

YOUR ORAL HEALTH

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YOUR ORAL HEALTH

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Your source for your oral health.



Stress. It's interesting that such a small word should have such dire connotations for many of us.

It's a given in this day and age that we lead increasingly busy lives and experience stress and its accompanying physical symptoms — tiredness, tense muscles, racing thoughts. But did you know that stress can have just as big an impact on your oral health? You may have noticed that you clench your jaw or grind your teeth. That is a sign that you may be under stress. However, some of us aren't aware at all until it's too late. In this issue's cover article, learn about the signs and symptoms of stress-related oral health conditions. If you think you may be experiencing any of them, talk to your dentist. A diagnosis and a good treatment plan will give you one less thing to worry about.

If you have a family member currently residing in a long-term care home in Ontario, you may not have given his or her oral health much thought. But oral health and overall health are linked, and seniors need to maintain their oral health care, even when they are being cared for by others. Our article "Maintaining Oral Health Care in Long-Term Care: A Partnership" offers practical pointers for helping the health-care staff ensure that your family member's oral and physical well-being are looked after.

You can also read about the best oral health-care products for you and your family in this issue, and ensure that your vegan or lactose-intolerant child is getting enough calcium.

Taking care of your overall health also means taking care of your oral health, which includes visiting your dentist regularly. The diagnoses and early treatment of any oral health problems today can help to greatly reduce costly dental expenses later on. And brushing twice a day and flossing once a day, at a minimum, are two of the easiest ways to help keep a healthy smile.

Our *Your Oral Health.ca* Advisory Panel is made up of our ODA dentists, and all of our content is reviewed by them and based on trusted research. We try to answer questions that you, our patients, ask us. Please discuss these articles with your own dentist if you want more information on your own oral health.

As always, we hope to bring you a magazine that you find useful and informative. We publish this magazine for you, our patients, and want to hear your thoughts and ideas. Please email us at yoh@oda.ca and enjoy this issue of *Your Oral Health.ca Magazine*.

Have a happy and healthy summer!

DEBBIE SAUNDERS



For more information about a variety of oral health-care topics, please visit our public website at youroralhealth.ca. You may also find patient fact sheets, brochures and posters that you can download and recent issues of *Your Oral Health.ca Magazine*.



Our Contributors



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Jennifer Elliott is a writer who lives in the GTA with her husband, three kids and their two golden retrievers. Jennifer is so vigilant about her teeth that she has been known to keep a toothbrush, toothpaste and floss in her desk at work.



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At the Ontario Dental Association we provide innovative and inspired leadership to deliver exceptional value by:

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- Fostering a collaborative workplace environment which promotes creativity and personal growth while celebrating achievements; and
- Advocating with a unified voice for accessible and sustainable optimal oral health for all Ontarians.

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Are You Stressed?

Talk to Your Dentist!



Don't let stress become a pain in the mouth.

While your dentist can't make the stress go away, there is treatment to help ease the effects on your oral health.

By Bonnie Dean

Stress has become a common part of our lives. According to a 2012 Statistics Canada fact sheet, "Perceived Life Stress", 22.7 percent (6.4 million) of Canadians aged 15 and older reported that most days were "quite a bit or extremely stressful."¹ But if you really want to know how much stress impacts Canadians, just ask a dentist.



"I have definitely seen an increase in the number of cases of nocturnal bruxism [tooth grinding] and its associated signs and symptoms over the last several years," says Dr. Gerald Smith, a Thunder Bay dentist and President of the ODA.

Most of us are aware of the negative effects that extreme stress can have on our bodies — muscle tension, anxiety, stomach and digestive problems, to name a few. Some people with high levels of stress or prolonged stress may have higher blood cholesterol, increased blood pressure or be more prone to developing atherosclerosis (hardening and narrowing of the arteries).² Furthermore, people under stress sometimes make poor lifestyle choices — smoking, consuming too much alcohol and coffee, and eating unhealthy foods — which can lead to the risk of developing heart disease and stroke.

What many of us may overlook is the effect stress has on our oral health. Our mouths can be just as affected by stress as the rest of our bodies, and this can have real consequences for our oral and overall health.

The signs and symptoms of chronic stress can be subtle, and you may not be aware of its effects until it's too late. Being able to detect the oral signs of stress means your dentist is the first line of defence against the toll stress can exact on your health.

"Some of the most common signs of stress I see in my dental chair are teeth grinding, poor oral hygiene and increased tooth decay," says ODA Vice-President Dr. Jack McLister, a dentist who practises in London. "There also tends to be higher incidences of periodontal [gum] disease, canker sores and dry mouth."

Stress and your oral health

The general effect of stress is that people tend to neglect their oral health-care routines. They may not brush or floss as often as they should or miss dental appointments; they may alter their diet by consuming more sugar- and carbohydrate-laden foods; and they may drink more coffee and unhealthy liquids like energy drinks and soda pop. This not only greatly in-

