

Review

Oral Manifestations and Dental Management of Pediatric Autoimmune Diseases

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Abstract

Pediatric autoimmune diseases often present with a range of oral manifestations, including mucosal lesions, xerostomia, and periodontal disease. These symptoms can serve as early indicators of systemic illness, making prompt recognition and management by dental professionals critical. The immunosuppressive therapies commonly used to manage autoimmune diseases, such as corticosteroids and methotrexate, can exacerbate oral health issues, leading to increased susceptibility to infections, delayed wound healing, and complications during routine dental procedures. Preventive care and patient education are essential to mitigate these risks. Regular dental check-ups, professional cleanings, fluoride treatments, and the use of sealants are crucial preventive measures. Additionally, educating patients and caregivers on proper oral hygiene practices and providing dietary advice can help maintain oral health. Interdisciplinary collaboration between dental professionals and other healthcare providers, such as pediatricians and rheumatologists, ensures comprehensive care that addresses both oral and systemic health concerns. This collaboration is particularly important when planning dental procedures that may be affected by the patient's medication regimen or disease activity. Minimally invasive dental techniques, such as atraumatic restorative treatment and the use of dental lasers, can reduce the need for extensive procedures, thereby minimizing complications and improving patient comfort. The use of biocompatible materials and the avoidance of allergens are also important considerations. By implementing these strategies, dental professionals can significantly improve the oral health and overall well-being of pediatric patients with autoimmune diseases, ensuring their unique needs are met in a holistic manner. Effective dental management of these patients requires a multifaceted approach that includes preventive measures, patient and caregiver education, and interdisciplinary collaboration, ultimately leading to better health outcomes and quality of life for these young patients.

Keywords: *Pediatric autoimmune diseases, oral manifestations, dental management, preventive care, interdisciplinary collaboration*

Introduction

Pediatric autoimmune diseases represent a diverse group of disorders characterized by the immune system's abnormal response, leading to the body's own tissues being attacked. These conditions can significantly impact various bodily systems, including the oral cavity. The manifestations within the oral cavity can be among the first indicators of an underlying autoimmune disorder, making it crucial for dental professionals to recognize these signs early on. Understanding the oral implications and dental management strategies for pediatric patients with autoimmune diseases is essential for ensuring comprehensive care and improving quality of life. Oral manifestations in pediatric autoimmune diseases are varied and can range from mild to severe, often presenting as ulcers, mucosal lesions, salivary gland dysfunction, and periodontal disease. Conditions such as juvenile idiopathic arthritis, systemic lupus erythematosus, and type 1 diabetes mellitus commonly exhibit oral symptoms (1). For instance, juvenile idiopathic arthritis can lead to temporomandibular joint disorders, affecting jaw function and growth (2). Systemic lupus erythematosus may cause oral ulcers and lichenoid reactions, while type 1 diabetes mellitus is frequently associated with periodontal disease and delayed wound healing (3).

The management of dental health in children with autoimmune diseases poses unique challenges. These patients often require multidisciplinary care involving pediatricians, rheumatologists, endocrinologists, and dental specialists to address both systemic and oral health issues effectively. One major challenge is the immunosuppressive therapy often employed in these conditions, which can increase the risk of oral infections and complicate dental treatments. Moreover, medications such as corticosteroids and methotrexate used in managing autoimmune diseases can have significant oral side effects, including mucositis and delayed healing (4). Preventive dental care is paramount for these pediatric patients, as maintaining good oral hygiene can mitigate the risk of oral complications. Regular dental check-ups, patient and caregiver education on oral hygiene practices, and timely interventions are

essential components of effective dental management. Additionally, tailored treatment plans considering the patient's medical history, current medications, and disease activity are necessary to provide safe and effective dental care. Collaboration among healthcare providers ensures that dental treatments do not interfere with the management of the underlying autoimmune condition and vice versa.

The interplay between pediatric autoimmune diseases and oral health is complex and necessitates a comprehensive understanding of the oral manifestations and tailored dental management strategies. By recognizing the unique challenges and implementing preventive and multidisciplinary approaches, dental professionals can play a pivotal role in improving the overall health and well-being of pediatric patients with autoimmune diseases. This review aims to discuss different oral presentations found among autoimmune pediatric patients and explore different ways of treatment and prevention of such presentations.

Review

The discussion of oral manifestations and dental management of pediatric autoimmune diseases is crucial in addressing the unique challenges faced by these patients. Pediatric autoimmune diseases can manifest with various oral symptoms, including mucosal lesions, xerostomia, and periodontal disease, which often serve as early indicators of the underlying condition. Prompt recognition and management of these symptoms are essential to prevent further complications and enhance the patient's quality of life. Dental professionals must be adept at identifying these signs and understanding their correlation with systemic autoimmune diseases.

