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Welcome



Welcome from Dr. Deborah Saunders, Editor-in-Chief

Spring has finally sprung! It's time to get outdoors again and enjoy the sunshine, the fresh air and the sights and sounds of the season. And, if you're like a lot of us, it's also time to start spring-cleaning — not just our houses, but also ourselves. Need to lose a few pounds with bathing suit season just around the corner? Fruits and vegetables are important parts of a healthy diet, but before you even think

about embarking on a juicing regime, like the celebrities who tout their virtues, be sure to read our article "All the Juicy Details." Maybe juicing really isn't the cure-all that its legion of fans claims it to be.

Spring is also a great opportunity to make those health-related appointments you may have been putting off. Did you know that your dentist will not only look for signs of tooth decay and other oral health problems, but can also check for oral cancer and other dental conditions? Don't wait another day — make those appointments for you and your family now. And if you are reading this in your dentist's reception area, bonus points for you!

It's also time to acknowledge our hard-working Advisory Board: Dr. Ian McConnachie, Dr. Victor Kutcher and Dr. Jack McLister, plus the team at the Ontario Dental Association. Not only does our Advisory Board of dentists review and approve all content, but we also rely on our staff of policy specialists to thoroughly review each article, ensuring that all of the information is relevant from a health-policy perspective. We want you, our readers, to feel confident knowing that the content in our articles is the latest and most accurate that we can feature in our magazine — and that it meets our high standards.

And please, let us know what oral health-care topics are of interest to you and your family. We want to hear your ideas, questions and comments. Email us at YOH@oda.ca. Enjoy this issue of *YourOralHealth.ca Brought to You by the ODA*, and here's to a happy, healthy spring and summer!

DEBBIE SAUNDERS

For information about a variety of oral health-care topics, please visit our public website at youroralhealth.ca. You will also find Patient Fact Sheets, brochures and posters that you can download and recent issues of *YourOralHealth.ca Magazine*.

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Mission of the Ontario Dental Association

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

- Promoting the highest standards of dental care and supporting our diverse membership in their pursuit of professional excellence and personal fulfillment;
- 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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Fluoride Facts

By Bonnie Dean

Community water fluoridation (CWF) is a safe and effective means of preventing dental decay. The Ontario Dental Association (ODA) bases this position on the overwhelming scientific evidence available. Fluoride is an essential tool in the fight against tooth decay. Here are the facts you need to know.



Q: What is fluoride?

Fluoride is a mineral found in rocks and soil. When water passes over rock formations, it dissolves fluoride compounds that are present, releasing fluoride ions. Therefore, fluoride is naturally present in all water sources.

Q: How does fluoride prevent tooth decay?

Fluoride works by stopping or even reversing the tooth decay process. It keeps the enamel of the tooth strong and solid by preventing the loss of important minerals. Fluoride's main effect occurs after the tooth has erupted above the gum, when small amounts of fluoride are maintained in the mouth in saliva.

Q: Where do I get fluoride from?

Fluoride is provided through drinking water, toothpaste, mouthwash and supplements (tablets or drops). Gels, rinses and varnishes applied by your dentist may also contain fluoride. (See "Sealants or Varnishes: What's the Difference?" on page 7 for more information on fluoride varnishes.)

Q: If fluoride is available in other ways, why is it added to our drinking water?

Fluoridation of community water supplies is the best way to provide oral health protection to a large number of people at a low cost. According to Dr. Jack McLister, President-Elect of the ODA, "In the proper amount, water fluoridation is a safe and effective means of reducing dental decay across all ages and socio-economic groups."

Q: Who is responsible for the fluoride levels in our drinking water?

The responsibility of fluoridation of drinking water supplies is a decision that is made by each municipality, in collaboration with the provincial/territorial government and Health Canada. Together, through the Federal-Provincial-Territorial Committee on Drinking Water, both levels of government develop the *Guidelines for Canadian Drinking Water Quality*. These guidelines are reviewed and revised periodically to take into account new evidence-based scientific knowledge. According to Health Canada, the optimal concentration of fluoride in drinking water for dental health has been determined to be 0.7 mg/L.

Q: We brush our teeth with fluoride toothpaste every day. Why do we still need fluoridated water?

For most people, brushing with fluoridated toothpaste is not enough. Drinking fluoridated water throughout the day bathes our teeth in low levels of fluoride, which builds on the benefits of using fluoride toothpaste. The fact that individuals receive fluoride from multiple sources is taken into account when recommended water fluoridation levels are determined. "Even with other sources of fluoride, community water fluoridation reduces decay by an average of an additional 25 percent," says Consulting Editor Dr. Ian McConnachie, a pediatric dentist based in Ottawa and a Past-President of the ODA.



Q: Are there any health risks associated with fluoridated water?

There is no credible scientific evidence that fluoridated water or dental products contribute to or cause illness or disease. Fluoridation has been used successfully in Canada and the United States for more than 71 years. Reputable scientific studies conducted over the past several decades continue to consistently confirm the safety and efficacy of CWF.

Q: Should I be using fluoridated toothpaste with my child?

For children up to three years of age, parents/caregivers should consult with their dentist to determine whether their child is at risk of developing tooth decay. If there is a risk, the child's teeth should be brushed by an adult using a small amount of fluoridated toothpaste (the size of a grain of rice). If there is no risk, the teeth should be brushed by an adult using a toothbrush moistened only with water. For children between the ages of three and six years, only a small amount (the size of a green pea) of fluoridated toothpaste should be used. Children in this age group should be assisted by an adult when brushing their teeth.

Q: Why do young children need to be assisted or supervised with tooth brushing?

Young children tend to swallow toothpaste when they are brushing, which may increase their total exposure to fluoride and contribute to dental fluorosis. An adult needs to ensure that an appropriate amount of toothpaste is used, that the child spits out the toothpaste rather than swallows it and that the teeth are cleaned effectively.

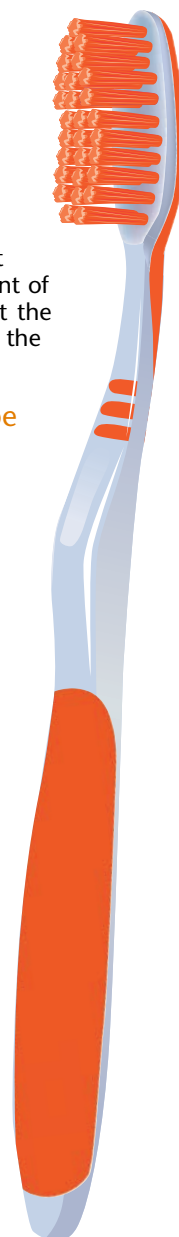
Q: What is fluorosis? Should I be concerned?

