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PATOLOGICAL SALIVARY SECRETION
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Introduction. The pathological salivary secretion can be divided to increased and decreased saliva production. The decreased salivary dysfunction is known as Xerostomia, which may be caused by medical drug treatment (ex. diuretics, antidepressants, neuroleptics), radiotherapy or Sjögren's disease. The salivary increased dysfunction is the sialorrhea or drooling. Those clinical diagnoses are caused by different factors. It is important to make a proper diagnose in salivary dysfunctions and to perform a right treatment.

Aim: The aim of this study was to present the most problematic salivary dysfunctions and to set to order contemporary reports in this subject.

Material and methods. The study is the review of the literature in salivary secretion subject. The current literature was used to this research.

Conclusion. Factors of the xerostomia are not only physiological changes with the aging of the organism, but also drugs, systemic and local factors. Xerostomia occurs most often in people taking drugs after radiation therapy of the head and neck, and Sjögren's syndrome. It occurs at any age, but more common in the elderly. The most important is to determine the etiology and properly orient the treatment. The task of the physician is to enable the proper functioning and to improve its quality of life. Treatment of xerostomia is mainly to improve the quality of life of the patient and prevent the occurrence of candidiasis, ulcers periodontal, soft tissue and tooth decay. The treatment of xerostomia today is the treatment multidisciplinary and team.

The etiology of drooling problem is different than sialorrhea. The sialorrhea treatment should be multidisciplinary performed by a team of dentists, otolaryngologists, neurologists and speech therapists. The most important factor is to diagnose what may cause this disease and then take measures to eliminate them. However with drooling problem except for similar diagnosis procedure the treatment is different.