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winter 2019

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Baby's First Visit to the Dentist



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REGULAR DENTAL APPOINTMENTS MAKE UP THE OTHER HALF.

Congratulations! You made it to the dentist. But then there's everyone else...people you love who haven't been to the dentist in far too long. Help them keep their teeth looking and feeling as good as yours!

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YOUR ORAL HEALTH.ca

Winter 2019

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MISSION OF THE ONTARIO DENTAL ASSOCIATION

We are committed to providing innovative, inspired leadership and delivering exceptional value by:

- promoting the highest standards of dental care and supporting our membership in its pursuit of successful, ethical practice; professional excellence; and personal fulfillment
- · advocating on behalf of ODA dentists
- promoting optimal oral health and sustainable and accessiblecare for all Ontarians
- fostering collaborative relationships that promote creativity, personal development and professional growth while celebrating achievements

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from Dr. Deborah Saunders, Editor-in-Chief

On October 17, 2018, the *Cannabis Act* came into force in Canada, putting in place a strict, new framework for controlling the possession, production, distribution and sale of cannabis in this country.

"And what might that have to do with MY oral health?" you may be wondering. Well, like smoking cigarettes, smoking (and/or ingesting) cannabis, whether for medical or recreational purposes, has a direct relationship with gum disease, staining, increased risk of dental decay and oral cancer. The effects of cannabis smoke and the compounds that damage the oral tissue and act as carcinogens are similar to those of tobacco. Also, patients may not realize that visiting their dentist while high on cannabis can result in anxiety, dysphoria (disorientation) and psychotic-like paranoiac thoughts. It is a complex topic. Patients need to let their dentists know that they are cannabis users, so that they can have an honest, informative discussion about the side-effects of this drug on their oral health. On page 12 of this issue, we feature an article called "Now that Cannabis Is Legal, Don't Let It All Go to Your Head... or Mouth," where we cover the downsides to smoking up on your oral health.

Our cover article "Baby's First Visit to the Dentist" is a must-read for soon-to-be or new parents/ guardians, as it details why including your family dentist in the list of health-care professionals is necessary for baby. This issue is also full of other timely, practical articles, including features on the effects of gluten on oral health, and the symptoms and causes of temporomandibular joint disorder (also known as TMD) and how your dentist can help. The recent trend of using apple cider vinegar is also covered in this Winter 2019 issue, as well as how to find the best toothpaste to meet the oral health-care needs of you and your family.

As with each issue of *YourOralHealth.ca Magazine*, *Brought to You by the ODA*, our articles contain professional advice and helpful oral health information supplied by our Ontario Dental Association (ODA) member dentists. And my sincere thanks go to the following dentists, who contributed and reviewed the oral health facts in every article: Dr. Shannon Hobbs, Dr. Allan Katchky and Dr. Elliott Schwartz, as well as our ODA President, Dr. David Stevenson; President-Elect, Dr. Kim Hansen, and Past-President, Dr. LouAnn Visconti. Without their knowledge, support and expertise, we would not be able to provide you — our patients — with this magazine.

The ODA represents more than 9,000 members — or nine out of 10 dentists in Ontario. With each issue of *YourOralHealth.ca Magazine*, we continue dentists' tradition of providing the public with current, trustworthy information on oral health.



We would like to hear from you! If you have ideas for future topics for this magazine, or you would like to comment on an article in this issue, please email us at yoh@oda.ca.

OUR CONTRIBUTORS



Lauren Atmore is a former intern with the Ontario Dental Association. She graduated with her Communications Diploma from Centennial College in Toronto, and does volunteer work with homeless youth, ensuring they get muchneeded dental services.



Maggie Blood is the Ontario Dental Association's Communications Specialist. She's had a lifelong love-hate relationship with popcorn, but came to the conclusion many years ago that floss is boss.



Michelle Outar works in government communications and is also a freelance writer. She tries to maintain positive dental hygiene to set a good example for her kids, and she's never had a cavity!