Fluoride intake from water and other sources, such as toothpaste and mouth rinses, during the ages when teeth are forming, may result in changes in the appearance of the tooth's surface. This is called dental fluorosis. In most cases, it is mild and appears as very faint white spots. It is usually detectable only by a dental expert during an exam. Most fluorosis does not affect the function or health of the teeth. In fact, teeth with mild fluorosis are more resistant to cavities.

Q: Is it safe to mix infant formula with fluoridated water?

According to the American Dental Association, it is safe to mix infant formula with fluoridated water. [yoh](#)

Sources: Ontario Dental Association's *Promoting Better Health in Your Community: The Essential Benefits of Water Fluoridation*; Canadian Dental Association's "Fluoride FAQs" (website); Health Canada; American Academy of Pediatrics' Campaign for Dental Health (website).



Fluoride Facts

What Do the Experts Say?

The use of fluoride for the prevention of dental cavities is endorsed by more than 90 national and international organizations, including:

Ontario Dental Association

"Community water fluoridation is a safe and effective means of preventing dental decay. Our position is based on the overwhelming scientific evidence available and is driven by our dedication to the provision of exemplary oral health care to our patients and communities."

Canadian Dental Association

"The Canadian Dental Association supports fluoridation of municipal drinking water (at minimum levels required for efficacy as recommended by the Federal-Provincial-Territorial Committee on Drinking Water) as a safe, effective and economical means of preventing dental caries in all age groups."

Ontario Association of Public Health Dentistry

"The Ontario Association of Public Health Dentistry supports the fluoridation of municipal drinking water. It recommends water fluoridation as a safe, effective and economical public health measure to prevent dental caries in all age groups."

Health Canada

"Many studies have shown that fluoridated drinking water is a safe, effective and cost-effective public health measure which significantly reduces the number of cavities in children's teeth."

American Dental Association

"The American Dental Association unreservedly endorses the fluoridation of community water supplies as safe, effective and necessary in preventing tooth decay."

U.S. Surgeon General

"Community water fluoridation is one of the most practical, cost-effective, equitable and safe measures communities can take to prevent tooth decay and improve oral health."

Centers for Disease Control and Prevention

"Because of its contribution to the dramatic decline in tooth decay in the United States since the 1960s, the Centers for Disease Control and Prevention named community water fluoridation one of 10 great public health achievements of the 20th century."

World Health Organization

"Dental cavities can be prevented by maintaining a constant low level of fluoride in the oral cavity. Fluoride can be obtained from fluoridated drinking water, salt, milk and toothpaste, as well as from professionally applied fluoride or mouth rinse. Long-term exposure to an optimal level of fluoride results in fewer dental cavities in both children and adults."

Sealants or Varnishes: What's the Difference?

By Dr. Sanjukta Mohanta

Dental sealants

Dental sealants are thin plastic coatings bonded on the chewing surfaces and grooves of back teeth by dental professionals. They are clear or white preventive agents that cover the pits and grooves of teeth to keep away bacteria and food, and can be applied to primary or permanent teeth.

Q: What are the benefits?

Dental sealants prevent decay on the chewing surfaces and grooves of teeth, which are the most common areas for children and youth to get decay. The application of sealants is a cost-effective and easy way to protect these chewing surfaces against decay. Sealants will last for a number of years. Some sealants also contain fluoride, which further prevents decay.

Q: Why are they applied?

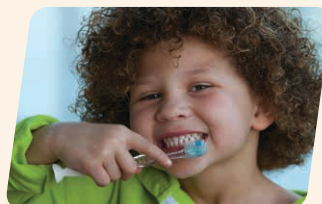
Deep grooves on teeth are at risk for decay due to the trapping of bacteria and food. Dental sealants do not cover all of the surfaces of teeth and are not suitable for all teeth; therefore, other preventive methods must be used to prevent dental decay. They are part of a preventive oral health strategy that includes: fluoride varnishes, fluoridated tap water and toothpaste, daily home care, a healthy diet and regular dental visits.

Fluoride varnishes

Fluoride varnishes are highly concentrated forms of topical fluoride applied by dental professionals. They are tooth-coloured preventive agents painted with a small brush on tooth surfaces after the teeth are cleaned and dried. The varnish quickly hardens and releases fluoride gradually over months.

Q: What are the benefits?

Fluoride varnishes are cost-effective, painless and easy to apply. They can be used on patients of all ages. Children find the use of fluoride varnish easier than trays with fluoride foam or gel due to reduced gagging, with less fluoride swallowed.



Q: Why are they applied?

Fluoride is a mineral that strengthens enamel and thus reduces tooth decay. Fluoride varnish also decreases tooth sensitivity.

Dr. Sanjukta Mohanta is a dentist who works at a community health centre in Brampton.

Great Gums!

By Cheryl Embrett

How to keep them looking
good — and healthy — at every age



I've had on-and-off gum problems since my thirties. It's not something I like to admit, since poor oral hygiene is usually to blame. However, in my defence, genetics played a role, too. It never occurred to me that my daughter, 15, would end up with the same problem. I was always so diligent about her brushing and flossing from the time that first little tooth appeared. But then came the teen years and braces, and her dental regimen became less, well, regimented. The result was gingivitis, a milder form of gum disease that causes red, swollen, sensitive gums that have a tendency to bleed. Not a pretty picture.

Most people consider gum disease a problem that only affects adults as they age, says Dr. Lesli Hapak, a periodontist in Windsor. And while it's true that periodontal disease does increase markedly with age, children, teens and young adults are also susceptible. "Left untreated, it can cause damage to the gums and bone supporting the teeth and, ultimately, lead to tooth loss," says Dr. Hapak.

The early years

Several factors can lead to early gingivitis in children. As kids begin losing their primary (baby) teeth, and their permanent (adult) teeth start making an appearance, their gums may become more sensitive, making brushing and flossing uncomfortable and something to avoid. Next up: the tween/teen years and orthodontics. "Braces provide a surface for plaque to build up on and can make it more difficult to manoeuvre around the 'hardware' to clean teeth properly," says Dr. Hapak. "The result is puffy, red and sensitive gums." Oral piercings, a popular trend with teens, can also increase the risk of localized gingivitis since lip and tongue piercings tend to retain plaque. And as young girls reach puberty, increasing levels of progesterone and estrogen can cause increased blood circulation to the gums, making them more sensitive to irritants such as plaque and food particles, which can result in gingivitis.