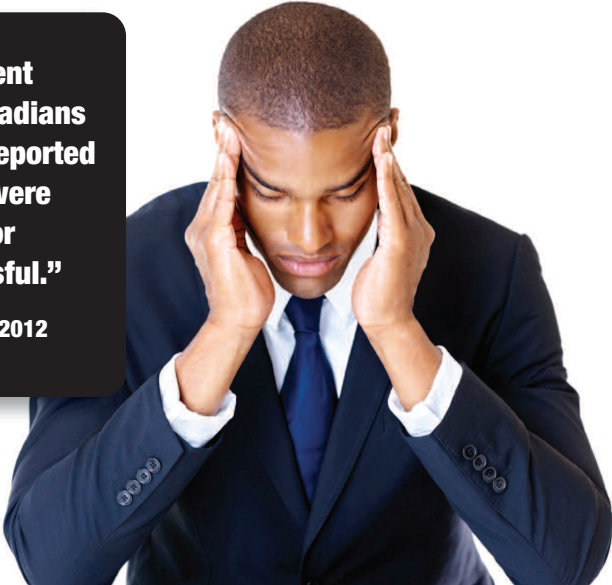
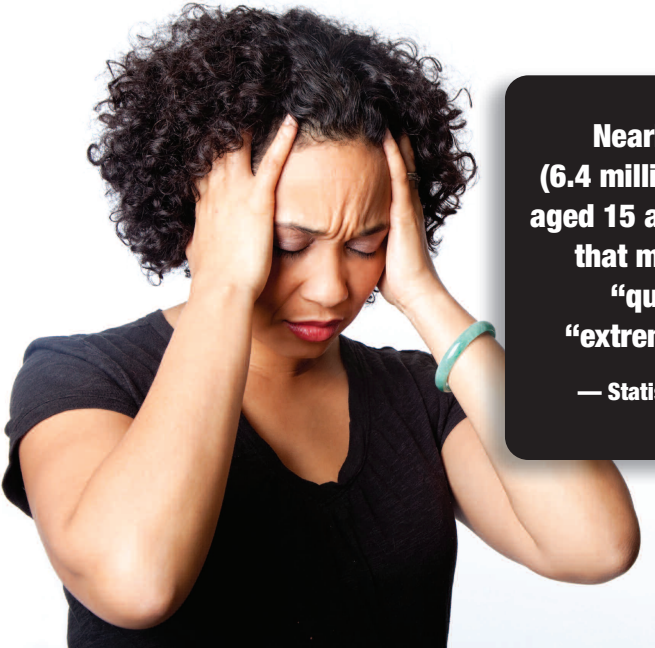
creases the risk of tooth decay, but the additional acid contributes to the erosion of tooth enamel.

Stress can also manifest into various oral health conditions that, if left untreated, can have a serious impact on your overall health and well-being. Here are some of the more common ones.

Bruxism or teeth grinding. If you are a bruxer, you may not even know. According to Dr. Smith, "patients may not even be aware that they clench their jaws or that they grind their teeth while they sleep."

The telltale signs and symptoms of bruxism are:

- teeth that are flattened, fractured, chipped or loose
- worn tooth enamel
- increased tooth sensitivity
- damage from chewing on your tongue or the inside of your cheek
- pain or soreness in the jaw or face, tired or tight jaw muscles
- a dull headache originating in the temples; pain that feels like an ear-ache.



**Nearly 23 percent
(6.4 million) of Canadians
aged 15 and older reported
that most days were
"quite a bit" or
"extremely stressful."**

— Statistics Canada, 2012

Over a long period of time, bruxism can cause a lot of irreparable damage. There are detrimental results that patients cannot see as easily as a worn or broken tooth. Bruxism is also a major cause of disorders that occur in the temporomandibular joints (see sidebar). Depending on the patient, Dr. Smith usually recommends an oral appliance or night guard, which “may help in reducing the bruxism habit and certainly assists in protecting the teeth from damage caused by grinding.”

Periodontal (gum) disease. Research has shown that stress affects our immune systems, increasing our susceptibility to infections, including the bacteria that cause gum disease.

“At times, gingival tissues can show signs of inflammation that could be stress-related, as well as increased signs and symptoms of certain oral conditions like lichen planus,” reports Dr. Smith. (Oral lichen planus is a condition where there are chronic, painful lesions on the mucous membranes of the mouth.)

Dry mouth (xerostomia). Dry mouth can be caused by stress and can also be a side-effect of medications taken to treat stress and depression. Saliva is vital to keep your mouth moist, wash away food and neutralize the acids that are produced by plaque. Without an adequate flow of saliva, your mouth’s first line of defence against plaque is compromised, and this can lead to tooth decay. If dry mouth is left untreated, you can develop tooth decay, gum disease and be at a greater risk for fungal or viral infections in your mouth.

To combat the effects of dry mouth, Dr. McLister recommends the following treatment to his patients: “Chew sugarless gum, sip water regularly and use non-alcohol mouthwashes and over-the-counter saliva substitutes.”

Canker sores. While these white spots that appear on the soft tissues in your mouth or at the base of your gums are harmless, they can be incredibly painful. They will usually go away on their own in a week or two, but if they persist for longer, your dentist may prescribe topical corticosteroids and antimicrobial rinses to reduce pain and inflammation.

Time to destress

There are many triggers to stress. “I find that financial and employment stress are most common and always present,” notes Dr. McLister. Whatever the cause, it’s important to identify your stressors so you can learn to deal with them effectively. You can also take simple steps to reduce its impact on your health.

- Find relaxation techniques or exercises to help you cope with stress. Counselling can also help.
- Brush and floss at least twice a day.
- Eat a balanced diet, with plenty of fruits and vegetables.
- Drink plenty of water throughout the day to moisten your mouth and stay hydrated.
- Stay active. If you don’t have time to exercise, a 30-minute walk every day is a good start.
- Get plenty of sleep.

“Above all, see your dentist, who can look for these issues during an examination and, therefore, diagnose and treat stress-related oral health problems,” says Dr. Smith. ■

“Patients may not even be aware that they clench their jaws or that they grind their teeth while they sleep.”

— Dr. Gerald Smith



Temporomandibular Joint Disorders

What is a TMD?

The temporomandibular joint (TMJ) is the name of the joint located on either side of your head, just in front of your ears. These joints connect your mandible (jawbone) to your temporal bone (skull). The TMJ, which can rotate and move forward, backward and side to side, is considered one of the most complex joints in the body. This joint, in combination with other muscles and ligaments, lets you chew, swallow, speak and yawn. When you have a problem with the muscle, bone or other tissue in the area in and around the TMJ, you may have a TMD.

Symptoms of TMDs

Signs or symptoms of TMDs include pain and tenderness in or around the ear, the jaw joint or the muscles of the jaw, face or temples. Other symptoms are problems opening or closing your mouth and a clicking, popping, crunching or grinding noise when you chew, yawn or open your mouth. TMDs may be linked with neck pain and headaches. If you have any of these symptoms, tell your dentist and your doctor.

Cause and effect

In most cases, TMDs are caused by a combination of factors like jaw injuries and joint disease, such as arthritis. It is believed that bruxism (tooth clenching or grinding) and head or neck muscle tension may make TMD symptoms worse. Stress is also a possible factor. However, it is not clear if stress causes TMDs or is a result of them.

