

Prevention in Sports Dentistry

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2 CONTEXT

Around the world, more and more people participate in sports for both leisure and as aprofession.

5 The development of sports medicine has contributed to healthier athletes and better 6 performance. Sports medicine has also evolved into a multidisciplinary field in which 7 sports dentistry is a key element.

8 Some dental problems, such as non-carious cervical lesions, caries or periodontal 9 diseases, may arise from training, an unfavourable diet in terms of oral health, a 10 parafunctional load or poor oral hygiene. Acidic sports beverages and related products 11 ingested at high frequency in the form of liquids, gels, carbohydrate mouth rinses or food 12 supplements can also cause complications in the oral environment, including damage to 13 dental hard tissues and dental materials, due to their high content of free sugars and 14 acidic ingredients¹.

In addition, amateur and elite athletes face a greater risk of oral injuries when they are participating in combat or contact sports without proper protection^{2,3}. Between 10 and 61 percent of athletes experience dental trauma during their sports activity and amateur athletes are more prone to suffer from sports-related injuries than elite athletes⁴. Finally, there is a need to increase awareness of the potential impact of dental prescriptions as certain medications may metabolize producing substances prohibited by anti-doping regulations.

22 Oral and general health are connected. The mouth is often considered as a mirror of the 23 body: only a healthy mouth will allow an athlete's body to perform in the most efficient manner⁵. Conversely, an unhealthy mouth can affect quality of life, wellbeing and 24 performance in several significant ways. For example, tooth decay and gum disease can 25 cause or maintain inflammation or infections in the body^{6,7}. Some researchers consider 26 27 that dental malocclusion may affect posture and gait. This may subsequently impact on performance and injury risk, although evidence of these impacts is still limited and further 28 29 research is needed⁸. A dental emergency before a competition can impair performance or even prevent participation entirely. 30

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32 **SCOPE**

This policy statement aims to provide information to promote the integration of oral care into sports medicine, to stress the importance for all athletes of achieving and maintaining optimal oral health as well as to emphasize the role of dentists in oral health care and

- 36 prevention.
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DEFINITION 38

- 39 Sports Dentistry: an interest area of dentistry dealing with the promotion of oral health in
- sports, prevention and treatment of pathologies and injuries of the stomatognathic system 40
- related to sports and exercise. 41
- Stomatognathic system: The anatomical and functional system comprising the teeth, 42 jaws, associated soft tissues, facial muscles and temporomandibular joint (TMJ). 43
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45 PRINCIPLES

Microbial or functional stomatognathic pathologies are often preventable. Therefore, 46 promoting oral health and good oral hygiene practices in the earliest stages of sports 47 practice (e.g. in school, grassroots clubs and sports academies) is essential. 48

- 49 Regular dental or oral health screenings integrated with general health assessments of both elite and amateur athletes, no matter their skill level or classification, are highly 50 valuable as early detection of any oral issue can be fostered. 51
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53 POLICY

- FDI has the following recommendations for sports organizations: 54
- Communicate the high evidence for the relationship between oral health and 55 general health to all their members, from the most junior to the most senior; 56
- 57 • Communicate the importance of good oral health in order to maintain athletes' overall health and wellbeing; 58
- Encourage school children, amateur and elite athletes to adopt healthy oral 59 60 hygiene, nutrition, hydration, regular dental check-ups and injury prevention behaviours; 61
- 62 • Encourage collaboration among sports clubs, federations, institutions and sports medicine centres at local, national, regional and international levels to promote 63 prevention, research, surveillance and monitoring of oral health and related health 64 65 factors, and to support education in the field of sports and dentistry;
- Stimulate interactions between their medical staff and dentists by encouraging 66 regular medical and dental check-ups among their members/athletes; 67
- 68 • Initiate common strategies with national and international sports federations, foster the integration of sports dentistry into sports medicine and incorporate dentists as 69 members of sports medical team. 70
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- 72 FDI recommends that dentists and sports physicians:
- 73 include questions related to the type of sports their patients are practising and how often in the medical questionnaire 74
- 75 • inform all athletes, elite or amateur, about the importance of good oral health for optimum performance, about the impact of sports on oral health and about the 76 relationship between oral health and general health; 77
- 78 collaborate when managing an athlete's health;
- include oral health as part of the athlete's general health check-up and ensure they 79 seek appropriate dental care; 80

- systematically provide advice on prevention to all athletes, including oral hygiene
 and preventive measures, benefits of well-balanced diets, knowledge of the acidity
 of sports drinks and risk to oral health, regular oral health check-ups, good
 nutrition, appropriate hydration, the use of customized mouthguards when
 participating in contact or combat sports and the detriments of alcohol, tobacco
 consumption and;
- regularly update their knowledge of the metabolism of prescribed medicines and
 potential interactions that may result in the athlete's non-compliance with the World
 Anti-Doping Agency regulation.
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- 91 FDI recommends that all athletes (amateur and elite):
- wear a custom-made mouthguard when engaging in contact and combat sports,
 even if only participating in the sport occasionally;
- understand that poorly fitting mouthguards offer poor protection;
- avoid consequences of sports activities on their oral health by following specific
 recommendations of oral health professionals.
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98 KEYWORDS

- 99 Sports dentistry, sports medicine, oral hygiene, oral health, healthy mouth, 100 stomatognathic system, custom-made mouthguard
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102 DISCLAIMER

103 The information in this Policy Statement was based on the best scientific evidence 104 available at the time. It may be interpreted to reflect prevailing cultural sensitivities and 105 socio-economic constraints.

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107 **REFERENCES**

- Hausswirth C, Nutrition et santé bucco-dentaire du sportif, l'Information Dentaire,
 2012, 22, 33-38.
- Maeda Y, Yasui T, Tanaka Y, et al, Is Mouthguard Effective for Preventing Traumatic Injuries during Sports Events? International Journal of Sports Dentistry. 2013;6:7-12.
- Mantri SS, Mantri SP, Deogrades, Bhasin AS. Intraoral mouth guard in sports related orofacial injuries : Prevention is better than cure. J.Clinc and Diagnostic Research. Jan 2014;8(1);299-301.
- Knapik JJ, Marshal SW, Lee RB, et al. Mouthguards in sport activities: History, physical properties and injury prevention effectiveness. Sports Med 2007;37(2):117-4
- Needleman I, Ashley P, Petrie A, et al. Oral health and impact on performance of athletes participating in the London 2012 Olympic Games—a cross sectional study. Br J Sports Med 2013;47:1054–8.
- D'Aiuto F, Graziani F, Tetè S, et al. Periodontitis: from local infection to systemic diseases. Int J Immunopathol Pharmacol Jul-Sep 2005;18(3 suppl):1-11
- 124 7. Hajishengallis G. Periodontitis: from microbial immune subversion to systemic
 125 inflammation. Nat Rev Immunol 2015 Jan;15(1):30-44

- 8. Karasawa K, Takeda T, Nakajima K, Yamazaki G, Ozawa T, Fujii T, Ishigami K Effects of Experimental Horizontal Mandibular Deviation on Stepping Test of Equilibrium Function. J Nov Physiother 2014. 4: 1