Signs of gum disease

It's important to establish good oral health habits in your children from an early age, says Dr. Hapak. We all know the routine: regular brushing and flossing, and dental visits (checkups, periodontal evaluation and cleanings). The American Academy of Periodontology recommends checking your child's mouth often for the following signs of gum disease:

- Bleeding gums — with brushing and flossing or any other time;
- Puffiness — swollen and bright red gums;
- Recession — gums that move away from the teeth, sometimes exposing the roots; and
- Bad breath — that doesn't go away with proper brushing and flossing.

His and hers: gum disease affects men and women differently

According to the American Academy of Periodontology (AAP)¹, a study in the *Journal of Periodontology* found that women are almost twice as likely to have received a regular dental checkup in the last year, have a better understanding of oral health and have a more positive attitude toward dental visits. That may explain why gum disease is more prevalent in men and, as a result, why men lose more teeth on average than women.

Hers

Hormonal fluctuations throughout a woman's life affect her oral and overall health. Some women may experience menstruation gingivitis, which typically occurs right before a woman has her period and clears up once her period has started.

Pregnancy is another cause of hormonal fluctuations and makes some women more susceptible to gingivitis and pregnancy gingivitis. Starting around the second or third month, pregnant women may notice their gums becoming red, swollen and tender, and that their gums bleed more frequently with brushing and flossing. Women should continue to maintain good oral health and have dental checkups and cleanings throughout pregnancy, advises Dr. Hapak.

There is also mounting evidence that periodontal health may affect pregnancy and the health of mother and baby. According to the AAP, women with periodontal disease during pregnancy may be twice as likely to develop pre-eclampsia (a condition characterized by high blood pressure and the presence of protein in the urine), which can put mother and baby at risk for severe complications.² And mothers with periodontal disease may be at seven times greater risk for having a premature or low birth weight baby, according to the Canadian Academy of Periodontology.³

His

The AAP says gum disease in men may be connected to a number of other serious health issues, including heart disease, certain cancers, prostate health and impotence. Gum disease is caused by chronic inflammation in the mouth, and it's the presence of inflammation in all these conditions that lead researchers to believe this is the link between gum disease and other systemic diseases, says Dr. Hapak.

Seniors and gum disease

Despite the fact that many seniors are keeping their teeth for a lifetime, the elderly still have the highest incidence of gum disease. According to the AAP, at least half of adults

over the age of 55 have some form of periodontal disease, and almost one in four seniors over the age of 65 is missing all of his or her teeth.⁴

As we age, our bodies become less resilient to stressors such as medication (and seniors are often on one or more medications) and hormonal fluctuations, says Dr. Hapak. "When our body is less efficient at controlling the effects of inflammation, there can be a significant destruction of the gums and bone." Conditions and diseases such as rheumatoid arthritis, kidney disease, Alzheimer's, cancer and diabetes, which are seen more frequently in the elderly and are all associated with inflammation, may also be linked to gum disease.

Keeping gums healthy

The good news is that gum disease can be successfully treated and easily prevented. Dr. Hapak has this advice to keep gums — and smiles — healthy at every age and stage.

Minimize the risk

It's no surprise that brushing and flossing your teeth regularly continue to be the most important factors in keeping your gums healthy. Dr. Hapak also recommends these six measures to help lower the risk of periodontal disease and help achieve optimal oral health for both men and women, regardless of age:

- * Maintain a healthy body weight.
- * Exercise regularly.
- * Stop tobacco use.
- * Minimize alcohol consumption.
- * Eat a healthy diet with foods rich in omega-3 fatty acids (cold-water fish and walnuts, for example), probiotics (found in certain yogurts) and antioxidants (green tea, for example).
- * Reduce stress. Chronic stress increases the level of the hormone cortisol, which researchers have found is associated with gum disease.

Early detection of risk factors can help us predict the likelihood of developing periodontal disease and give us a jump-start on preventative treatment. It may be as simple as adjusting oral hygiene habits as the gums recede and the spaces between the teeth become more open and harder to keep clean. Check in with your dentist or periodontist to see what works best for you. [voh](#)

Endnotes:

1. American Academy of Periodontology, "Patient Page: Periodontal Health and the Battle of the Sexes." Website: www1.umn.edu/perio/periocasepresent/text/AAP_Gender.pdf
2. American Academy of Periodontology, "Patient Page: Pregnancy and Periodontal Disease." Website: periodontalspecialists.com/cms/wp-content/uploads/2013/03/Pregnancy-and-Perio.pdf
3. Canadian Academy of Periodontology, "Periodontal Disease and Your Health." Website: cap-acp.ca/en/public/perio_health.html
4. American Academy of Periodontology, "Patient Page: A Lifetime of Healthy Teeth and Gums." Website: periodontalspecialists.com/cms/wp-content/uploads/2013/03/Perio-for-Older-Adults.pdf

A Day in the Life

By Jennifer D. Foster

Meet Dr. Sanjukta Mohanta, a dentist working to improve the oral health of her patients and the community



PHOTO: Trune Viet Tran

Dr. Sanjukta Mohanta and a happy patient.



Dr. Sanjukta Mohanta has been a dentist working in public health for nine years. She graduated from the University of Toronto's Faculty of Dentistry in 1999 and currently works at a community health centre in Brampton. In this insightful interview, Dr. Mohanta shares her experiences of working in public health dentistry, including the daily triumphs and challenges of this rewarding career in the oral health profession.

Q: You are a general dentist who works in a public health clinic. Can you describe your typical day? And how would your day be different if you were in a private dental practice?

Dr. Mohanta: A typical day consists of fillings, examinations, extractions and preventive treatments for my patients, who are children and youth 17 years old and under. I do oral health education with all of my patients each day. I speak with the parents to understand their barriers to optimal oral health, and I devise a home-care and nutrition plan for the patient that can be supported by the parents. My patients may be at a higher risk for cavities, so I spend considerable time discussing preventive treatments, such as sealants, fluoride varnish and oral health education, with them.

Q: Why did you choose to work in a government-run dental clinic?