Donna Paris is a freelance writer and editor living in Toronto. She was an editor at *Canadian Living* for many years, and, because of her teeth, she considers her smile her best asset.



Catherine Solmes is the Ontario Dental Association's Communications, Public Affairs and Events Assistant. She lives in Toronto and is determined that her young niece and nephew learn to properly take care of their teeth.



Freelance writer **Heather White** has a nightly relationship with her night guard and believes that no one is ever too long in the tooth... except maybe a horse.

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

Baby's First Visit to the Dentist

By Lauren Atmore

Why including the family dentist in your list of health-care professionals is a must for your baby



The life of a baby is full of firsts, from their first smile to the first time they walk on their own. It's also a time of learning for parents, who are relying on professional advice as their baby moves through the

stages of development. According to the Ontario Dental Association, baby's first visit to the dentist should occur by the age of one year, or when the first teeth appear, ensuring their first teeth will be healthy as they continue through their milestones.¹

Why do babies need to see a dentist?

Some people may wonder why dentists recommend that babies have their first appointment when they're so young. More than half of a child's 20 baby teeth will have grown in by the time they're 18

months old, so seeing a dentist in the baby's first year is important.

"This first checkup is a preventive appointment," says Dr. Elliott A. Schwartz, a pediatric dentist with Toronto Children's Dentist, adding that this is where "prevention of future dental problems can be addressed."

Not only can a dentist help keep these first teeth safe and healthy, but early visits can also help children start learning what dental appointments are like, which may help them feel more comfortable in the dental chair as they get older.

Babies should start visiting the dentist to avoid major health issues

Dr. Schwartz says that putting off this first appointment until the child is three to five years old may lead to severe early caries syndrome. This condition, also known as nursing caries, baby bottle syndrome or baby tooth rot, describes severe cavities in a child's first teeth. Left

untreated, severe early cavities can cause pain, infection and may even damage the underlying adult tooth.²

Hospital outpatient dental surgery for early childhood cavities is the leading cause of day surgery for children between the ages of one and five years old, representing 31 per cent of all day surgery for children, according to the Canadian Institute for Health Information.³

Permanent teeth and preventive care

"Many parents have the misunderstanding that these are just baby teeth and they are going to be lost, so why worry about them," says Dr. Schwartz. But baby teeth play many important roles in a child's development.



How to Help Your Baby During Teething

It can be hard to see your baby frustrated and in pain as their first teeth come in. Here are a few tips to safely help your baby with teething⁸:

- Massage their gums with your clean finger or a clean, chilled wet cloth or give them a teething ring.
- Avoid giving them hard foods like raw carrots that could cause choking.
- Avoid giving them teething biscuits. Sugar will remain on the new teeth, leading to decay.

 Over-the-counter gels for teething should not be used, unless advised by a doctor.

dose of acetaminophen can be given for one day. Never give your child Aspirin.

 A child should rinse or drink water after taking any medication, as it is usually sweetened for taste.⁹ A child's back molars hold space for their adult molars to "come into the mouth in a straight, functional pattern," he says, all the while performing a lot of the child's chewing function. Our front teeth are instrumental in our pronunciation of words, and a child losing their baby incisors too early "could impair the child's ability to correctly pronounce 's,' 't' and 'v' sounds," warns Dr. Schwartz. He also mentions that a young child may become self-conscious or "reluctant to laugh or smile in public" from continually being asked, "What happened to your teeth?"

Extending past just oral health, the Canadian Dental Association (CDA) notes that "children with severe early childhood caries are more likely to be anemic, iron deficient and vitamin D deficient."

What parents should know about the first visit

The good news is that while early childhood cavities can be scary, a child's first visit doesn't have to be. "The dentist should not find any problems in your baby's mouth at this age," says Dr. Schwartz. The focus of a first visit will be on diet and feeding habits, teething and establishing a daily oral health routine, he says. And since the emphasis of a baby's first visit is prevention of oral health issues, no preparation is required on the part of

the parent.