Other things that may lead to TMDs are partial or full dentures that are not the right fit and certain habits such as fingernail biting and pen or pencil biting.

Treating TMDs

Most patients with TMDs get better by themselves, without any treatment. To help ease sore jaw muscles, place a cold or warm compress to your jaw and gently massage your jaw muscles. Eat a soft diet, cut food into small pieces and avoid hard, chewy or sticky foods. Try not to open your mouth too wide, even when you yawn. And, most importantly, relax your jaw muscles.

When you are relaxed, your teeth should be slightly apart and your tongue should rest on the floor of your mouth, with your lips barely touching or slightly apart. There should be a slight space between your upper and lower teeth, except during chewing, speaking or swallowing.

How your dentist can help

After a thorough examination and, if needed, appropriate X-rays, your dentist may suggest a plan to treat your TMD. This treatment plan may include relaxation techniques, a referral to a physiotherapist, a chiropractor or a behavioural therapist to help you ease muscle pain. Other treatment options may include medicine for pain, inflammation or tense muscles. If getting a good night's sleep is a problem, a number of approaches to improve sleep may be used. Your dentist may also recommend that you visit a dental specialist.

Your dentist may suggest wearing a night guard, also called an occlusal splint. It is made of clear plastic and fits over the biting surfaces of the teeth of one jaw so that you bite against the splint, rather than your teeth. This often helps your jaw joints and muscles to relax.

Source: Canadian Dental Association website; cda-adc.ca

1. Statistics Canada, "Perceived Life Stress, 2012"
2. Heart and Stroke Foundation, Canadian Mental Health Association, "Coping With Stress" (2013), Canadian Mental Health Association, National Office



By Gabrielle Bauer

Diabetes & Dental Care

Want to keep your gums and teeth healthy?
Here's what you can do.

You have probably heard a lot about the effect diabetes can have on your eyes and feet if it is left untreated or not managed properly. Did you know the disease can also affect your teeth, gums, and other parts of your mouth? Here is what you need to know and do in order to preserve your teeth and the structures that support them.



How Does Diabetes Affect My Oral Health?

“The mouth contains an abundance of small blood vessels, which can be affected by diabetes,” says Dr. Gerald Smith, President of the ODA. It is no surprise, says Dr. Smith, that “poorly controlled diabetes can cause several oral health problems.”

These may include:

Tooth decay (cavities)

The sticky substance that forms on your teeth, called plaque, contains many bacteria. They combine with sugars and starches in your mouth to form acids that gradually destroy your teeth and result in cavities. The higher your blood glucose (sugar) levels, the greater the supply of sugars — and the greater the risk of tooth decay. High glucose levels in your saliva may also help bacteria thrive.

Gingivitis (inflammation of the gums)

If plaque builds up over time, it hardens into calcium deposits that can cause your gums to become inflamed, or swollen.

Periodontitis (gum disease)

Left untreated, gingivitis can spread to the underlying bone and cause gum disease. Because diabetes lowers a person’s ability to fight infection and slows down healing, gum disease tends to be more severe in people with the disease. In fact, “the sudden unexplained appearance of gum disease, or gum disease that doesn’t respond well to treatment, may offer the first clue that a person has diabetes,” says Dr. Smith, who practises dentistry in Thunder Bay, Ont.

Dry mouth

High blood glucose levels can decrease the flow of saliva in your mouth, which increases the risk of tooth decay and gum disease. Improving your blood glucose control can lead to an improvement in salivary flow.

Yeast infection (thrush) and other oral infections

“People with diabetes have a lower resistance to infection and a longer healing process, so they’re prone to a lot of infections,” says Dr. Smith. Excess sugar in the saliva — a result of poorly controlled diabetes — can lead to a buildup of a fungus called *Candida albicans* and cause thrush. Watch for creamy white patches on your tongue or inner cheeks. The infection may also spread to other parts of your mouth or throat.

Can Diabetes Medications Affect My Oral Health?

In general, diabetes medications do not cause problems with your teeth or gums. A possible exception is the class of glucose lowering medications called thiazolidinediones, which includes pioglitazone (Actos) and rosiglitazone (Avandia). In a small minority of patients, these drugs may cause tooth pain or discomfort.

Does Dental Disease Affect My Blood Sugar?

“Infections in general can affect blood glucose levels,” says Dr. Smith. Gum disease causes your immune system to release molecules that trigger swelling. This makes blood glucose more difficult to control.

What Are The Signs Of Dental Disease?

Sore, swollen, and red gums that bleed when you brush your teeth are signs of gingivitis. If your gums have shrunk or pulled away from your teeth, you could have periodontitis. Report any suspicious signs — such as bleeding, sore or swollen gums, mouth pain, or loose teeth — to your dentist.

Oral hygiene routine check list

- ✓ brush your teeth at least twice a day
- ✓ use a toothpaste that contains fluoride
- ✓ floss at least once a day
- ✓ follow a healthy diet



What Can I Do To Preserve My Oral Health?

Work with your health-care team to get your blood glucose under control. At the same time, Dr. Smith recommends maintaining a consistent oral hygiene routine that includes:

- brushing your teeth at least twice a day
- using a toothpaste that contains fluoride
- flossing at least once a day
- following a healthy diet

While limiting sweets is always a good idea, it will not necessarily prevent cavities: “Food particles left between your teeth will break down and become acidic, even if they’re not sugary,” says Carolyn Gall Casey, Education Director for the Canadian Diabetes Association (CDA). “That’s

why brushing and flossing your teeth regularly are so important.” Regular dental checkups, including plaque removal, are a must. “Your dentist can tell you how often you need to visit,” says Dr. Smith, adding that “I have some patients with diabetes whose oral health is managed very well with visits twice a year, while others may require visits every three months.” If you already have gum disease, you will need to visit your dentist more often.

If you smoke, here is one more reason to quit: The risk of developing thrush and gum disease is higher in smokers with diabetes than in non-smokers. Smoking also seems to affect blood flow to the gums, which may slow down wound healing in this area. ■

Need More Info?

For more information about diabetes, or to request a diabetes information kit, please visit diabetes.ca or call 1-800-BANTING (226-8464).