Dr. Mohanta: My interest in working in public health started in dental school, when we rotated through public health clinics during our pediatric training. I found these patients needed the most help and were the most receptive to education. Working in a government-run clinic allows me to focus on improving the oral health of my patients and the community.

Q: Can you describe the patients you treat in the clinic?

Dr. Mohanta: My patients are on publicly funded oral health programs. Our clinic encourages parents to bring babies for their first dental visit and receive education to prevent early childhood caries. The Canadian Dental Association encourages a dental assessment of infants within six months of the eruption of the first tooth and no later than 12 months of age. My patients are diverse in social demographics, with many being immigrants. I am often the first dentist they have seen. Most of them require many dental appointments, where several teeth in one section of the mouth are treated per appointment. I determine their risk factors and provide oral health education. I follow up on their home care and diet at each appointment to help them reach their oral health goals. Most of them have no cavities at their recall appointments, which is very rewarding.

Q: Do you have an interesting/memorable case that you could share with us?

Dr. Mohanta: One of my patients, who was 12 years old and a recent immigrant, had extensive dental problems, as well as dental anxiety. She couldn't speak English, and her mother had limited English. It was difficult to explain treat-

ment to them and get consent. I had to phone her father, who spoke the best English in the family, and he translated to them by phone. The patient thought I was going to take her teeth out and was so fearful she would not sit in the chair. My assistant and I spent a lot of time with the family, reassuring them and getting them to trust us. After several appointments, her anxiety decreased and her oral hygiene increased. We completed the treatment plan without her needing sedation, and she returned to our office recently for her recall exam. She smiled when she saw me and was able to speak to me in English. She was relaxed, settled and happy. She beamed when I told her she had no cavities.

Q: What is the best part of your job? The most difficult?

Dr. Mohanta: The best part of my job is to see a decrease in the decay rate and dental anxiety level of a child at a recall visit. It is rewarding to see patients improve their responsibility for oral health, as this will help keep their smiles healthy for a lifetime. The most difficult part is managing a child's dental anxiety. Most of my patients are very co-operative, as they see that our dental team is trying to help them.

Q: Does your work ever take you outside of the clinic, into other venues?

Dr. Mohanta: I have delivered oral health education outside the clinic for families in community programs and for men living at a shelter. I also do advocacy to improve oral health for the community by talking to our political leaders.

Q: The Ontario government recently made changes to one of its access-to-care dental programs, now called Healthy Smiles Ontario. Can you tell us a bit about this program?

Dr. Mohanta: It is a government-funded oral health program that provides free preventive, routine and emergency dental services to children and youth 17 years old and under who live in Ontario and are from low-income households. It combined the six previous oral health programs for children and youth into one program. [yoh](http://yoh.on.ca)

Parents and caregivers can get more information and apply to the Healthy Smiles Ontario program online at ontario.ca/page/get-dental-care.

All the Juicy Details

By Catherine Solmes

Is juicing as good for you as its fans claim?

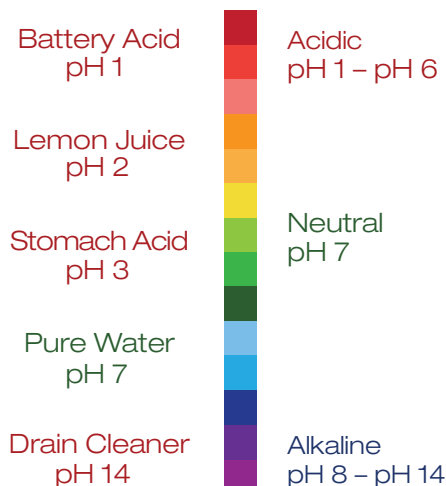


It's no secret that consuming fresh fruits and vegetables is part of a healthy, balanced diet. Yet many of us often find it challenging to get our daily intake. Juicing, the process of extracting the juice from fruits and vegetables, has become popular because it makes consuming multiple fruits and vegetables ultra-convenient. Some juicing proponents claim the liquid form allows the body to more readily absorb the antioxidants and nutrients. And juicing has gained a reputation for being a cure-all for what ails you, with juice cleanses, home juicers and juice bars popping up all over. But just how healthy is drinking juice made from fresh fruits and vegetables? And what about lemon water?

According to Toronto-based registered dietitian Julia Stanislavskaja, consuming fresh juice with an at-home juicer or purchasing cold-pressed juices to drink on the go can really benefit people who normally struggle to eat vegetables and fruit. However, she stresses, the ideal way to benefit from their nutrients is by eating them, not drinking them. Juicing in moderation is fine, she says, but if juice is consumed in place of a meal, and this is happening more than two or three times a week, there may be some unwanted health implications. Why? When we drink juice, even juice made from fresh, healthy ingredients, we're essentially consuming liquid sugar, which is quickly



pH Scale



ingested by the body. “Liquid travels and is absorbed by the [digestive] tract much faster than nutrients from solid foods. This means a faster uptake of sugar into the blood stream, and that is usually not a good thing as it leads to more insulin production,” says Stanislavskaja.

Juicing and oral health

Frequently replacing meals with juice can also be damaging to your oral health. Scarborough dentist Dr. Stephen Abrams warns that consuming juice “creates a very acidic oral environment, and if it is the only nutrient at a meal, it takes a long time for the saliva to return to neutral pH.” When the pH of saliva drops below 5.5, enamel begins to erode or dissolve away, making it more susceptible to damage from eating hard or abrasive foods or from simply brushing your teeth, he says.

Drinking lemon water

Many people drink lemon water (warm water with the juice of a fresh lemon squeezed into it) first thing in the morning, a habit, like juicing, that claims to do everything from clear your skin to boost your immune system to help you lose weight. If squeezing a fresh lemon into a glass of water is perceived to be a cure for so many things, and it’s less time-consuming and more affordable than juicing, no wonder people are doing it. However, any health benefits are purely anecdotal, and few, if any, recent scientific studies suggest that drinking lemon water is as beneficial as the claims.

Both Dr. Abrams and Stanislavskaja say they haven’t found any clinical studies that show drinking lemon water helps with weight management, boosts your metabolism or your immune system or improves your overall health. What studies do show is that drinking water can increase your feeling of satiety, which may help with weight management, but no studies show that the addition of lemon juice has any impact.