The importance of fluoride

The CDÅ considers fluoridation essential to a child's oral health, stating that "community water fluoridation is an important investment for all age groups, particularly children." For children under three years of age with an increased risk of developing early childhood cavities, parents are recommended to "use a grain of rice-sized amount of fluoridated toothpaste to brush their child's teeth," while parents with children who are not at an increased risk can brush their child's teeth using a toothbrush moistened with water.

Nutrition is tied to overall oral health

Adults and children alike are susceptible to a host of oral health conditions that can stem from their diet and oral hygiene practices. According to Dr. Schwartz, "water and milk are appropriate drinks" for infants, while "juice should be avoided for as long as possible." The Alberta Dental Association & College says that "at night, only put water in the bottle."

Good oral health for life

Above all else, Dr. Schwartz emphasizes that it's never too late to start prioritizing your child's oral health. "Cavities are like rust: once started, there is nothing you can do to stop them, other than repair," he says. "Delay only increases the costs of repair and likely pain to your child."

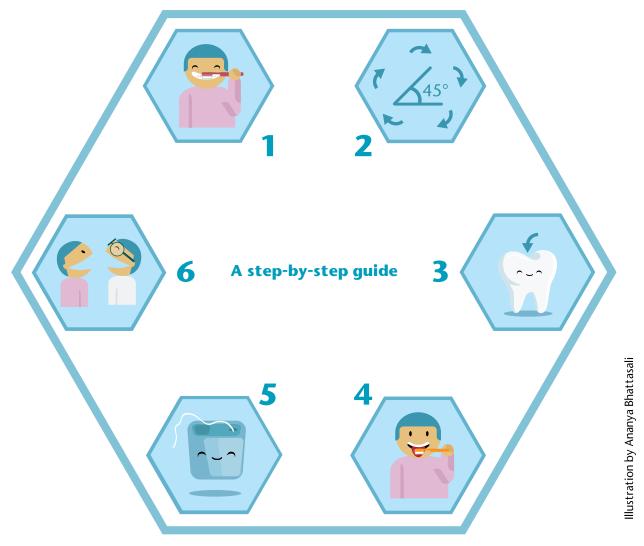
The preventive nature of a baby's first visit not only helps to keep oral health issues at bay, but also allows the child to grow up knowing that visiting the dentist is an important part of their overall health and well-being.



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Oral Health Care: Doing It Right!



- **1.** Brush your teeth properly at least twice a day for two to three minutes each time.
- 2. Hold your toothbrush at a 45-degree angle from your gums and brush gently in short, circular strokes from where the tooth and gum meet to the top of the tooth. Brush all outside and inside surfaces, and be sure to avoid hard scrubbing.
- **3.** Clean the pits and crevices on the chewing surface of your teeth with short, sweeping strokes.

- **4.** Brush your tongue to remove bacteria and freshen your breath. Replace your toothbrush every three months.
- **5.** Floss daily. It's more effective than brushing alone, as it helps to remove food debris and bacteria from places the toothbrush can't reach.
- **6.** Talk to your dentist about proper brushing and flossing techniques.

Toothpaste 101

By Donna Paris

The possibilities are endless when you're choosing a toothpaste. Gels and pastes, whitening, fluoride-free, good for sensitive teeth the list goes on. Here's what our experts have to say



Choosing a toothpaste today can be overwhelming. It's not just a squeeze tube of white paste that's available now. There's a plethora of options, including minty gels, dentifrice for sensitive teeth or whitening effects, fluoride-free or even gum-detoxifying toothpastes!

So, how do you decide which is best for your oral health? The best place to start is the dental office, by asking your dentist. "Finding a toothpaste depends on exactly what it is you are trying to achieve — your goal," say's Dr. Kim Hansen, ODA President-Elect, who maintains a dental practice in Prescott. "I go on a patient-by-patient basis as part of a checkup."