What’s the solution?

Dry mouth	Chew sugarless gum, suck on sugarless mints, or use a mouth moisturizer available over the counter at the pharmacy.
Yeast infection	Medication or mouthwash.
Gingivitis	Good oral hygiene (brushing, flossing, diet, plaque removal).
Periodontitis	Professional dental treatment, which may include plaque removal, smoothing the surfaces of your dental roots, antibiotics, and/or surgery.

Reprinted with permission from the Canadian Diabetes Association and *Diabetes Dialogue*, Spring 2015, diabetes.ca/dialogue.

Calcium Counts!



*There's a lot more to calcium than
building strong bones and teeth*

It happens every time my three “little people” (admittedly, they’re not so little now that they’re all teenagers) and I trudge into the dentist’s office for a checkup: when asked if they drink milk, only one of my three teenagers can answer, “Yes.” The other two get looks on their faces like they’re somehow hoping the one who drinks milk is answering (and consuming enough milk) for them all.

A stern talk about the importance of dairy — and, specifically, calcium — usually follows, as does the setting in of a not-so-healthy dose of Mother’s Guilt.

While I know calcium is important for the development and maintenance of healthy bones and teeth, I was surprised to learn there is much more to the benefit of this important nutrient than that. “Calcium keeps our bones and teeth strong and helps our muscles, blood vessels and nerves work properly,” says Dr. Jack McLister,

Vice-President of the ODA and a dentist in London. Calcium also helps to regulate hormones and enzymes, increases bone strength by slowing the rate of bone loss as we age; adequate absorption of calcium early in life may also protect against obesity later on.

With such an important role in our bodies’ development and overall health, how is a parent to be sure his or her children are getting enough calcium, especially if those children are not big on dairy, are lactose-intolerant or are vegan?

“Parents do not need to be calculating daily calcium intakes from tables and labels,” assures Rita Barbieri, a registered dietitian and a contact dietitian at EatRight Ontario, a free service that allows users to ask nutrition-related questions and receive feedback by phone or email from a registered dietitian. It’s easy for children to meet their calcium needs

when they follow *Canada’s Food Guide* (CFG), even if they are vegan,” she says. According to CFG, children ages two to eight need only two servings of milk or milk alternatives (examples of one serving include 8 ounces/1 cup/250 mL of milk or 1-1/2 ounces of hard cheese), and children ages nine to 18 need only three to four servings.

What’s more, Barbieri says, calcium can be found in a variety of foods and drinks: milk, cheese and yogurt are a few of the obvious calcium-rich foods that may fill out our diets, but nuts and seeds (such as sesame seeds and almonds, and their corresponding butters), beans, figs, spinach, calcium-based tofu (read the label to be sure), fortified drinks (like orange juice or soy milk) and fortified almond milk are good sources, too. And while many beverages like almond, rice or oat milk are a source of calcium, they are not a source of protein and are not

considered a milk replacement, only soy milk.

For those who are lactose intolerant (people whose digestive systems have an inability to digest the natural sugar in dairy), Barbieri says that each individual has his or her own level of tolerance and often their digestive systems are still able to handle hard cheese and yogurt.

Alternately, calcium can be found in lactose-free milk, vegetables (like broccoli, kale and bok choy) and canned fish with bones (like salmon and sardines); I sneak sardines into our family's recipe for Caesar salad dressing), beans (like kidney, pinto and navy) and some nuts.

Vegan children can get calcium from fortified soy milk, fortified orange juice, firm and extra-firm tofu (made with calcium), beans and dark, leafy greens. And for those kids (like mine) who simply don't like milk or milk alternatives, Barbieri says that, in many cases, kids who won't drink milk will still eat cheese or yogurt (or drink yogurt-based drinks) and advises against relying on chocolate milk, strawberry malted milk or milk-based drinks that are chocolate bar-flavoured (as these drinks are high in unneeded sugar, and it means you're trading one nutrition issue for another). Instead, she suggests offering up foods that are cooked with milk (like cream-based soups — substituting milk for water — pancakes and muffins) and making milkshakes with a combination of milk, plain yogurt, a ripe banana (or a scoop of frozen mixed berries) and a spoonful of natural peanut butter (chia seeds, almond or cashew butter), which offer calcium, as well as the added benefit of a serving or more of fruit and extra protein, iron, fibre and folic acid, too.

When all else fails, Dr. McLister says, calcium supplements can be taken to help balance out deficiencies for vegans and those who don't eat milk and cheese; although, no more than 500 to 600 mg at a time. ■

What's Recommended ...

0 to 6 months:	200 mg a day (upper limit 1,000 mg)
7 to 12 months:	260 mg a day (upper limit 1,500 mg)
1 to 3 years:	700 mg a day (upper limit 2,500 mg)
4 to 8 years:	1,000 mg a day (upper limit 2,500 mg)
9 to 18 years:	1,300 mg a day (upper limit 3,000 mg)
19 to 50 years:	1,000 mg a day
Breastfeeding mothers aged 14 to 18:	1,300 mg a day
Breastfeeding mothers aged 19 to 50:	1,000 mg a day
"Until the age of 50, gender does not play a role in calcium requirements," says Rita Barbieri, at which time the following guidelines apply:	
51 to 70 years, male:	1,000 mg a day
51 to 70 years, female:	1,200 mg a day
71+ male and female:	1,200 mg a day

EatRight Ontario is a confidential phone service
— open to all residents of Ontario —
where callers can speak to a registered dietitian for free.
The service is offered Monday to Friday, 9 am to 5 pm,
and extended on Tuesdays and Thursdays until 9 pm.
1-877-510-5102 | eatrightontario.ca



Helpful Tips

Here's how to tuck a little more dairy into your kids' meals:

- ➔ Add shredded Cheddar to soups
- ➔ Pack a yogurt tube, or drinkable yogurt, in their lunches
- ➔ Add white beans to soups
- ➔ Add sliced Cheddar, Swiss or provolone cheese to sandwiches
- ➔ Make mini pizzas with whole-wheat English muffins, pizza sauce and mozzarella or soy cheese
- ➔ Make a quick snack of whole-grain crackers and cheese
- ➔ Load up the Sunday-night chili with red beans, topped with shredded Cheddar
- ➔ Serve frozen yogurt with fruit as dessert





Maintaining Oral Health Care in Long-Term Care: *A Partnership*

Ensuring your loved ones receive the right dental care for their needs requires a combined effort. Here's how to work with long-term care staff to make that a reality.