Lemon water and oral health

As with juicing, drinking lemon water is all about moderation, and it’s important to seek the advice of health professionals. Dr. Abrams says that he has patients who have caused significant damage to their teeth with this habit. Lemon juice is acidic and contains sugar, so it makes the mouth acidic, lowering the pH level in the mouth and softening enamel, making teeth more susceptible to damage. If you choose to drink lemon water, Dr. Abrams recommends using a straw to reduce your teeth’s exposure to the acid; rinsing your mouth with plain water afterward

to remove any lingering acid; and refraining from brushing your teeth right away. “Tooth-brushing should be avoided for at least one hour after consuming lemon water. This will allow the tooth surface to reharden and be able to resist the abrasion or wear from the toothbrush.”

Lemon water and GERD

Consuming lemon water can intensify the symptoms of gastroesophageal reflux disease (GERD), and that can have a negative impact on both your oral and overall health. With GERD, stomach acid can flow up into the esophagus and reach the back of the throat or the mouth, creating a very acidic environment and softening or demineralizing the tooth enamel. “Over time, these tooth surfaces will lose their lustre or their entire enamel covering. These teeth can become sensitive to temperature changes or exposure to sweet foods and juices because of the loss of the protective enamel coat,” stresses Dr. Abrams. He says that typically this affects the inside surfaces of the upper front teeth and/or the biting surfaces of the lower teeth. “These are very difficult situations to treat conservatively,” he warns.

What is GERD?

Gastroesophageal reflux disease (GERD) is a digestive disorder that affects the lower esophageal sphincter (LES), which opens to allow food to pass into the stomach and closes to prevent food and acidic stomach juice from flowing back into the esophagus. Gastroesophageal reflux occurs when the LES is weak or relaxes inappropriately, allowing stomach acid to flow up into the esophagus. Symptoms include heartburn, acid reflux, chest pain, sore throat, difficulty swallowing and a dry cough.

The juicy bottom line

If you decide to jump on the juicing bandwagon, it’s important to check with your dentist, doctor, registered dietitian and other licensed health-care practitioners first regarding any possible detrimental (oral) health implications and side-effects. And remember that everything in moderation is the key — including juicing and lemon water. [yoh](#)

Making Time for Good Oral Health

By Bonnie Dean



Now that you've rolled your clocks ahead by an hour for daylight saving time and spring is in full swing, the Ontario Dental Association (ODA) suggests using this time as a reminder to see your dentist for a thorough oral cleaning and examination, and to revisit your oral health-care routine.

Your dentist looks for more than just tooth decay during an oral examination; a dental exam can indicate how healthy your gums are and can reveal signs of oral cancer and

other dental conditions. "Dental diseases don't often show symptoms until they've progressed," says Dr. Victor Kutcher, President of the ODA. Don't wait until you're suffering from pain or swelling. A dental exam can identify and diagnose problems before they become more serious."

When detected and treated at an early stage, most dental diseases are easier to treat and cost less time and money.

Making time

Rejuvenate your oral health-care routine:

Spring-clean your mouth every day. Floss and brush your teeth, gums and tongue daily. If you don't clean your mouth, any remaining food particles will attract bacteria, which cause bad breath and contribute to tooth decay. Get a new toothbrush every three to four months, when it becomes worn or after an illness. Rinse your toothbrush and store it upright to air-dry, preventing bacteria from accumulating on the bristles.

"Don't wait until you're suffering from pain or swelling. A dental exam can identify and diagnose problems before they become more serious."

— Dr. Victor Kutcher

Ditch the cigarettes. People who smoke are three times more likely to have severe periodontal (gum) disease — a leading cause of tooth loss — than non-smokers. Smoking may be responsible for almost 75 percent of periodontal diseases among adults. Tobacco is also a known risk factor for oral cancer. All other forms of tobacco, including cigars, pipes and rolled tobacco, are just as harmful to your health. Talk to your dentist about your options for quitting.

Skip the sugar. When you consume sugary foods and drinks throughout the day, your mouth is at an increased risk to develop tooth decay. Maintain healthy and strong teeth by eating a balanced diet rich in calcium, phosphorous and vitamins A, C and D — whole-grain breads and cereals, fruits and vegetables, and lean meats — and cut down on your refined sugar intake.

Cut down on the cocktails. Heavy alcohol consumption is one of the main risks of oral cancer, according to the Canadian Cancer Society. In fact, smoking and drinking alcohol together increase the risk of developing head and neck cancers more than using either one alone.

Drink more water. The combination of sweetness and acidity in sodas, fruit juices, and sports and energy drinks can lead to tooth decay and dental erosion. Make water your drink of choice. It keeps you hydrated, helps wash away any food particles from your teeth and it's free!

Beware the rays. Prolonged exposure to the sun can increase your risk of cancers, specifically to the lips and mouth. As the days get longer, regularly coat your lips with balms that contain protection against UVA and UVB rays.

Making the switch. "You don't have to wait until spring to see your dentist, but if you need a reminder, the switch to daylight saving time is a good event to use," says Dr. Kutcher. "Make this your new mantra: spring forward... into the dental chair!" [yon](#)

Visit youroralhealth.ca
for more information.



Health-food Imposters

By Cheryl Embrett

These foods may look and sound good for you (and your teeth) — but appearances can be deceiving



Cereal bars with fruit fillings, pre-made smoothies and baked snack crackers made with real cheddar certainly seem like nutritious, tooth-friendly snacks. But sticky, sugary and acidic foods can be hard on your teeth — and your waistline. These foods fuel bacteria in the mouth that are responsible for tooth decay, says Toronto dentist Dr. Abinaash Kaur.

We did a little sleuthing and quickly uncovered seven dental-damaging snacks parading as “healthy,” then asked our experts — Dr. Kaur, who has a family practice, and Leslie Beck, a registered dietitian — for smarter swaps.

Fruit juice

A fruit juice box in Junior’s lunch bag may seem healthier than a can of pop, but keep in mind that many packaged fruit juices are just as high in sugar and lacking fibre. “We should be treating fruit juice like an added sugar,” says Toronto-based Beck.

While sugar is the biggest offender when it comes to tooth decay, you also have to be careful about the acidic content of fruit juice, cautions Dr. Kaur, the mother of two boys, aged six and eight years. “If it’s consumed on a regular basis, it can cause erosion of tooth enamel. Acid erosion is

a common problem we see these days and can lead to loss of enamel at a rapid rate. This, combined with a diet high in sugars, can accelerate tooth decay."

Smart swap: Stick with plain H₂O and add some fresh fruit to the water to flavour it naturally.