Immunosuppressive therapies, commonly used to manage autoimmune diseases, pose significant challenges in dental care. These therapies can increase the risk of oral infections, delay wound healing, and cause mucosal lesions, complicating routine dental procedures (5). For example, corticosteroids and methotrexate, frequently prescribed for autoimmune conditions, have been

associated with oral ulcerations and mucositis, making dental management more complex (3). Therefore, it is imperative for dental management strategies to be adapted to accommodate these complications while ensuring the necessary dental treatments are provided safely.

Preventive care and education are paramount in managing oral health in pediatric patients with autoimmune diseases. Regular dental check-ups, stringent oral hygiene practices, and timely interventions can significantly reduce the risk of severe oral complications. Moreover, multidisciplinary collaboration between dental professionals and other healthcare providers is essential for a comprehensive approach to patient care. This integrated strategy ensures that both oral and systemic health concerns are addressed, enhancing the effectiveness of dental treatments and contributing to better overall health outcomes for pediatric patients with autoimmune diseases.

Common Oral Manifestations in Pediatric Autoimmune Diseases

Pediatric autoimmune diseases frequently present with a variety of oral manifestations that can serve as early indicators of systemic illness. Recognizing these symptoms is crucial for timely diagnosis and management. The oral cavity often reflects the broader systemic inflammation and immune dysregulation characteristic of autoimmune diseases. Among the most common oral manifestations are mucosal lesions, xerostomia, and periodontal disease, each posing unique challenges for both diagnosis and management.

Mucosal lesions are prevalent in many pediatric autoimmune diseases, such as systemic lupus erythematosus (SLE), juvenile idiopathic arthritis (JIA), and Crohn's disease. These lesions can manifest as ulcers, erythema, or lichen planus-like changes. In SLE, oral ulcers are a common finding and can be painful, impacting the child's ability to eat and speak comfortably (6). These ulcers may present on the palate, buccal mucosa, or tongue and often recur, reflecting the episodic nature of the underlying autoimmune activity.

Xerostomia, or dry mouth, is another significant oral manifestation, particularly noted in diseases like Sjögren's syndrome and type 1 diabetes mellitus. Xerostomia results from salivary gland hypofunction, leading to reduced saliva production. Saliva plays a crucial role in maintaining oral health by providing antimicrobial properties, buffering acids, and facilitating the clearance of food particles. Reduced saliva flow increases the risk of dental caries, oral infections, and difficulties in speaking and swallowing (7). Pediatric patients with autoimmune diseases experiencing xerostomia may require specialized dental care, including the use of saliva substitutes and meticulous oral hygiene practices to mitigate these risks.

Periodontal disease is also commonly observed in pediatric patients with autoimmune diseases. Conditions such as type 1 diabetes and JIA have been associated with an increased prevalence of gingivitis and periodontitis. The chronic inflammatory state characteristic of these diseases can exacerbate periodontal inflammation, leading to early onset and rapid progression of periodontal disease. In type 1 diabetes, hyperglycemia can impair immune function and wound healing, further complicating periodontal health (8). Effective management of periodontal disease in these patients involves a combination of rigorous oral hygiene practices, regular dental check-ups, and possibly the use of antimicrobial therapies. Oral manifestations in pediatric autoimmune diseases are diverse and can significantly impact the quality of life and overall health of affected children. Dental professionals play a critical role in identifying these symptoms early and implementing appropriate management strategies. By understanding the common oral manifestations associated with these conditions, dental professionals can provide comprehensive care that addresses both the oral and systemic health needs of pediatric patients with autoimmune diseases.

Challenges in Dental Management of Pediatric Patients with Autoimmune Conditions

Managing the dental health of pediatric patients with autoimmune conditions presents a multitude of challenges. These challenges arise due to the

complex interplay between the underlying autoimmune disease, its systemic manifestations, and the side effects of the therapies used to manage these conditions. Dental professionals must navigate these intricacies to provide effective and safe care. One of the primary challenges is the immunosuppressive therapy often required to control autoimmune diseases. Medications such as corticosteroids, methotrexate, and biologic agents can significantly affect oral health. Corticosteroids, for example, can lead to delayed wound healing, increased susceptibility to infections, and oral candidiasis (9). Methotrexate, commonly used in conditions like juvenile idiopathic arthritis, has been associated with mucositis, making routine dental procedures painful and increasing the risk of secondary infections (10). These side effects necessitate careful planning and coordination with the patient's medical team to ensure that dental treatments do not exacerbate the patient's overall condition.