By Cheryl Embrett

When my mother-in-law was admitted to a long-term care facility after having a stroke, her oral health care was, quite frankly, the last thing on our family's minds. It wasn't until she was experiencing pain with her dentures that we realized we needed to pay more attention to her dental needs.

Seniors living in long-term care facilities are at particular risk of complications from poor oral health care because of frailty, declining health and increased dependence on others for personal care. "Oral health can definitely take a back seat, particularly when someone is struggling just to eat or to control their behaviour," says Dr. David Clark, Clinic Director of Dental Services at Ontario Shores Centre for Mental Health Sciences in Whitby. "A lot of the elderly have had the advantage of good dental care, bridgework, crowns and even implants. Then they enter a phase where

they have a stroke, for example, and none of that can be maintained, and multiple medications are often now required for necessary reasons, and everything frequently deteriorates very quickly."

There's also a perception that dental care isn't as important later in life. Not true, say the experts. Poor oral hygiene can cause tooth decay and gum disease, which often lead to unintended weight loss and malnutrition because of chewing problems. And research has shown that gum disease may be related to many serious health issues in the elderly, including heart disease, pneumonia and diabetes. A healthy smile also promotes positive self-esteem, and that's important at any age.

So how do you ensure that your loved one receives good mouth-care maintenance on a daily basis, whether they have their own teeth, dentures or no teeth? Read on.

Work as a team

While staff members at long-term care facilities are mandated to assist or provide residents with daily oral care, the family should get involved, too, says Amanda Laird, Manager of Nursing Practice for the Regional Municipality of Durham, in Whitby, which owns and operates four long-term care homes. "They can help by letting us know the resident's regular habits and practices. For example, they may prefer to have their dentures soaked in something other than what's provided. Or they may prefer a different toothbrush. We also like to know their oral history. Did they always have their own teeth or did they just get new dentures that they're adjusting to?"

TIP:

It's important that families always act as advocates, advises Laird.

Determine what kind of care is needed

Assess how capable your loved one is of taking care of his or her own oral hygiene. “If seniors have good habits and can care for their own teeth, don’t mess with their routine,” advises Dr. Rick Caldwell, a dentist in New Liskeard and an ODA Past President. However, older adults with loss of strength, mobility or dexterity, or other functional loss may require full assistance. Whenever possible, enlist the resident’s participation using a hand-over-hand technique to guide the toothbrush in the mouth. People with dementia often forget to brush or how to brush, and conditions such as Parkinson’s can make it difficult to grip a toothbrush (see “Stock up on the right supplies” at right). “For information on useful props and techniques for assisting with dental care and proper flossing and brushing techniques, consult with your dentist,” advises Dr. Clark. “Ask them to show you what you can do, and get some pointers to take back with you.”

TIP:

Check out the Ontario Dental Association’s special report on seniors’ oral health care, *Oral Health and Aging: Addressing Issues and Providing Solutions*, at youroralhealth.ca. This report “addresses serious concerns about the quality and availability of oral health care services for frail seniors in Ontario” and offers recommendations “to achieve and maintain good oral health for all seniors.”

A healthy smile also promotes positive self-esteem, and that’s important at any age.



Stock up on the right supplies

Make sure your loved one has easy access to basic mouth-care supplies, such as a proper toothbrush, toothpaste and a denture cup, if required (labelled with his or her name). “We encourage family to bring in as much as possible to make it personal,” says Laird. Some older people have trouble gripping a standard toothbrush, but it can be enlarged to make it easier to hold by wrapping it in a washcloth, or using a tennis ball, sponge foam or bicycle grip. “The use of newer oral aids, like electric toothbrushes with special heads, can also make a big difference in oral hygiene,” says Dr. Ian McConnachie, an ODA Past President, who has a dental practice in Ottawa. Interdental brushes are a good alternative to flossing and are often easier for caregivers to use when the gaps between the teeth are slightly larger, as is often the case with older people. For residents experiencing dry mouth — a common concern for older people who are typically taking multiple medications — substitutes can be used to replace lost moisture and make the mouth more comfortable. “Candies sweetened with xylitol are also a good option since they help stimulate saliva without the plaque-producing effects of sugar,” says Dr. Deborah Saunders, Medical Director of the Dental Oncology Program at Northeast Cancer Centre/Health Sciences North in Sudbury.

TIP:

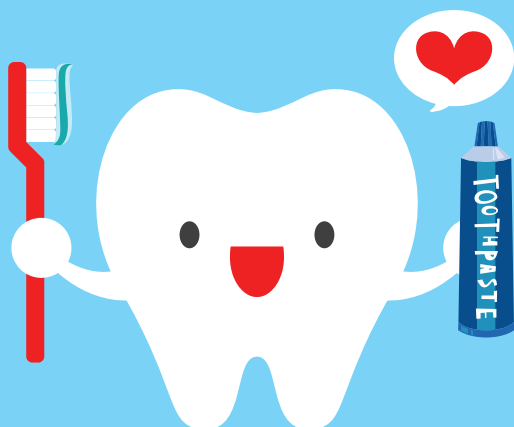
“Your dentist can help recommend products, tell you where to buy them and provide the prescription, if necessary,” says Dr. Clark.

Arrange for regular screenings

Regular cleanings and oral exams are an important cornerstone of good dental health. Many long-term care facilities provide in-home dental care clinics, which make it easier for residents who have mobility issues to get professional cleanings and checkups. Adds Dr. McConnachie: “It is important to appreciate the sensitivity regarding options for oral health care in long-term care facilities. A thorough oral examination by a dentist is important, and treatment for patients can involve different approaches consistent with their special needs.” Costs vary — at my mother-in-law’s long-term care facility, for example, an exam, X-ray, cleaning, antibacterial wash and topical fluoride costs approximately \$400 for residents with any natural teeth, and \$205 to \$255 for an examination, denture cleaning and labelling for residents with dentures and no natural teeth. ■

TIP:

The major disease that should be screened for in every patient, regardless of age, is oral cancer, advises Dr. Caldwell.