Cereal/granola/energy bars

They're touted as portable pick-me-ups, but not all bars are created equal, and some are the nutritional equivalent of a candy bar. A brand of apple-cinnamon cereal bars we found contains 13 grams of sugar and 130 calories in one bar (37 g). That's more than three teaspoons of sugar in a single cereal bar! There may be pictures of real apples on the box, but those so-called fruit fillings can be "pure sugar," says Beck.

Smart swap: A handful of nuts, such as raw almonds, or a piece of fresh fruit are healthier options. "Making your own bars is a great idea, too," says Dr. Kaur. "You can control the amount of sugar that goes in and substitute simple carbohydrates (refined white flour) with whole-grain flours."

Fruit-flavoured yogurt

While yogurt is considered good for you, the fruit-flavoured varieties may contain more than 18 grams of sugar in a small serving.

Smart swap: "Buy plain yogurt and mix it with fresh fruit and berries," advises Beck. "I always add a teaspoon of unsweetened coconut for extra flavour."



Instant oatmeal

Oatmeal is a great whole-grain energy source if you avoid the instant varieties that are low in fibre and protein, as well as the ones that have added sugar and salt. One packet (43 g) of a well-known brand of maple and brown sugar-flavoured oatmeal, for example, has 160 calories and 12 grams of sugar.

Smart swap: Choose an instant oatmeal with no added sugar and no added salt. Or make a batch of your own and flavour it with fresh fruit and toasted nuts.

Pre-made smoothies

Depending on the brand, these can be either a nutritional powerhouse or a high-calorie, high-sugar treat. One brand we spotted on supermarket shelves has 200 calories and 36 grams of sugar in a 325 mL bottle — that's nine teaspoons of sugar!

Smart swap: Consider making your own smoothies at home, where you'll have complete control over what goes into them.



Baked snack crackers

Sure, they're baked instead of fried and lower in calories than potato chips, but they can still hurt your diet — and your teeth, especially if you snack often during the day. "Bacteria in your mouth ferment the highly processed starches in these types of snacks and create acids, which can damage your tooth enamel," says Beck. And those seemingly harmless little snack crackers become sticky as you chew, adds Dr. Kaur. "Snacks that are gummy, sticky and gooey (no matter how healthy they sound), tend to stick in the pits and grooves of the teeth, where they remain for hours, and bacteria can feast on these sugars for extended periods of time."

Smart swap: Try rice cakes instead. "They have a very low sugar content and don't get caught in your teeth like crackers," says Dr. Kaur. Or satisfy your craving for something salty or crunchy with some raw veggies dipped in hummus.

Fruit snacks

Dried fruit snacks and fruit leathers sound innocent enough — they're fruit, after all. Or are they? A little pouch (25 g) of fruit snacks we checked contains 80 calories and nine grams of sugar. "The first ingredient is a fruit puree, which is basically a form of sugar, the second is corn syrup, the third is sugar," says Beck. "And there's no vitamin A or C listed. If there was any fruit in the product, you'd see a little of these."

Smart swap: Enjoy a real apple, orange, pear or other piece of fresh fruit. [yoh](#)

Do your homework

Look past the healthy-sounding words and healthy-looking pictures on the packaging, advises Toronto-based registered dietitian Leslie Beck. The Nutrition Facts box on pre-packaged food discloses the grams of sugar contained in one serving of food, for example. Then it's up to you to do the math. Four grams of sugar equals one teaspoon of sugar. Check the ingredient list, too. You might be surprised to see multiple sources of added sugars.

Recipe

Toasted Almond and Coconut Oat Squares

These squares have a delicious nutty flavour and make a perfect mid-afternoon snack. You can use other grains in place of oatmeal, including spelt flakes and rye flakes. These squares also double as a quick grab-and-go breakfast when you're short on time.

- 2 cups (500 ml) quick cooking oats
- 1 cup (250 ml) sliced almonds
- ½ cup (75 ml) shredded unsweetened coconut
- ½ cup (125 ml) all-purpose flour
- ½ cup (125 ml) whole-wheat flour
- 2 tsp (10 ml) cinnamon
- ¼ tsp (1 ml) nutmeg
- ½ tsp (2 ml) baking soda
- ½ tsp (2 ml) baking powder
- ¼ tsp (1 ml) salt
- ¾ cup (175 ml) sweetened applesauce
- ¾ cup (75 ml) honey
- ¼ cup (50 ml) canola oil
- 2 egg whites
- 1 tsp (5 ml) vanilla extract

Preheat oven to 350°F (180°C).

Lightly grease and flour a 9 x 9 metal cake pan.

Combine oats, almonds and coconut on a large baking sheet. Place in oven and toast for 5 to 7 minutes. Remove from heat and place in large mixing bowl to cool.

In a separate bowl, whisk together applesauce, honey, canola oil, egg whites and vanilla.

When oat mixture is cool, add all-purpose and whole-wheat flour, cinnamon, nutmeg, baking soda, baking powder and salt; stir to combine.

Add applesauce and honey mixture to flour and toasted oat mixture; stir to combine.

Empty batter into the prepared cake pan, and bake for 22 to 25 minutes, or until squares begin to brown and a knife inserted in the centre comes out clean.

Serves 16. Per serving: 179 cal, 5 g pro, 8 g total fat (2 g saturated fat), 23 g carb, 3 g fibre, 0 mg chol, 95 mg sodium

From: Leslie Beck's Healthy Kitchen © Leslie Beck, 2012. Reprinted by permission from Penguin Group (Canada), a division of Pearson.



Are some sugars better than others?

Naturally occurring sugars in fruits, vegetables and dairy products are, in general, nutritionally and dentally superior than sweetened foods, candy, cookies, pop, etc. "However, to bacteria, it's all the same — sugar is sugar, whether it's refined or naturally sourced," says Toronto dentist Dr. Abinaash Kaur. "The focus should be on a well-balanced diet low in sugar and starches." The best snacks, she says, are fruits, vegetables and dairy products like milk, plain yogurt and cheese. "These do contain natural sugars (especially fruits) that can be broken down by bacteria in the mouth; therefore, they should be consumed in moderation," says Dr. Kaur. "It's best to eat them with meals because salivary flow increases during this time and helps to wash away some of the sugars." She says that eating cheese after a meal can help neutralize acids and adds that drinking water after meals, chewing gum with xylitol (like Pur or Xyla) or rinsing out your mouth with water are good practices.

