

Teeth-

What you should know:

7 health conditions your dentist may detect first

Quiz: Dental myths and truths

What you may not know about tooth loss

Tips for getting your kids to brush and floss

Do you know what to do in a dental emergency?

5 things your dentist wants you to know

Think you're too old for braces? Think again!



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Your dentist—a cornerstone of your health and well-being

Too often, we think of our oral health as separate from our overall health. In reality, the health of our teeth and gums is intertwined with the rest of our body. Your mouth is the main entrance to the body. Gums and teeth are linked to the digestive, nervous, endocrine, lymphatic and skeletal systems and the bloodstream. And they share the harmful organisms that cause disease. This is why your dentist is so important to your health and well-being. Your dentist is an expert in diagnosing and treating conditions of your teeth, gums and upper jaw and face—conditions that can impact your overall health. Most important, your dentist can help you prevent damaging and costly oral health problems from occurring in the first place.



Who's the most important member of your dental health team?

You! Even with the very best dental care, if you don't do your part, the health of your teeth and gums is at risk. Although personal dental hygiene practices differ depending on the general condition of your mouth and gums, the following four steps are crucial.

1. Brush your teeth after every meal, at least three times a day. Floss at least once a day.
2. Eat a well-balanced diet. Good nutrition helps you maintain healthy teeth.
3. Have your teeth examined and cleaned every six months—more if you have gum disease or other conditions that place you at greater risk of oral health problems.

Only 12 percent of Americans floss daily. 39 percent floss less than daily. 49 percent don't floss at all.

—*American Dental Association*

7 health conditions your dentist may detect first

You might be surprised to know that a dentist is often the first person to spot a number of health conditions, including serious diseases like diabetes and heart disease. All told, more than 90 percent of the systemic diseases of the body are linked to symptoms in the mouth.

Red, sore, swollen gums of periodontitis (gum disease) are associated with heart disease and stroke.

Sore, pale gums indicate you may be anemic.

Bright red, spongy, inflamed gums that bleed easily can be a sign of leukemia.

Significant erosion of tooth enamel may signal of eating disorders, such as bulimia, or gastric conditions.

If air blowing on your gums makes them bleed, you may be pregnant.

Bad breath, dry mouth, bleeding gums and receding gums are often associated with diabetes.

White spots and sores that don't heal on your gums and other oral tissues can be signs of oral cancer.

What you should know before choosing a dentist

Is the dentist covered by your dental insurance plan?

Does the dentist perform the kinds of services you need? For example, you may want to find a dentist who specializes in cosmetic dentistry or a pediatric dentist for your child.

How are emergencies handled?

Are the location and hours of the office convenient for you?

How long is the wait for non-emergency appointments?

What are the fees for typical services such as x-rays or a preventive dental appointment that includes an oral exam and teeth cleaning.?

Are payment plans available?

If you get butterflies in your stomach when thinking of going to the dental appointment, ask if the dentist specializes in working with patients who are nervous about dental procedures and if he or she offers nitrous oxide to help patients relax.

Do you know what kind of dental health practitioner to see?

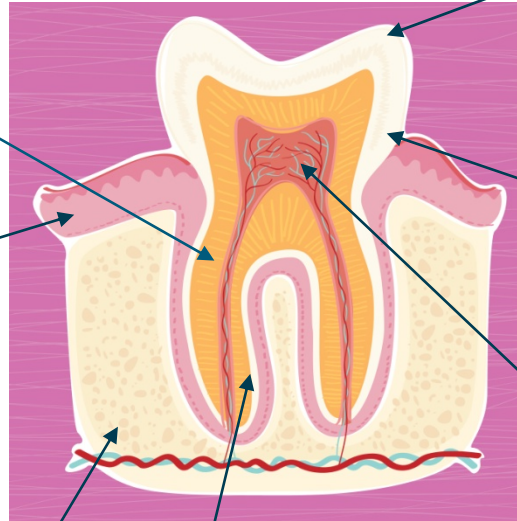
| Type of Dental/Oral Healthcare Provider | What They Do |
|---|---|
| General dentist | Much like your primary care physician, your general-care dentist examines and monitors the condition of your teeth and gums. He or she will chart an overall plan to treat problems and to prevent future problems. A general-care dentist uses a number of procedures for restoring teeth that have decay, disease or have been injured. |
| Pediatric dentist (also called pedodontist) | Pediatric dentists have postgraduate training in working with children and conditions common to children. They have kid-size equipment and are experienced at putting children at ease. |
| Oral and maxillofacial surgeon | Surgery of the mouth, jaw and face are performed by an oral and maxillofacial surgeon. Common surgeries are dental implants, correcting cleft palates and repairing facial injuries such as fractured jaws. |
| Periodontist | Periodontists specialize in diseases of the gums and other tissues that support your teeth. |
| Endodontist | Have you ever had a root canal? It may have been performed by an endodontist, a specialist who focuses on the pulp—the tissues, blood vessels and nerves inside your tooth and in the tissues that surround the outside the tooth's root. |
| Orthodontist | Making sure your teeth are straight and your teeth meet properly when you bite down is the job of an orthodontist. Braces and retainers are common tools used by an orthodontist. |
| Cosmetic/aesthetic dentist | From teeth whitening and tooth veneers to gingival sculpting, bridges and braces—a cosmetic dentist has the tools and technology to bring a great-looking smile to your face. |
| Dental hygienist | An indispensable defender of your dental health, your dental hygienist conducts initial examinations, cleans teeth, scrapes away stubborn tartar, takes x-rays and provides instruction in self-care. |