Home Care for Your Pearly Whites

Taking ownership of your oral health care at home is easy with this essential products guide



From toothbrushes and mouthwashes to toothpastes and floss, the choice of dental care products now available can be overwhelming. Fluoride or no fluoride? How about sensitive teeth? Mouthwash or rinse? Do you even need it?

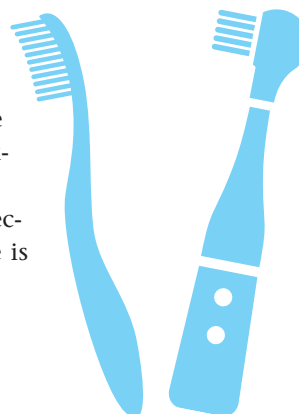
“Having listened to many product pitches over the years, I can understand how this topic can be very confusing,” says Dr. Victor Kutcher, a periodontist in Hamilton and ODA President-Elect.

However, just as you need to take ownership for your overall health, you need to do the same for your oral health. “Prevention through conscientious daily oral hygiene is inexpensive and requires very little time,” says Dr. Gerald Smith, ODA President. Here’s how to get the dental care products you need for effective oral care:

Toothbrushes: “I recommend soft, appropriately sized toothbrushes for my patients, and brushing two to three times a day,” says Dr. Smith.

As well, consider a powered toothbrush. They’re more expensive; however, patients typically do a better job cleaning their teeth with them. They can be fun to use (kids like that), and they can be easier for anyone with dexterity issues, like arthritis, for example.

The take-away? Manual toothbrushes can be just as effective as powered ones, but the key to good oral hygiene is using the toothbrush correctly for effective brushing.





Toothpaste: You can find a toothpaste for every need: fluoridated, whitening, plaque-reducing and toothpastes that soothe sensitive teeth top the list. “Simple fluoridated toothpastes are all that are really necessary,” says Dr. Smith, a dentist in Thunder Bay. However, he does make an exception for patients with tooth sensitivity, in which case there are many toothpastes available to aid in reducing the sensitivity.

“I recommend toothpastes that are currently recognized on the label by the Canadian Dental Association,” says Dr. Kutcher. (See “Get the seal of approval” below). For children, the CDA suggests that adults brush children’s teeth and gums until they are three years old, and to consult a health professional about whether or not to use fluoridated toothpaste. For kids between the ages of three and six, adults should help with brushing, using only a small, green pea-sized amount of fluoridated toothpaste.

Flossing — c’est chic!

Picture this: You’re out with friends — or maybe even on a first date. You go to the bathroom, and there it is: a teensy piece of spinach stuck between your teeth. Well, some Montreal restaurants are helping out a diner in need with floss dispensers, now showing up in restaurant restrooms across Quebec. Hopefully, this smart oral health-care trend will start to show up in other nosheries across the country.

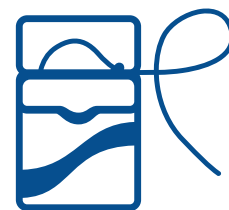


“The dental care products are not as important as the proper physical motion of someone regularly performing daily oral hygiene. Keep it simple, but do it!”

— Dr. Gerald Smith, ODA President

Floss: Yes, you do have to floss at least once a day, every day — it’s the only way to clean between teeth. You can get unwaxed or waxed, which some people find easier to use. As well, you can buy floss made of Teflon, which is shred-resistant — great for people with tight spaces between their teeth. Some people prefer dental tape, which is flatter and wider than floss, because they find it easier to use, and it doesn’t get caught between teeth as easily. And others prefer oral irrigators, which direct water at your teeth to clean them, or even air flossers, which direct pressurized air and micro droplets of water at your teeth.

Note: Air flossers are not recommended as a replacement for flossing, but could be useful for people with limited dexterity or with braces, for example.



Mouthwashes and rinses: They freshen your breath, help wash away food particles that brushing and flossing missed, and some can even help combat plaque and gingivitis. They’re generally not recommended for young children because of the risk of swallowing, but do adults need to swish? “It may be helpful because the rinse gets into areas and on surfaces that the toothbrush does not. My opinion is that the slight differences in formulation don’t matter as much as the proper use of the product,” says Dr. Kutcher. There is evidence, however, that mouthwashes made from essential oils may be a bit more efficacious, he adds.



“If someone has periodontal issues or difficulty maintaining proper oral hygiene, a mouth rinse containing chlorhexidine could assist in addressing the problem,” says Dr. Smith. And he suggests avoiding mouthwashes or rinses containing alcohol, especially if one experiences dry mouth, as alcohol is very drying to the oral tissues. ■

Get the seal of approval

When choosing dental care products, it’s a good idea to visit the Canadian Dental Association’s website (cda-adc.ca) to check its list of recognized oral care products, including toothbrushes, toothpastes, flosses, mouthwashes and rinses.

Healthy Mouths:

Children's Oral Health

Baby teeth start to erupt through the gums between six and nine months of age. These milk teeth or first teeth help your child eat and speak, and also help the adult teeth come in straight.

Even tiny teeth must be cleaned. Infants can get cavities just like older children and adults. Following all feedings, you should clean your baby's mouth and teeth.

If the teeth are not large enough for an infant toothbrush, then simply use a piece of gauze or a wet facecloth to wipe teeth and gums. This prepares baby early for what should become a lifelong habit.

Baby's first visit to the dentist should occur by the age of one year, or when the first teeth appear.

Baby teeth

		Approximate age tooth comes in (MONTHS)	Approximate age tooth is lost (YEARS)
Upper	Central Incisor	9	7
	Lateral Incisor	12	8
	Canine (Cuspid)	18	11
	First Molar	15	10
	Second Molar	26	10
Lower	Second Molar	26	11
	First Molar	15	10
	Canine (Cuspid)	18	9
	Lateral Incisor	11	7
	Central Incisor	7	6

Infants can get cavities just like older children and adults.