More smart swaps

Nuts and seeds: These are nutritious and provide good fats and protein necessary for overall growth, says Toronto dentist Dr. Abinaash Kaur.

Dark chocolate: Look for at least 70 percent cocoa content and less than six to eight grams of sugar per serving. "There's some research that has shown that dark chocolate contains compounds that can help fight cavities," says Dr. Kaur.

Cheese: It contains calcium, which we need for healthy teeth, and it helps neutralize acids in the mouth, as well as stimulate saliva production.

It's **time** to measure **your success!**



Sources: Health Canada, Canadian Cancer Society

Did you know? Former smokers live longer than those who continue to smoke.

You will notice:

- Cleaner, fresher breath
- Fewer colds, coughs and breathing difficulties
- Your hair and clothes don't smell of smoke
- The stains on your fingers will slowly disappear
- Less staining on your teeth
- More money in your pocket

You will experience:

- More energy
- Less gum recession and disease
- Fewer incidences of chronic sore mouth and throat
- Fewer hacking coughs and chest infections
- Less accumulation of tartar and plaque

Be a quitter.

Talk to your dentist about your options.

Visit www.youroralhealth.ca for more information.



Oral Cancer 101

The eyes may be the windows to the soul, but the mouth has long been recognized as a mirror reflecting the body's health. Here's what you need to know to steer clear of oral cancer.



The Canadian Cancer Society estimated that 4,400 new cases of oral cancer would be diagnosed in Canada in 2015. It also estimated that 1,200 of those diagnosed in 2015 would die from the disease.

According to Health Canada, new oral cancer cases and deaths are relatively low in number compared to prostate, breast and colorectal cancer, but are almost three times higher than for cervical cancer and almost double than that of liver cancer. However, oral cancer can be successfully treated if caught at an early stage.

Your dentist can play an important role in the early detection of oral cancer. Dentistry is about prevention, and the dental exam is the foundation of good oral health. A dentist may notice subtle changes in the mouth that a patient may not.

The oral cancer examination performed by your dentist during a routine dental exam is fast, easy and painless — and it could save your life.

Book your dental exam today!

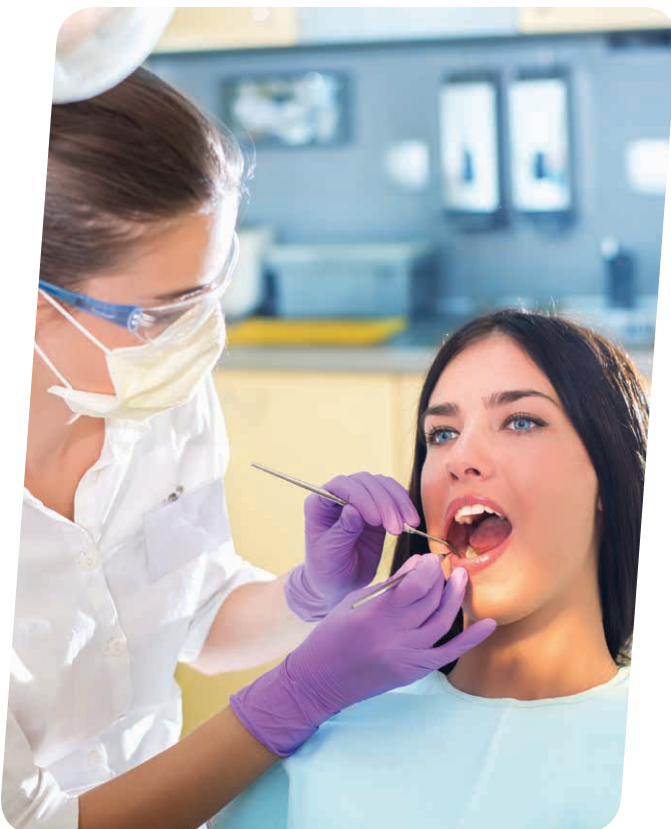
What is oral cancer?

Oral cancer refers to all cancers of the oral cavity, which includes the following:

- lips
- tongue
- teeth
- gums (gingiva)
- lining inside the lips and cheeks (labial mucosa and buccal mucosa)
- floor of the mouth
- roof of the mouth (palate)
- the area behind the wisdom teeth
- salivary gland
- tonsils
- back of the throat

Most oral cancers are located on the sides of the tongue, the floor of the mouth and the lips.

Oral cancer starts in the cells of the mouth. Normally these cells are quite resistant to damage, but repeated injury from smoking, alcohol or even friction may cause sores or painful areas where cancer can start.



Oral Cancer

Symptoms

Oral cancer symptoms include:

- an ulcer or sore on the lip or in the mouth that does not heal
- a lump or growth on the lip or in the mouth or throat, including the tongue
- a white or red patch on the gums, tongue or lining of the mouth
- unusual bleeding, pain or numbness in the mouth
- a sore throat that does not go away, or a feeling that something is caught in the throat
- difficulty or pain with chewing or swallowing
- swelling of the jaw that causes dentures to fit poorly or become uncomfortable
- a change in the voice and/or pain in the ear

Your dental exam

Your dentist does more than protect and care for your teeth, gums and smile — your dentist can also help keep you healthy.

As oral health experts, dentists are in a unique position to help in the early detection of many medical conditions, including cancer.

Dentists are trained in medicine, so they recognize the relationship between oral and overall health.

Most people see their dentist regularly, so your dentist is often the first health-care professional to have an opportunity to detect the many health conditions that affect your mouth. Many patients are not aware of the extent that a dental exam can play in disease prevention.

Through the dental exam, your dentist will see if there are any abnormalities or changes in your mouth that might be indications of health problems, such as oral cancer or diabetes. At each visit, your dentist will conduct a medical history review and ask you about your current health.

It's important to answer these questions carefully. What you say can help your dentist alert you to potential health concerns that may require further investigation, diagnosis or treatment by a physician.

Without an examination by a dentist, most early signs of oral cancer are difficult to detect. If you notice a mouth sore or anything out of the ordinary that does not go away or heal after a couple of weeks, discuss it with your dentist.

