S03-2 Effects and management of odontogenic infections on pulmonary infections ○Takashi SHINZATO¹

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Carious and periodontal disease is strongly associated with pulmonary infections. Aspiration pneumonia often develops lung abscess and/or empyema, and sometimes leads to death in elderly patients. It is often repeatedly seen in most of elderly patients, which leads to general

weakness, prolonged bed rest, and several complications. There are two pathophysiological factors for aspiration pneumonia. One is due to odontogenic infections: aspirated oral miroorganisms reach pulmonary alveoli, grow, and develop

their pathogenicity. The other is host factors: alcoholism, diabetes, or bedridden status reduces cough reflex, airway clearance, and functions of phagocytes.

The prevention of aspiration pneumonia is significant from medical, social, and economical

viewpoints, although the main management of pneumonia is antimicrobial chemotherapy. "Oral care" has been recently of interest as a control means for odontogenic infections and aspration pneumonia. A dental hygienist and speech therapists in our hospital have implemented active intervention in oral care of patients with risk of aspiration pneumonia, which has made considerable achievements.