

STATEMENT OF THE
AMERICAN DENTAL ASSOCIATION
FOR THE
NATIONAL TOWN HALL ON
METHAMPHETAMINE AWARENESS
AND PREVENTION

SUBMITTED BY

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Good afternoon Senators. I am Bob Brandjord, a practicing oral surgeon in Burnsville, Minnesota. As President of the American Dental Association, I represent 72% of the practicing dentists in the United States or 152,000 dentists who are seeing more and more of a condition that we call “Meth Mouth.” This is the dental condition caused by use of the drug methamphetamine.

Meth mouth is characterized by rampant caries or tooth decay. Some users describe their teeth as “Blackened, stained, rotting, crumbling or falling apart.”

This extensive tooth decay is caused by:

- The drug’s ability to dry the mouth, reducing the amount of saliva which is essential for keeping the mouth clean,
- Its acidic nature which destroys tooth enamel,
- A drug-induced craving for high-calorie carbonated sugary beverages,
- The tendency of users to grind and clench their teeth and

This leads to long periods of time when users are not likely to clean their teeth.

Another unusual characteristic of “Meth Mouth” is the rapid onset of this type of tooth decay. In as little as one year – a patient can go from having normal teeth to decayed teeth.

Also, the pain caused by the decaying teeth brought on by this condition can contribute to a devastating cycle. One of our dentists reported that a patient would get high and pull his own teeth. He would then get high again to kill the pain that resulted from pulling the teeth.

Often there is no hope of treating methamphetamine-damaged teeth, leading to full mouth extractions. This can, and in some cases already has, led to significant increases in oral health care costs for society.

For example -- One of the areas in Minnesota that is affected directly by Meth Mouth is the prison system. In the first quarter of 2004, the health administrator at St. Cloud prison reported that 690 prisoners were treated by dentists, most for meth related conditions.

By comparison, in the first quarter of 2005, the prison reported over 12-hundred patients seeking dental treatment. Since 2001, the cost of dental care in Minnesota's prisons has practically doubled to \$2 million.

In addition, according to an NPR story last year, prison officials say this increased cost is wreaking havoc on their budgets, cutting into money they used to spend on health care, and staffing. It is also reducing the regular dental visits provided to non-meth user inmates.

Like prisons, hospital emergency rooms are directly impacted by meth users. But they are not set up to handle extractions...certainly not extensive extractions. The patients are then referred to dentists for care and often present complex management and treatment obstacles.

The American Dental Association believes the meth mouth is a very serious disease that is robbing people, especially young people, of their teeth. In an effort to highlight this condition, the ADA has posted educational materials on our website for both dentists and patients. We encourage those who are watching this town hall meeting to visit the website to learn more. We thank you Senators Colman, Baucus, Burns and Pryor for holding this town hall meeting today to put a spotlight on this growing problem of Methamphetamine use.