Anatomy of a Tooth:

Dentin lies just under the enamel and makes up most of the mass of your tooth. Like enamel, dentin can become decayed.

Gums, or gingiva, are part of the mucous membrane in your mouth. When healthy, they are a coral-pink color. Inflammation of the gums, gingivitis, can lead to more serious gum disease.

Bone supports your teeth. The bacteria that cause gum disease contain toxins that dissolve the bone.



The **Crown** is the visible, top portion of the tooth.

Enamel is the shiny white part of the tooth. It's tough, but it can become decayed or damaged.

Pulp is made up of soft tissue, nerves and blood vessels. When cavities aren't treated, the pulp becomes diseased. This can lead to tooth loss.

The **Root** is the part of the tooth you don't see. About two thirds of the total length of the tooth, the root is attached to the bone.

What you may not know about tooth loss

Teeth have an important job **in addition** to chewing and giving you a great smile. In fact, your teeth are essential to maintaining the normal structure of your face. If restorative steps aren't taken when you lose a tooth, the part of the jaw bone that once held the tooth dissolves and the remaining teeth shift out of alignment.

When people are missing most or all of their teeth, the upper and lower jaw bones shrink in size, the gums recede and the space between the nose and chin decreases. Called "facial collapse," this gives the mouth and cheeks a sunken look that adds years to a person's appearance. Fortunately, advances in cosmetic dentistry make it possible to restore the mouth, typically using dental implants.

In a national survey, Americans rated the smile as a person's most important attribute.



The road to tooth decay and gum disease

Tooth decay and gum disease don't happen overnight. Instead, they take a long and winding road that can lead all the way to periodontal disease and tooth loss.

Tooth Decay

Plaque is a sticky, invisible film that builds up on your teeth, between your teeth, on your gums and under your gums.

Bacteria from food or beverages stick to the plaque. They create an acid that eats away at teeth. Eventually, the

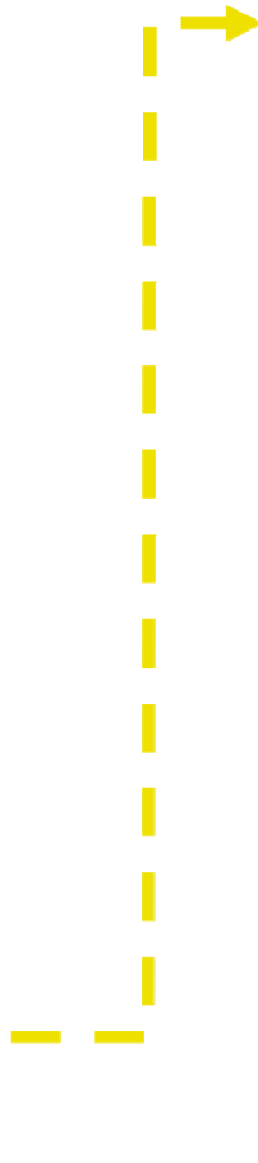
If the cavity isn't treated, the bacteria eat their way through the tooth to the pulp and the pulp decays. This

Gum Disease

When tooth decay is untreated, the bacteria that destroyed the tooth can cause an infection of your gums called gingivitis.

Gingivitis progresses to periodontitis, a more serious infection. Your gums separate from your teeth and your teeth may become loose or out of alignment

The infection that started with the build up of plaque travels to the bone that supports your teeth. Gradually, the bone dissolves.



Your questions about your teeth and gums

Q My dentist has talked to me about not flossing regularly. How can he tell?