Another challenge is the increased risk of oral infections in these patients. The immunosuppressive state induced by both the disease and its treatment can predispose patients to opportunistic infections such as oral candidiasis and herpes simplex virus infections. These infections can complicate dental procedures and prolong recovery times (11). Dental professionals must be vigilant in monitoring for signs of infection and may need to prescribe prophylactic antimicrobials in certain high-risk situations. Pain management is also a critical issue. Many pediatric patients with autoimmune diseases experience chronic pain, which can be exacerbated by dental procedures. Additionally, nonsteroidal anti-inflammatory drugs, commonly used to manage pain in these patients, can cause gastrointestinal issues and may interact with other medications the patient is taking. This necessitates a careful approach to pain management, often requiring collaboration with the patient's primary care provider or rheumatologist to develop an appropriate pain management plan that minimizes adverse effects (12).

Furthermore, maintaining oral hygiene can be particularly challenging for these patients. The

physical limitations imposed by conditions such as juvenile idiopathic arthritis can make routine oral hygiene practices difficult. In such cases, dental professionals must provide tailored advice and possibly recommend adaptive devices to aid in maintaining oral hygiene. Regular professional cleanings and preventive treatments, such as fluoride varnishes, are also essential components of care. The dental management of pediatric patients with autoimmune conditions requires a multifaceted approach that addresses the unique challenges posed by their systemic disease and its treatment. Through careful planning, vigilant monitoring, and close collaboration with other healthcare providers, dental professionals can help manage these challenges and improve the overall health and well-being of their pediatric patients.

Strategies for Effective Dental Care and Preventive Measures

Effective dental care and preventive measures are crucial in managing the oral health of pediatric patients with autoimmune diseases. Given the complex interplay between systemic conditions and oral health, tailored strategies are necessary to address the unique needs of these patients. Preventive care, patient education, and interdisciplinary collaboration form the foundation of these strategies.

Preventive dental care is paramount in minimizing the risk of oral complications in pediatric patients with autoimmune diseases. Regular dental check-ups allow for early detection and management of oral health issues before they escalate. Preventive measures such as fluoride treatments and sealants can help protect against dental caries, which these patients are particularly susceptible to due to factors like xerostomia and altered immune responses (13). Additionally, professional dental cleanings are essential to remove plaque and tartar buildup, which can exacerbate periodontal disease. Patient and caregiver education is another critical component of effective dental care. Educating patients and their caregivers about the importance of maintaining good oral hygiene can significantly impact oral health outcomes. Instruction on proper brushing and flossing techniques, as well as the use of adjunctive

tools like interdental brushes and antimicrobial mouth rinses, can help manage oral hygiene more effectively. It is also important to provide dietary advice, as certain foods and beverages can exacerbate oral health issues in these patients (14). Emphasizing a balanced diet that supports overall health and minimizes the risk of dental caries is essential.

Interdisciplinary collaboration is vital in providing comprehensive care for pediatric patients with autoimmune diseases. Dental professionals must work closely with pediatricians, rheumatologists, and other healthcare providers to ensure that dental treatments are aligned with the overall management of the patient's autoimmune condition. This collaboration is especially important when planning dental procedures that may be affected by the patient's medication regimen or disease activity. For instance, coordinating with the patient's medical team can help manage the timing of immunosuppressive therapy around dental surgeries to reduce the risk of complications (15).

The use of minimally invasive dental techniques can be beneficial in managing the oral health of these patients. Techniques such as atraumatic restorative treatment and the use of dental lasers can reduce the need for extensive dental procedures, thereby minimizing the risk of complications and improving patient comfort. Additionally, the use of biocompatible materials and avoiding allergens are important considerations in the dental treatment of pediatric patients with autoimmune diseases (16). Effective dental care for pediatric patients with autoimmune diseases requires a comprehensive approach that includes preventive measures, patient and caregiver education, and interdisciplinary collaboration. By implementing these strategies, dental professionals can significantly improve the oral health and overall well-being of these patients, ensuring that their unique needs are met in a holistic manner.

Conclusion

Managing the oral health of pediatric patients with autoimmune diseases requires a multifaceted approach involving preventive care, patient

education, and interdisciplinary collaboration. Tailored strategies can significantly improve oral health outcomes and overall well-being. Through vigilant care and comprehensive management, dental professionals play a crucial role in addressing the unique needs of these patients.

Disclosures

Author Contributions

The author has reviewed the final version to be published and agreed to be accountable for all aspects of the work.

Ethics Statement

Not applicable

Consent for publications

Not applicable

Data Availability

All data is provided within the manuscript.

Conflict of interest

The author declares no competing interest.

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