



Orofacial function of persons having Narcolepsy

Report from questionnaires

The survey comprises 125 questionnaires.

Estimated prevalence: 270-500:1000,000 inhabitants. The prevalence increased in Sweden 2009/2010 due to a side effect to Pandemrix flu vaccination.

Cause: Narcolepsy is a chronic, neurological disease caused by disruptions to the control over waking and sleeping. The disease can be primary or secondary. In cases of primary narcolepsy, the body is deficient in the orexin hormone, which controls waking and sleeping. Secondary narcolepsy is the result of another disease. Familial narcolepsy is an uncommon, hereditary variety.

General symptoms: Increased daytime sleepiness, sleep attacks that are impossible to prevent, sudden muscle weakness and sense of paralysis (cataplexies), hallucinations, disturbed night-time sleep, and paralysis (sleep paralysis) in connection with falling asleep and waking up are common. Mental ill health and weight gain can also occur.

Orofacial/odontological symptoms: Dry mouth due to medication is common. Snacking, especially at night, is also common, which increases the risk of dental caries.

Orofacial/odontological treatment:

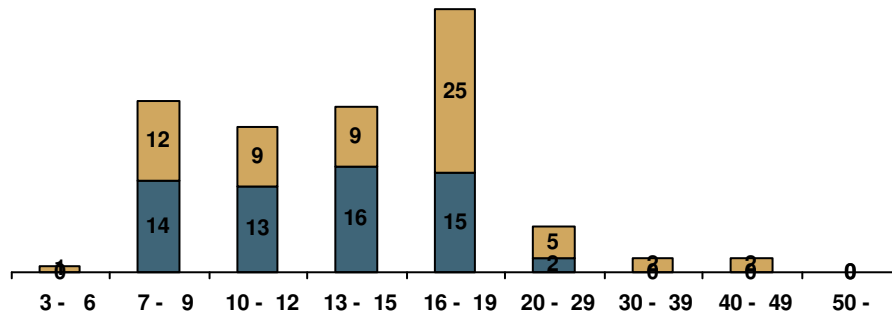
- Early contact with dental services for intensified prophylactic care and oral hygiene information is essential.

Source

The rare disease database of the Swedish National Board of Health and Welfare.
The MHC database - The Mun-H-Center database on oral health and orofacial function in rare diseases.

The Documentation from the Ågrenska Center.

Age distribution



Number: 125

Ages: 6 - 45

Sex: M (60) F (65)

Additional diagnoses

Medical impairment	Yes	No	Missing data
Inborn heart defect	2	118	5
Other cardiovascular disease	0	119	6
Epilepsy	1	118	6
Asthma	11	108	6
Need of respiratory support	0	119	6
Allergy	35	84	6

Neuropsychiatric diagnosis	Yes	No	Missing data
ADHD/ADD	4	114	7
Autistic syndrome	0	119	6
Autistic traits	2	115	8
Asperger's syndrome	3	116	6
Tourette's syndrome	0	119	6

General disability	Yes	No	Missing data
Intellectual disability	0	116	9
Mobility dysfunction	2	105	18
Impaired vision	15	94	16
Impaired hearing	3	110	12
Difficulty in communicating	1	114	10

About dental care and oral health

Do you feel that you receive the dental care you need?

	Number
Yes, very much so	79
Yes, some what	32
No, not really	9
No, not at all	3
Missing data	2
Sum:	125

How many times per year do you normally seek dental care?

	Number
Three or more times per year	14
Twice per year	24
Once per year	59
Less than once per year	28
Missing data	0
Sum:	125

When were your teeth last X-rayed?

	Number
During the past two years	107
More than two years ago	12
Never had my teeth X-rayed	3
Missing data	3
Sum:	125

Do you look after your teeth in a good way?

	Number
Yes, very much so	55
Yes, some what	60
No, not really	7
No, not at all	1
Missing data	2
Sum:	125

Who brushes your teeth?