Let's take a look at why we brush to begin with. "For cleaning and removing plaque and food particles, the most important tools in the toolbox are the toothbrush and dental floss; the type of toothpaste is secondary," says Dr. David Stevenson, ODA President, who maintains a practice in Carleton Place. "Toothpastes do

contain detergents and foaming agents to help, but there is very little evidence to determine a difference between them all in effectiveness." Toothpaste manufacturers make many claims, he adds, "but as consumers, we need to consumers, we need to understand how effective a toothpaste is in actually achieving those claims."

But if the main reason to brush our teeth is to prevent cavities, then toothpaste does make a difference. For Dr. Stevenson, this part is a no-brainer. "You absolutely need a toothpaste with fluoride — period," he stresses.

And "fluoride has been proven to be the most effective at doing the job." Ingredients xylitol or triclosan help, he adds, "but they don't replace the benefits of fluoride, which are both immediate at the time of brushing and long-lasting in helping to repair the enamel." Toothpaste



manufacturers realize this, too, he adds. "In my experience, toothpastes, including natural products, will not make the claim of 'cavity fighting' or 'anti-cavity' unless they contain fluoride — kudos to them."

And sometimes, choosing a toothpaste is just a matter of preference. "You get toothpastes that come in pastes and ones that come in gels," says Dr. Hansen. "Take the gel: sometimes patients don't feel they get the same level of clean with a gel, but some like the 'feel' of a gel." Likewise, toothpastes that foam up quite a bit and get very bubbly, for example, aren't great for someone who gags easily, he adds.

"With some patients, you might suggest they have two different toothpastes, depending on their needs," says Dr. Hansen. Perhaps one with mouthwash if you're going out for the evening, and one for sensitive teeth, for instance.

In fact, a toothpaste that Dr. Stevenson can champion is

one for sensitive teeth. "Toothpastes containing ingredients to prevent sensitivity are quite effective in cases of mild sensitivity," he says. However, it's a good idea to speak to your dentist if you have sensitive teeth, so you can get to the root of the problem, adds Dr. Hansen. This way, the cause can be identified, and you can work together to find solutions to decrease or eliminate the problem.

"Remineralizing toothpastes are used when you have breakdown of the enamel, and the use of these pastes is to help reverse the breakdown and avoid restorations to those surfaces," says Dr. Hansen. This includes people undergoing orthodontics, those on medications that cause gingival enlargement, those who have less-than-ideal oral hygiene and consume soft drinks and energy drinks that are highly acidic and soften the tooth structure. "If the breakdown has passed the irreversible stage, it may be that a restoration is required to eliminate the sensitivity," he says.

The kinds of toothpaste that Dr. Stevenson is skeptical about are those that claim to whiten teeth. "Although ingredients like hydrogen peroxide have proven effective at whitening teeth, [it's] not in the concentration found in toothpaste. This is not a false claim, [but] it is also not an effective one."

"For young amount equal to grain of rice is and for the response of the concentration of the response of the concentration of the concentratio

And beware of toothpastes that can be abrasive. "I don't see baking soda toothpastes used as often anymore. Patients need to evaluate the possible abrasive negative potential that will in the short term remove stains, but in the long term, can remove enamel and dentin, predisposing the tooth to future sensitivity and breakdown," says Dr. Hansen.

As for kids, for very young children who insist on swallowing the toothpaste, you might want to avoid

As for kids, for very young children who insist on swallowing the toothpaste, you might want to avoid ones containing fluoride, as the concentration isn't intended for consumption, clarifies Dr. Stevenson. "But as soon as they're able to spit it out, fluoride will help."

A word of caution, however, about whichever toothpaste you're using: Don't use too much toothpaste. "For young children, an amount equal to the size of a grain of rice is all you need, and for the rest of us, all you need is a peasized amount," says Dr. Stevenson. "We are brushing our teeth, not pretending to eat ice cream!"

"For young children, an amount equal to the size of a grain of rice is all you need, and for the rest of us, all you need is a pea-sized amount."



