohol consumption that increases someone's risk of harm. Some would limit this definition to the physical or mental health consequences (as in harmful use). Others would include the social consequences.

**Brief Intervention:** A brief and structured advice session aimed either at helping someone to reduce their alcohol consumption or to abstain from alcohol.

### Principles

Alcohol is one of the most commonly used drugs worldwide with dependence-producing properties. There is a trifold impact of alcohol on oral health:

- A direct impact on oral tissues, including a possible increase in dental caries, periodontal disease, tooth wear (may be due to the diminished saliva production as well as the sugar and acid content of many alcoholic beverages) and oral cancer;
- The impact on the delivery of dental care to patients with alcohol-associated systemic conditions such as liver cirrhosis and colorectal and breast malignancies as well as foetal pathologies;
- The social impact may be harmful, for example, in the case of domestic violence (facial injuries and dental trauma) and there may be economic implications of alcohol abuse including self-neglect and loss of employment.

### Policy

#### FDI recommends

- increasing the awareness among patients and the dental team about the negative impact of alcohol consumption on oral and general health;
- ascertaining and recording the level of alcohol consumption for all patients;

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- promoting early detection and prevention of alcohol-related negative health outcomes worldwide;
- engaging with the delivery of consistent brief alcohol interventions to encourage the reduction or cessation of alcohol consumption.

#### **FDI supports**

- integration of oral health and non-communicable diseases;
- raising concerns about industry interference, asking for more resources, monitoring of action plans using the common risk factor approach, and stronger policies on alcohol taxation and cross-border marketing;
- training of the dental team to deliver brief alcohol interventions;
- collaboration with other healthcare professionals, such as physicians and psychologists, to ensure comprehensive care.

#### **Disclaimer**

The information in this policy was based on the best available scientific evidence at the time. It may be interpreted to reflect prevailing cultural sensitivities and socio-economic factors.

#### **FURTHER READING**

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