Bruxism Speech & Swallowing Issues



Bruxism is involuntarily oral activity that includes the clenching or grinding of teeth that can occur in a sleep or awake state. Bruxism has been reported in Parkinson disease as well as in other Parkinsonian syndromes, such as MSA, and also in relation to levodopa treatment¹. Most of the time bruxism is not severe enough to cause major problems. Symptoms of bruxism may include:

Facial pain	Receding gums	Depression
Teeth that are oversensitive to cold, heat, or pressure	Temporomandibular joint (TMJ) disorders	Chewed places on the tongue or cheek
Noise from the grinding or clenching that wakes a person and/or their sleeping partner	Headaches—tension headaches from day grinding and morning headaches for nighttime bruxism	Damage to teeth: chips fractures, worn enamel, flattened tops, loose teeth
Earaches	Jaw damage	Speech and swallowing difficulties

In relation to Parkinson's, the rigidity and spasms of the disease itself can affect the muscles of the jaw, causing the jaw to clamp shut. This, in turn, puts tremendous force on the teeth and can cause them to wear down over time or even break. Bruxism can also interfere with eating, drinking, and speaking when it prevents the mouth from opening. As with many Parkinson's symptoms, bruxism tends to lessen or disappear during an "on" period and worsen or return during an "off" period.

Treatment options vary and depend on the severity of the bruxism, be sure to discuss with your treating physician to determine the best course of treatment. Self care options include:

Drink water	Try self-massage on face and jaw	Manage stress
Apply ice or damp heat to a sore jaw	Schedule regular dental visits so a dentist can monitor damage	Avoid caffeine, alcohol and smoking

Mouthguards and splits can be worn to protect teeth and keep the jaw in a more relaxed position. In terms of medications, muscle relaxants (antispasmodic drugs) or anticholinergic medications sometimes provide relief, although they can have undesired side effects such as drowsiness and, with anticholinergics, dry mouth. When bruxism is so severe that it prevents opening the mouth and chewing, Botulinum toxin therapy is often effective for immediate and long-term relief. These injections paralyze small segments of the muscles, causing them to relax.

References:

¹Yair Zlotnik, Yacov Balash, Amos D. Korczyn, Nir Giladi, and Tanya Gurevich, "Disorders of the Oral Cavity in Parkinson's Disease and Parkinsonian Syndromes," Parkinson's Disease, vol. 2015, Article ID 379482, 6 pages, 2015. https://doi.org/10.1155/2015/379482