What's Up with the Activated-charcoal Craze?

Originally used in air and water filters, charcoal is everywhere now, from drinks and desserts to detox facemasks and (yep!) toothpaste. We asked Dr. Allan Katchky, who maintains a practice in Scarborough, for answers to our questions.

Q: What is the difference between charcoal and activated charcoal?

A: Charcoal is the carbon residue that remains after wood or vegetation is burned. Charcoal can be converted to "activated charcoal" by a chemical process called oxygenation. The result is a charcoal that is porous and has much more surface area available to trap or "soak up" other small particles.

Q: How did activated charcoal become a trend in toothpaste?

A: Activated charcoal has been used for many years in air and water filters. It's also widely known for its use in hospital emergency rooms, to absorb poisons that have been accidentally swallowed. In the last few years, activated charcoal began to appear in skin-care products. From there, it became trendy in a wide range of personal health and beauty products, including toothpastes.

Q: Can activated charcoal whiten teeth and remove stains? Are there any risks?

A: Because activated charcoal is abrasive, it does remove surface stains from teeth, making them appear lighter in colour initially. However, the idea of using an abrasive on teeth day in and day out is probably more risky than it is beneficial. Abrasives leave the enamel rough and more prone to collecting surface stains, and this can cause a "rebound effect," where teeth actually stain more. Also, abrasives are known to increase sensitivity and receding of gums. It's important to note that, to this point, there is no research that proves either the effectiveness or safety of activated-charcoal toothpastes.

Q: Can activated charcoal lift away food particles and plaque that lead to bad breath?

A: In this case, there may be some benefit to activated charcoal, but of course, with the risk of using an abrasive on teeth. Personally, I prefer using flossing and saltwater rinsing to eliminate bad breath and keep the mouth healthy.

Now that Cannabis Is Legal, Don't Let It All Go to Your Head... or Mouth

By Maggie Blood



Whether you're trying out cannabis for the first time or have used it for a while, the Ontario Dental Association (ODA) wants you to be aware of what the now-legal drug can do to your oral health.

Oral cancer: Similar to cigarettes, cannabis smokers run the risk of developing oral cancer from both the drug itself and carcinogens in the smoke that can damage tissues in the mouth.

Infections: When the THC (its technical name is delta-9-tetrahydrocannabinol) in cannabis enters the bloodstream, it affects almost every bodily system and can weaken your immune system, which can open you up to gum and tooth infections.

Dry mouth (or xerostomia): More than just annoying, dry mouth is a serious side-effect of smoking cannabis that may lead to aggressive gum disease and cavities.

Staining: We all like to have nice, white teeth, but cannabis smoke stains your enamel and can actually cause

demineralization, making staining that much harder to get rid of.

Munchies: We've all heard about people getting very hungry after smoking cannabis, and the traditional go-to snacks usually aren't celery sticks. Be sure to rinse with a few swigs of water after snacking to prevent cavities from developing. It'll also help with the dry mouth!

Cannabis edibles: Understanding dosages is critical when it comes to cannabis-infused edibles, and you also need to watch out for the sugar content in the candies, chocolate and baked goods.