A Most dentists and hygienists can tell you're not flossing by the number of cavities you have—particularly in areas where teeth meet—and by irritated, bleeding gums.

Q I've always taken antibiotics before having a dental procedure, so why am I now told it's not necessary?

A For many years, it was believed that antibiotics would prevent infective endocarditis (IE), a dangerous infection of the heart's lining or valves. People were believed to be at greater risk for IE if they have a condition such as mitral valve prolapse or rheumatic heart disease. However, studies have shown that antibiotics and antibiotic resistance are the greater concerns for people with these conditions. Antibiotics should still be taken by people with specific serious cardiac issues, including: a history of having had IE, artificial heart valves, a number of congenital heart conditions and some cardiac transplant patients.

Q I'm told I need oral surgery because I have gum disease. Is this painful?

A Oral surgery is commonly used to treat people who have receding gums due to disease or age. In most likelihood, your oral surgeon will graft tissue from the roof of your mouth onto your gums. If a small amount of tissue is involved, local anesthesia will keep you comfortable. If the grafts are larger, your oral surgeon may use general anesthesia or local anesthesia combined with sedation.

Q Should adults get dental sealants?

A Absolutely. Sealants, plastic material bonded to the crevasses of your back teeth, protect adults and children from harmful bacteria and enamel-destroying acids.

Q Is it true that chewing gum can be good for your teeth and gums?

A Yes, clinical studies have shown that chewing sugarless gum for 20 minutes after eating can reduce tooth decay. Some brands have ingredients that strengthen tooth enamel, too. Look for gum that has the ADA seal of approval.

41% of daily smokers over age 65 are toothless.

Quiz: Dental myths and truths

- 1. T or F** Right-handed people usually chew on the right side of their mouth.
- 2. T or F** In many European countries, children are visited by a rabbit instead of the tooth fairy.
- 3. T or F** Until you can get to a dentist, either put a knocked-out back in its socket or in a cup of beer.
- 4. T or F** It was long believed that an evil tooth worm bored holes—cavities—in teeth.
- 5. T or F** Wisdom teeth normally appear when a child reaches puberty.
- 6. T or F** You can catch bacteria that cause gum disease by kissing.

Answers are on page 15.

Tips for getting your kids to brush and floss

You can't begin teaching good dental hygiene too soon. The benefits will last a lifetime.

Toddlers

With toddlers, choose a fun brush made for little ones and use a pea-size dab of a toothpaste. Choose a brand recommended by the American Dental Association. (You'll find this information on the toothpaste box.) Make sure the child doesn't swallow the toothpaste. If this is a problem, use a fluoride-free toothpaste until the child's a little older. Teach proper brushing techniques by demonstrating on a doll or by letting the toddler "help" brush your teeth. Begin flossing as soon as your child has teeth that touch.

Over time, pacifiers and thumbs push the front teeth forward and affect the child's bite. Seek advice from your dentist and pediatrician if one of these habits continues past age five—the damage of thumb sucking is of greatest concern with permanent teeth.

Children

- Help your kids brush and floss until you're confident they can do it well by themselves, normally when they're about five or six years old.
- Kids should brush their teeth in a circular pattern for at least three minutes.
- If you're meeting resistance to brushing and flossing, consider adding rewards, such as sticker charts, until a dental care routine is established.
- Do you have a budding sports star? Make sure mouth guards are always part of the uniform.
- Talk with your dentist about supplemental fluoride if your water supply isn't fluoridated. Fluoride helps prevent and reverse tooth decay.
- Another effective way to protect kids' teeth is with sealants. Clear plastic sealants are applied over the parts of the back teeth used to chew where they serve as a barrier to food and acid that destroys the surface of the teeth.
- Offer kids healthful, crunchy snacks like apples and carrots. These foods help remove plaque.

Teens

Teens are voracious consumers of colas and carbs, both of which are highly harmful to teeth. Encourage your teen to follow a healthful diet, including getting enough calcium.

Third molars, popularly called "wisdom teeth," normally appear between ages 16 and 25. Often, there isn't enough space in the mouth for wisdom teeth and they only partially break the surface of the gum or don't erupt at all. In trying to find space, wisdom teeth can throw other teeth out of alignment and they're prone to decay and infection. Most dentists agree that the best solution for problem wisdom teeth is to extract them.

Your teen may think that tongue or lip piercing is stylish now but they often become infected and have a tendency to chip and crack teeth.