Known risk factors

- **Smoking and chewing tobacco** — particularly if combined with heavy alcohol consumption
- **Heavy alcohol consumption** — particularly if combined with smoking
- **Excessive sun exposure** — particularly to the lips
- **Age** — people over the age of 40 have a higher risk of developing oral cancer
- **Gender** — men are more susceptible than women to developing oral cancer. In the past, men had a 6:1 ratio of incidence of oral cancer compared to women. However, this ratio is narrowing and is now closer to 2:1.
- **HPV (human papillomavirus)** — infection with HPV-16 increases the risk of oral cancer, and infection with HPV-18 may also increase the risk

Did you know? A diet high in fruits and vegetables may help to lower your chances of oral cancer. Fruits and vegetables have a protective factor that is believed to reduce the risk for oral cancers.

Prevention

- See your dentist for a regular oral exam.
- Quitting (or reducing) your tobacco and alcohol use lowers your risk of developing oral cancer.
- When you are outside and exposed to the sun, use lip balm with UVA and UVB protection and wear a hat.
- If you are sexually active, the use of a condom will reduce your risk of HPV infection.
- Eat a healthy diet rich in fruits and vegetables.
- Brush and floss your teeth daily.

Regular visits to your dentist and maintaining a good oral health routine will give you lots to smile about! [yoh](#)

Sources:

- Canadian Cancer Society's "Oral Cavity Cancer Statistics" (website)
- Cancer Care Ontario (website)
- Health Canada's "Healthy Living — Oral Cancer" (website)

Quiz

Singing Toothbrushes and Soccer Scandals

By Catherine Solmes

Sink your teeth into these sports- and entertainment-related dental questions and test your knowledge in our quiz!

1. What is the name of the superstar soccer player who bit the shoulder of opposing player Giorgio Chiellini during the Uruguay-Italy 2014 FIFA World Cup match, leading to his being banned from all soccer-related activities for four months?

2. What 2009 blockbuster movie features a group of friends who go to Las Vegas for a bachelor party that gets out of control and, among other things, results in one of the characters, Stu, a dentist, removing his own tooth?

BONUS: Name the actor who plays Stu in the film, who is actually missing a tooth in real life.

3. True or false: Soda is worse for your teeth than sports drinks.

4. Which professional sport in North America has a Team Dentist Association? Hint: both Canada's women's team and men's team won gold medals in this sport at the 2014 Olympic Winter Games in Sochi, Russia.

5. This actor, who won an Oscar for his performance in *Leaving Las Vegas*, once had some of his teeth pulled to get into character for a role.

6. Which pop star, hailing from Stratford, has a line of singing toothbrushes for sale?

7. For which of the following sports and recreation activities should you wear a mouthguard?

- Soccer
- Wrestling
- Martial arts
- Basketball
- Hockey
- Skateboarding



5. Nicolas Cage. During the filming of the 1984 film *Birdy*, in which he played a Vietnam veteran, Cage had some of his teeth pulled in order to better understand and convey his character's pain.

6. Justin Bieber. Bieber's line of singing toothbrushes features his photo on the handle, and each toothbrush offers a two-minute version of two different songs while you brush.

7. All of them. You should wear a mouthguard if you're playing any sport where there's a strong chance for contact with other participants, such as during soccer, hockey, wrestling, martial arts, lacrosse, baseball and basketball, and even for recreational activities, such as skateboarding, where there's a chance for contact with hard surfaces.

4. Hockey. The National Hockey League Team Dentist Association is made up of dentists who work specifically with professional hockey players.

3. False. Both sports drinks and soda can cause damage to your teeth because of their sugar content and because they change the acidity level in your mouth. In moderation, drinking sports drinks and soda is fine, but fluoridated tap water is always the healthiest choice!

Bonus: Ed Helms, who is also known for his role as Andy Bernard on NBC's *The Office*. For the scene in which Stu pulls his own tooth, Helms consulted with his own dentist and simply had his implant removed for three months during filming.

2. *The Hangover*

1. Luis Suarez

Answers



Dental Word Scramble

Unscramble each of the words on the left side of this page, then copy the letters from the circled areas to find the secret word!

1. RHSBU

____()____

2. RLOMA

()_____

3. SIRNE

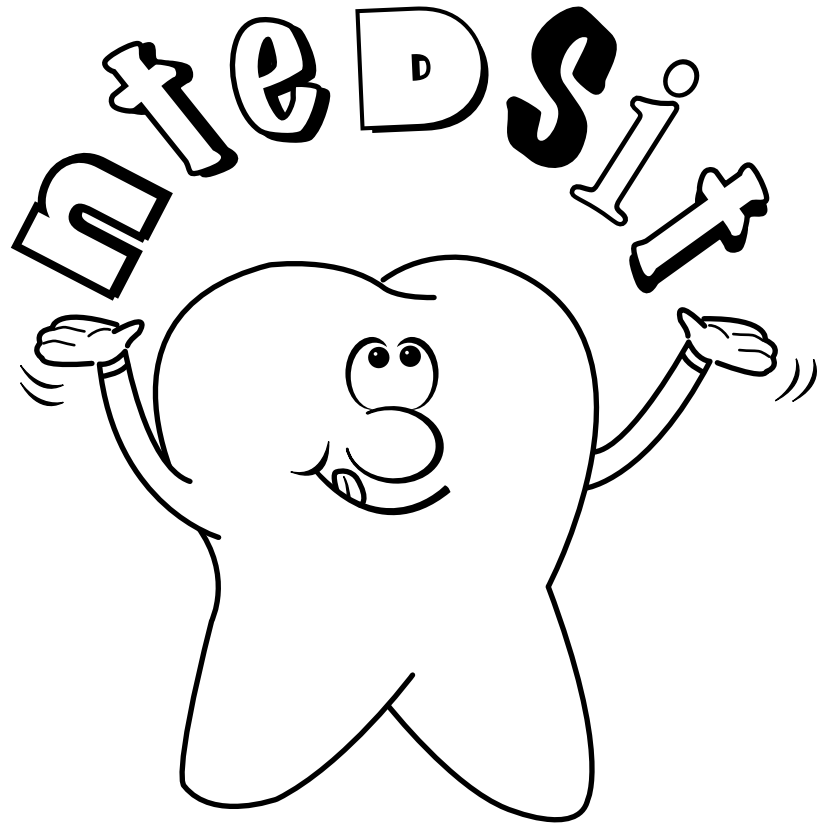
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4. SFOLS

____()____

5. OPTOATEHTS

_____()_____



Secret word

**Visiting the dentist
can make you**



Answers:

1. Brush
2. Molar
3. Rinse
4. Floss
5. Toothpaste

Secret word: Smile



MAKE YOUR TEETH A **BIG DEAL.**



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