- Going to bed with fluids other than water in his or her bottle can cause a lot of damage to your baby's teeth. If your baby sleeps with a bottle, fill it with water.
- Following all feedings, you should clean your baby's mouth and teeth.
- Letting your baby sleep at the breast or with a bottle of juice, formula or milk can harm your baby's teeth. The sugar will remain on the child's teeth throughout the night and can damage the enamel and cause tooth decay.
- If your baby normally falls asleep while feeding, brush his or her teeth before feeding.

Baby's first visit — make it fun!

Around the age of one, or when the first teeth appear, make an appointment for your child to see the dentist. To prepare for the first visit:

- Try playing "dentist." Count your child's teeth, then switch roles and let him or her count yours.
- Make the exercise fun and explain that this is essentially what the dentist will do.
- Explain other things that may happen at the dentist's office, using non-technical language. Don't try to explain X-rays, for instance. Simply say, "The dentist might take some pictures of your teeth with a special camera."
- Take your child along with an older brother, sister or friend when they go for a routine exam or cleaning. It's a good way to familiarize your little one with the dentist's office.
- Treat the appointment as routine.
- Be sure to advise your dentist about any special needs or medical problems, such as allergies or bleeding disorders.
- Let your child bring along his or her favourite toy.



Around the ages of six to eight years, the first teeth start to fall out, and the permanent teeth erupt through the gums. By the age of 13 years, most of the permanent teeth, except for the wisdom teeth, should be in.



Permanent (adult) teeth

		Approximate age tooth comes in (YEARS)
Upper	Central Incisor	7-8
	Lateral Incisor	8-9
	Canine (Cuspid)	11-12
	First Premolar	10-11
	Second Premolar	10-12
	First Molar	6-7
	Second Molar	12-13
Lower	Third Molar (Wisdom)	17-21
	Second Molar	11-13
	First Molar	6-7
	Second Premolar	11-12
	First Premolar	10-12
	Canine (Cuspid)	9-10
	Lateral Incisor	7-8
	Central Incisor	6-7

Permanent teeth will not be replaced, so remember:

- Brush at least twice per day and floss at least once per day.
- Reduce your sugar intake. Tooth decay is caused by bacteria that feed on sugar. This forms acid that harms your teeth.
- Limit snacking.
- Eat a healthy, balanced diet.
- Wear a mouthguard to protect your teeth when you are playing sports. ■



DENTAL SPECIALTIES



Who are the dentists on your oral health-care team?

PROFILE OF AN **ENDODONTIST**

Dr. Simone Seltzer

By Jennifer D. Foster

If the dental care you want or need calls for extra training, you and your dentist may be more comfortable if you see a dental specialist. There are 10 recognized dental specialties in Ontario.

In this issue we talk to Dr. Simone Seltzer, an endodontist working in a private endodontic group practice in downtown Toronto since 1999. Dr. Seltzer is a member of the Toronto Central Dental Society and the Ontario Society of Endodontists, among others.

Did you know?

The term **endodontist** comes from the Greek words *endo*, meaning inside, and *odont*, which means tooth.



Q: What does an endodontist do?

Dr. Seltzer: Endodontists are dentists who specialize in maintaining teeth through endodontic (root canal) treatment. Endodontic treatment procedures involve the soft inner tissues of the teeth, called the dental pulp. All dentists are trained in the diagnosis and treatment of endodontic problems; however, endodontists, having additional training and expertise, are often called upon to diagnose and treat the more difficult and challenging cases.

Q: What additional education is required to become an endodontist?

Dr. Seltzer: In order to become an endodontist in Ontario, you must successfully complete a general dentist degree, then two or three years of post-graduate training in endodontics. The candidate must then pass an exam before being licensed to be an endodontist. I obtained my general dentist degree from the University of Toronto, then my endodontic training at Tufts University in Boston. I then returned to Toronto, and took and passed my Fellowship exams from the Royal College of Dentists of Canada.

Q: What is a typical day for you?

Dr. Seltzer: A typical day consists of performing a variety of procedures that include conventional root canal treatment, retreatments of failed root canals and the surgical correction of

endodontically treated teeth. An important part of my day involves examining and assessing new patients not previously seen in our practice or patients who have been seen previously, but, perhaps, have a problem on a different tooth or on teeth not previously treated. These situations allow me to provide a treatment plan with my referring dentist and other dental specialists in order to give the most predictable treatment possible for the patient. A lot of patients in our office are very nervous and scared. What I find particularly challenging and rewarding are the alleviation of their fears and being able to complete the treatment painlessly and effortlessly.

Q: Can you tell us about a memorable case?

Dr. Seltzer: Several years ago, a young woman came to my office, complaining of pain and swelling associated with one of her front teeth. She was frantic because, in addition to her discomfort, the tooth was darkening, and she was getting married at the end of the month. When asked about a history of trauma, she remembered that about five years ago she was bumped on the front tooth while playing with her pet dog. When I explained to her that her tooth had abscessed and required a root canal, she started to cry. She was terrified that the tooth would hurt and become even darker in colour or, worse, that she would lose her tooth right before her wedding day. After much reassurance, I was able to calm her down, perform a painless root canal and use bleach to restore the colour to match her adjacent teeth. She was

relieved, knowing that she would be able to show her beautiful smile on her wedding day. What a pleasure to see her back at her six-month follow-up visit, when she expressed her appreciation by sharing her wedding pictures; I will always remember how wonderful it was to help her with this special day!

Q: Why did you decide to become an endodontist?

Dr. Seltzer: I wanted to become an expert in one thing, so I could provide my patients with a specialist's technique and technology, and thereby satisfying the objective of dentistry: to help retain our patients' teeth, hopefully, for a lifetime. I find each and every case very challenging, requiring not only my diagnostic expertise, but also my manual clinical skills to help satisfy this objective.

Q: Any suggestions for successfully juggling a busy career and parenthood?