Steps you can take to prevent bottle mouth

One of the most common causes of serious tooth decay in children is called “bottle mouth.” Bottle mouth can occur when an infant or toddler is given bottles containing formula, milk or juices for extended periods of time. These products contain sugars, which become acids when they react with bacteria in the mouth. These acids begin attacking your child’s teeth about 20 minutes after the child first drank from the bottle. Of course you can’t stop feeding your infant but you can take steps to keep your child from getting this damaging condition.

If your child takes a bottle to bed, only fill it with water. Because your child has less saliva when sleeping, acids from milk, formula and juices are even more damaging to the teeth.

After feeding, wipe your infant’s teeth with a gauze pad.

Begin brushing the baby’s teeth as soon as the are fully visible.

Take your child to a dentist by his or her first birthday and maintain the schedule of visits the dentist recommends

More than 7 percent of children have lost at least one permanent tooth to decay—by age 17.



The latest options for restoring or replacing your teeth

You have a cavity or more extensive tooth decay. What's next? Fortunately, there are a growing number of effective solutions restoring teeth. Your dentist will tell you about the different options and make recommendations about which will work best for you. Following are the most common methods of tooth restoration.

Fillings

When you have a cavity, your dentist will remove the decayed portion of the tooth and replace it with a filling. Common Filling materials include:

Amalgams

Amalgams are metal fillings that have been used for over a century. They're durable and inexpensive. Recently, there has been some concern about the health effects the mercury content in amalgam fillings. Leading health organizations differ on their positions about use of the amalgams, however, the FDA and the ADA both endorse their continued use.

Dental Composites/Veneers

Sometimes called "*white fillings*," dental composites are a mixture of resins and powdered glass that look like natural teeth. They're used to fill cavities, chips and cracks. They're also used as a lower-cost option for minor cosmetic improvements, such as reducing gaps between teeth, repairing chips and enhancing unsightly teeth. When used cosmetically, people often refer to the composites as "*veneers*."

Ceramic/Porcelain

Ceramic fillings are longer-lasting and more stain resistant. They're usually more expensive than other options.

Glass Ionomer

Fillings made of this acrylic/glass blend don't always require drilling which makes them a good choice for small children. Also, because they bond to the tooth surface and release fluoride, they're particularly useful in controlling the spread of decay below the gum line. Glass ionomer is also used as an adhesive when applying veneers.

Root Canal Treatment

New techniques and pain-control options make root canal procedures far more comfortable than in the past. Used when tooth decay has spread into the pulp in the root canal, this process involves removing the diseased pulp, cleaning disinfecting the canal—then filling the canal.

Crown

Crowns, also called caps, are placed over the tooth after a root canal or if a tooth is chipped or cracked. In addition to protecting the tooth, crowns are selected to match your teeth for a more natural appearance.

Extractions

When a dead tooth isn't a candidate for a root canal procedure, it must be removed to prevent infection and abscesses. After you're fully numb, a simple extraction can take just minutes. More complex extractions normally require the services of an oral surgeon. You'll want to replace the tooth, even if it's in the back of your mouth, to maintain the alignment of your remaining teeth.

Bridge

A bridge actually "bridges" the gap left by one or more lost teeth. A bridge has a prosthetic tooth and can be held in place with caps on the teeth next to the gap or with dental implants.

Dental Implants

Dental implants are the gold standard for tooth replacement. Functioning as an artificial root attached to the jaw bone, the implant and bone actually bond, forming a durable support for a crown or bridge. In many circumstances, mini implants may be used. Because mini implants are smaller, they don't require the surgery necessary with regular implants. And, unlike traditional implants, the crown or bridge may be attached immediately.

Do you know what to do in a dental emergency?

Knocked-out tooth

Handle the tooth by the crown, not the root, and rinse it in water or milk. Ideally, the tooth can be held in the socket or mouth until a dentist is reached. If not, place the tooth in milk, or water if milk isn't available. Timing is critical—if you can get to a dentist within an hour, there's a stronger chance the tooth will reattach to the socket.

Broken tooth

The tooth will need to be examined promptly by a dentist and x-rayed to determine the extent of damage. Because there's a high risk of infection and abscess, a root canal will be performed if it's likely the injury will cause the tooth's pulp tissue to die. If it has been loosened by injury, it will need to be stabilized or extracted.

Chipped tooth

A chipped tooth should be examined by a dentist in case steps need to be taken to protect the tooth from further damage.

Toothache

A toothache can have many causes, including a cavity, crack, eruption of a new tooth, food stuck between the teeth and gum disease. Rinsing the mouth with warm water or warm salt water and taking an aspirin-free, over-the-counter pain reliever may provide comfort. A cold ice pack may be applied to the cheek.