	Number
I always brush myself	97
Sometimes I brush myself	26
Someone else always helps me	1
Missing data	1
Sum:	125

How often are your teeth brushed?

	Number
Three or more times per day	0
Twice per day	102
Once per day	19
Not every day	3
Missing data	1
Sum:	125

About dental care and oral health

	Yes	No	Missing data
Does your mouth hurt?	11	109	5
Does your mouth feel dry?	79	44	2
Have you ever taken a serious hit to your permanent front teeth?	19	104	2
Do you feel that you have a divergent bite?	22	100	3
Have you had a brace?	32	93	0
Do you feel that you need orthodontics/a brace?	27	92	6

Do you grind or press your teeth at night?

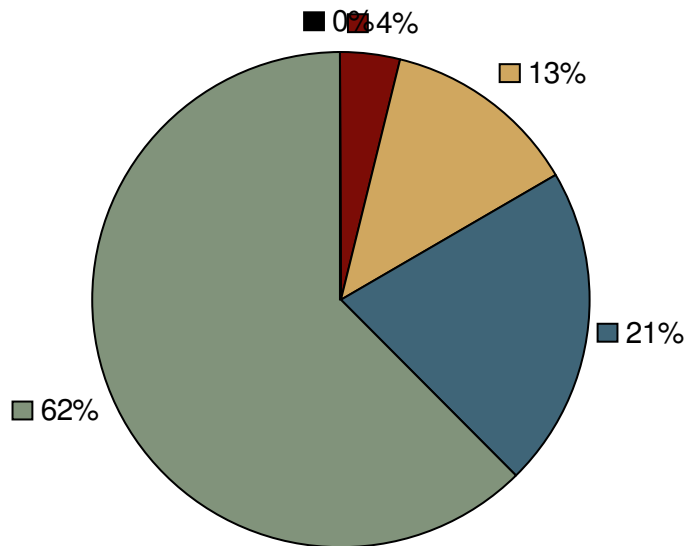
	Number
Never	69
Once or twice per week	36
Every night	15
Missing data	5
Sum:	125

Do you grind or press your teeth during the day?

	Number
Never	103
Once or twice per week	14
Every day	6
Missing data	2
Sum:	125

About eating

Do you have any problems with eating?



	Number
Yes, very much so	5
Yes, some what	16
No, not really	26
No, not at all	78
Missing data	0
Sum:	125

	Yes	No	Missing data
Do you cough daily in connection with meals?	4	119	2
Do you gag daily in connection with meals?	2	120	3
Do you get acid reflux daily?	12	110	3
Do you throw up often (at least twice per week)?	2	123	0
Do you have a poor appetite?	39	79	7
Does it take a long time before you can swallow a mouthful?	4	117	4
Do you press your tongue forward when you swallow so that food ends up outside the mouth?	0	124	1
Do you find it difficult to chew, i.e. grind food using your molars?	1	124	0
Do you find it difficult to take food from the spoon using your lips?	0	125	0
Have you had problems with food and drink leaking out through the corners of your mouth?	1	124	0
Does food tend to remain in your mouth after meals?	4	119	2
Do you get nutrition in any other way than through your mouth?	0	125	0

About drooling

Do you drool?

	Number
Never drool	103
Drool sometimes – not every day	13
Drool often – every day	3
Constant drooling	0
Missing data	6
Sum:	125

How much do you drool?

	Number
Slight drooling, only on the lips	9
Moderate drooling, on lip and chin	7
Profuse drooling, on clothes	0
Very profuse drooling, on hands/objects	0
Missing data	0
Sum:	16

Is your drooling a problem for you?

	Number
Yes, very much so	0
Yes, some what	3
No, not really	7
No, not at all	6
Missing data	0
Sum:	16

Is your drooling a problem for your family or people around you?

	Number
Yes, very much so	0
Yes, some what	1
No, not really	2
No, not at all	13
Missing data	0
Sum:	16