Dr. Seltzer: Every Sunday night I make a "To Do List," and I organize the errands I have to do and plan all the family meals for the coming week. That way, I just do one big food shop and don't waste time having to go back and forth to the store. Organization and time management are key! ■

To read the profiles of Dr. LouAnn Visconti, an orthodontist in Timmins, in our Fall/Winter 2014-15 issue of *YOH.ca*, and Dr. Lesli Hapak, a periodontist in Windsor, in our Spring/Summer 2014 issue, please visit our website at youroralhealth.ca.

Visit youroralhealth.ca

for more information
about the various
dental specialties.

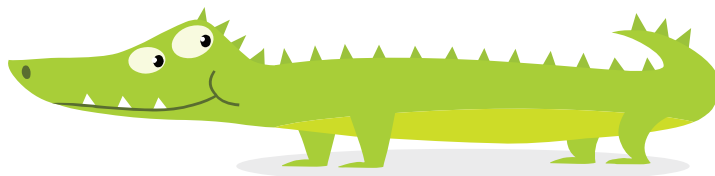




Do you enjoy games and activities?

Visit the ODA's Kids' Zone at youroralhealth.ca for more puzzles and online games!

tooth funfact



Crocodiles have 60 teeth in their mouth at any one time and can grow between 2,000 to 3,000 teeth during their lifetime!



did you
know...

Humans form two sets of teeth over the course of their lives. The first set (sometimes called baby teeth) features **20 teeth**. The second set (sometimes called adult teeth) features **32 teeth**.

Pam: "What did the dentist say to the computer?"

Dan: "I don't know, what?"

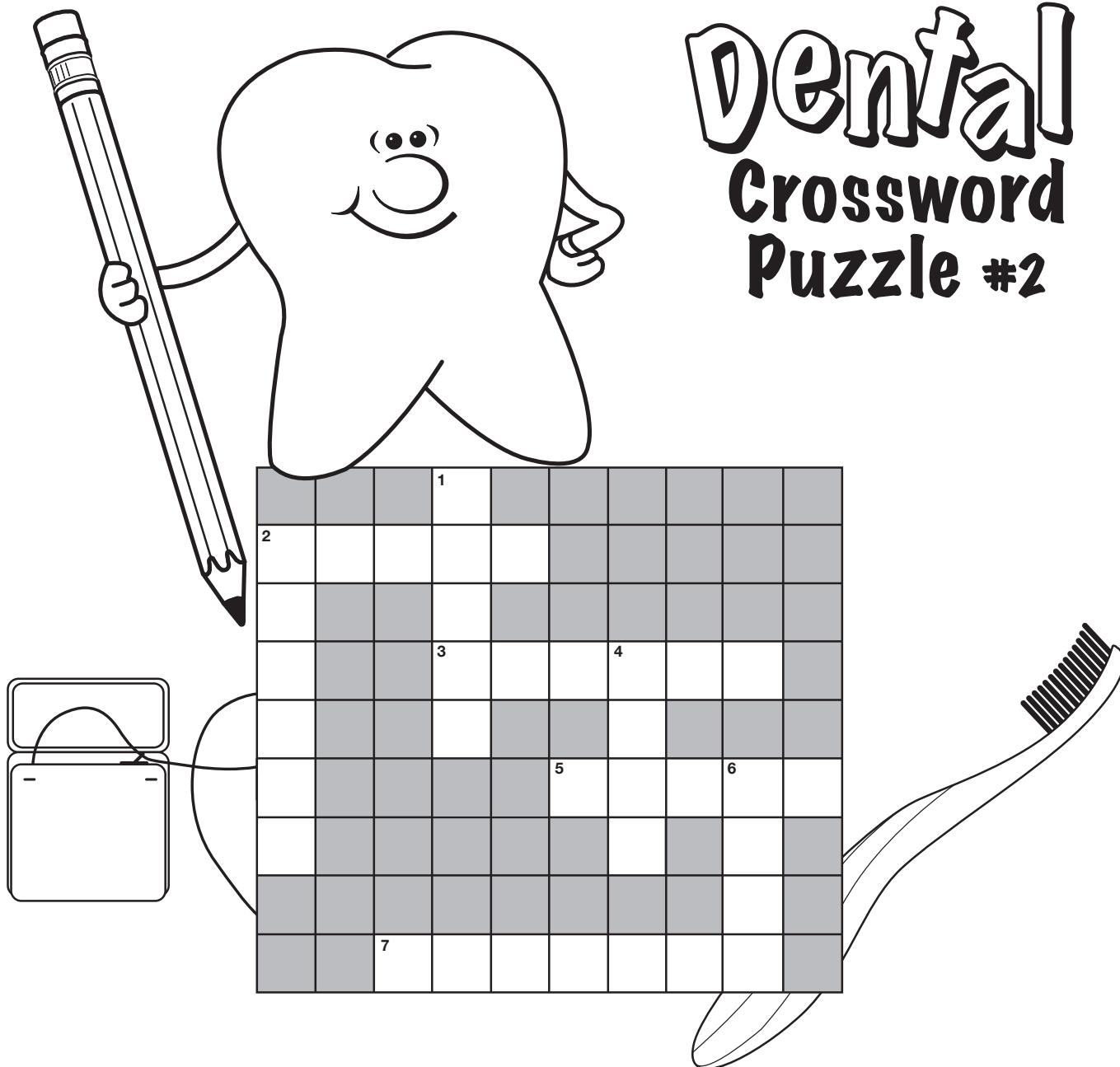
Pam: "This won't hurt a byte!"



Dental

Crossword

Puzzle #2



Across

2. Too much of this sweet stuff isn't good for your teeth. (5)
3. This part of your teeth is the hardest material in your body. (6)
5. This cleans between your teeth, where brushing can't reach. (5)
7. This person helps keeps your smile healthy. (7)

Down

1. Rinse your mouth with this after brushing. (5)
2. The liquid that forms in your mouth — also known as "spit". (6)
4. This calcium-rich drink is good for teeth and bones. (4)
6. After you rinse your mouth, you do this into the sink. (4)

Answers:

Across: 2. sugar 3. enamel 5. floss 7. dentist
Down: 1. water 2. saliva 4. milk 6. spit



MAKE YOUR TEETH A **BIG DEAL.**



Make time for you and your family
to see your dentist regularly.