If your child has swelling of the cheek, fever and pain, contact a dentist immediately.

5 things your dentist wants you to know

1. Oral health problems don't improve without treatment.

In fact, most conditions only get worse. When you identify and treat problems with your teeth and gums in the early stages, you stop the progression of decay or disease and avoid unnecessary pain and cost.

2. You may be tired of hearing it but flossing is important.

Do you floss your teeth about as often as you change the oil in your car? There's a reason why you hear, "floss, floss, floss," at the dentist's office. Toothbrushes can't remove food between your teeth; you need to floss for this. If the food isn't removed, you're more likely to have tooth decay and gum disease.

3. In most cases, it's better to have a root canal than to pull the tooth.

Many people avoid root canals because they have unwarranted fear of the procedure, which today is relatively pain-free. In removing the tooth's decayed pulp and treating the underlying infection, the tooth can be preserved. Pulling a tooth may seem easier, but it will likely cost more to replace the missing tooth with an implant or bridge.

4. Choose the dental implant.

If you lose a tooth, a dental implant is a better option than a crown. Why? Because a crown requires removal of a portion of the teeth on either side of the empty tooth socket. An implant is attached to the jaw bone, leaving other teeth in their original condition.

5. It's pointless to have cosmetic dentistry without first treating oral health conditions.

The popularity of cosmetic dentistry is skyrocketing. Advanced procedures work wonders in approving the appearance of your smile. But they shouldn't be performed if you have untreated tooth decay or gum disease.

6. Think you're too old for braces? Think again!

If your impression of braces is a mouth full of shining metal "train tracks," it's time you learned about the exciting new advancements in orthodontics. Today, youth and adults have a number of attractive alternatives and new technologies are being introduced regularly.

7. Conventional Metal Braces

Normally made of stainless steel, traditional braces are still the best choice for most children.

- PROS Less expensive than most options.
- CONS Very visible.

8. Ceramic Braces

Ceramic braces operate much like conventional braces, but the unsightly metal brackets are replaced with clear or tooth-colored brackets. The band that attaches to the brackets is clear or white.

- PROS Appearance is subtle. Some people say they're more comfortable.
- CONS More costly. Monthly adjustments are needed. May take a little longer for desired results. May not be suitable for major adjustments.

9. Invisible Braces

Clear, plastic aligners straighten your teeth—invisibly. Fitted over your teeth, they slowly ease them into alignment. Every two weeks, you get a new set that adjusts the alignment a little further. Often called "Invisalign" braces because of the dominance of this brand.

- PROS Very difficult to see the braces. Perform faster than regular braces. Can be removed when you eat and brush your teeth.
- CONS New aligners are required every two weeks. They work on front portion of mouth only. Not for complex orthodontic conditions.

10. Lingual Braces

Wire braces are fitted on the back side of your teeth. They function much like conventional braces.

- | | |
|------|---|
| PROS | Can't be seen from the front of the mouth. |
| CONS | Can be more uncomfortable and harder to adjust to. May take longer for desired results. May be more expensive than many alternatives. Not for all orthodontic conditions. |

11. Self-Ligating Braces

Tooth-colored braces that attach in a manner similar to traditional braces. There are a number of self-ligating braces that use different methods for straightening teeth. Two common technologies are 6-Month Smile and the Inman Aligner.

- | | |
|------|---|
| PROS | They work fast. On average, treatment is completed in six months. Much less noticeable. Cost effective. |
| CONS | Monthly adjustments are required. Not for all orthodontic conditions. |

Answers to Quiz: Dental myths and truths

- 1. True** And left-handed people chew on the left side of the mouth.
- 2. False** A mouse is the tooth fairy substitute in many European countries. In Scotland, the tooth fairy stand-in is a white rat.
- 3. False** If the tooth can't go back in the socket until treatment is available, please put it in a cup of milk—not beer.
- 4. True** Until the 18th Century, people in many countries believed the tooth worm bored holes in teeth, causing pain when they wiggled.
- 5. False** The typical age for the eruption of wisdom teeth is 18.
- 6. True** Bacteria that cause gum disease may be transmitted by saliva.

Resources

The American Dental Association

www.ada.org

www.webmd.com Go to Healthy Living A-Z, select O, select Oral Health

Mouth Power Online - Oral Health Education Program

<http://www.mouthpower.org>

Dentists4kids – An excellent site for children and their parents, sponsored by a consortium of pediatric dentists

www.dentists4kids.com