For dentists, saliva can be both a friend or a foe. It gets in the way during restorative dentistry procedures, but it is essential for the long term health of teeth and oral mucosa. Saliva has many roles beyond lubricating oral tissue. It mediates taste, plays a role in the immune response, and begins the digestive process. Patients often do not think about saliva until there is too little, or in some cases too much. Salivary secretion is a multifactorial process that can be altered in many systemic conditions. Dental professionals also need to be aware of salivary gland pathology from trauma-induced changes to tumours, both benign and malignant. Dental professionals need to apply a systematic approach to patients who present with salivary gland concerns. Finally, in the era of COVID-19 dentists need to be aware of the potential role of saliva in the spread of SARS-CoV-2.

LEARNING OBJECTIVES

• Explain the development of the salivary glands
• Describe the structure and location of the major salivary glands
• Describe the structure and location of minor salivary glands
• Describe the histology of the salivary gland acini and relate it to their secretion
• Distinguish resting and stimulated salivary flow
• Explain the triggers of salivation
• List medications associated with decreased saliva flow (hyposalivation)
• List common systemic medical conditions associated with hyposalivation
• Explain the approach to patients with a complaint of dry mouth
• Explain the management of hyposalivation
• Describe the presentation of the most common salivary gland pathologies (benign and malignant) and their assessment
• Discuss saliva’s role in COVID-19

CLINICIAN

ELI WHITNEY, BSC, DDS, CERT ORAL MEDICINE, CERT ORAL PATHOLOGY, FRCD(C), received his BSc and DDS degrees from the University of Alberta Faculty of Dentistry. In 2000 he became the first resident in the UBC Dentistry Oral Medicine Oral Pathology specialty training residency. He completed his specialty training in 2004 and started as an Assistant Professor at UBC Dentistry immediately afterward. Dr. Whitney was promoted to the rank of Senior Instructor and tenured in 2011. He teaches in the fields of Oral Medicine and Oral Pathology (oral mucosal diseases and salivary gland disorders, temporomandibular disorders, facial pain and neurosensory disorders, dental management of medically complex patients). Dr. Whitney’s research interests lie in educational research. He has published manuscripts in the Journal of Dental Education and he was the lead author of the American Competencies for beginning Oral Medicine practitioners. He has previously served on many educational committees in the UBC Faculty of Dentistry and he is now serving as the Faculty of Dentistry Acting DMD Curriculum Director. In addition to his UBC Faculty of Dentistry appointment, Dr. Whitney was appointed to the Vancouver General Hospital Medical Staff in 2004 and since then he has been treating patients with oral mucosal disorders, facial pain, and temporomandibular disorders. Since 2011 he has been seeing patients with salivary gland dysfunction and connective tissue disorders at the Mary Pack Arthritis Centre. Dr. Whitney is a past president of both the British Columbia Society of Oral Medicine and Pathology (BCSOMP) and the Canadian Academy of Oral and Maxillofacial Pathology and Oral Medicine (CAOMPO). He is an examiner in Oral Medicine and Oral Pathology for the Royal College of Dentists of Canada.

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