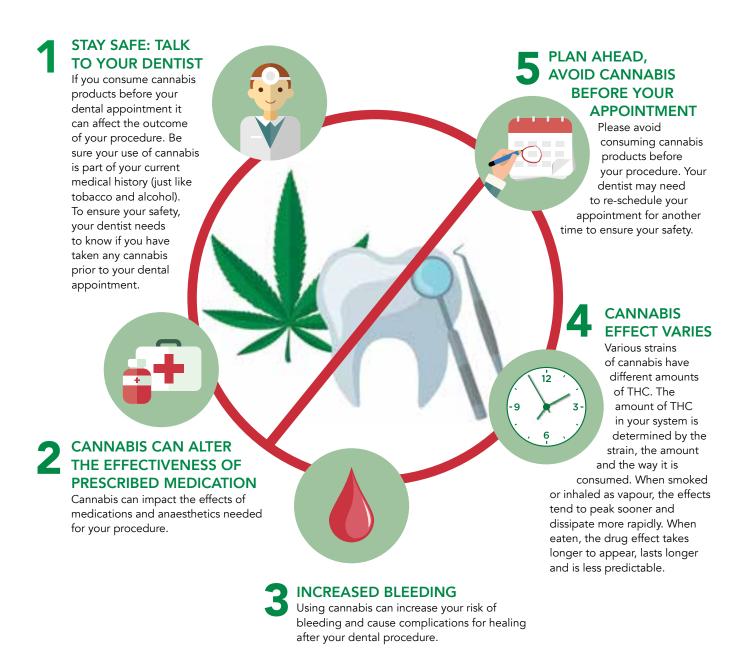
ODA President Dr. David Stevenson says: "If you're new to cannabis or have used it for a long time, be sure to talk about it honestly with your dentist. They can monitor your mouth and give you tips on how to prevent cavities and other problems from developing into something more painful and costly to fix."

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CANNABIS & DENTAL PROCEDURES

Whether you smoke it, vape, or use edibles, cannabis can negatively impact your dental appointment.



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Is Apple Cider Vinegar an Enemy of Oral Health?

By Heather White

Hint: the answer may not be what you think





Apple cider vinegar (ACV) is one of the Internet's favourite home-remedy darlings du jour. Drinking one or two tablespoons diluted in a glass of water before a meal once or twice a day is said to offer a bounty of be nefits, ranging from curing acne to

preventing cancer, staving off heart disease and increasing weight loss.

While many of the health claims are scientifically unproven, one aspect that is backed by science — and not always part of the messaging — is that the acid can weaken tooth enamel. This, in turn, says Dr. David Stevenson, President of the Ontario Dental

Association, with a practice in Carleton Place, may cause sensitivity in teeth, and acid increases vulnerability to decay and cavities.

However, it's not necessarily the ACV that is harmful, but rather how you use it, says Dr. Stevenson. Information is the key.

How ACV can harm teeth

"Patients come in all the time talking about ACV," says Dr. Stevenson. "The first thing I look at when assessing a product is, can it directly cause harm? Then, in saying, 'This is your management or cure for something,' are you foregoing another treatment that can be more helpful," — so, can it indirectly cause harm?

"Any vinegar has a pH level that's potentially damaging to teeth," says Dr. Stevenson. "Having said that, if you down ACV in water in one fell swoop, it's not going to do you too much harm."

It would be different if you sipped the cocktail over two or three hours, he says. "If you're constantly exposing your teeth to acid, you're not giving your mouth the chance to rebound from that exposure."

Other acidic contributors

Coffee, fruit juices and red wine are all examples of other liquids that are on the acidic side of the pH scale. "If all throughout the day you're drinking something acidic, the acidity can start to demineralize the tooth enamel," says Dr. Stevenson.

"We have good and bad bacteria in our mouths. The bad bacteria prefer an acidic environment that's where acidity can potentially do some damage."

Water is always recommended because it's in the ideal range of the pH scale, he adds.

How to offset acidic effects

After drinking something acidic, refrain from brushing your teeth immediately. In the short term, the outer surface of the tooth is a little weakened, and brushing your teeth right away can cause damage, says, Dr.





Stevenson. "It's best to wait about 30 minutes. Acidic foods can weaken the surface of enamel through demineralization, making enamel susceptible to the abrasive action of the toothbrush. Waiting 30 minutes actually allows time for your saliva to supply the minerals necessary to help remineralize the enamel surface."

What about the straw theory, whereby using a straw to drink something acidic means you bypass your teeth, and therefore, are not damaging them? "This can actually do more harm," says Dr. Stevenson. "You're probably just directing the liquid toward the inside surface of your upper front teeth. It's best to get it into your stomach as quickly as possible," he stresses.

"I'm a big fan of cheddar cheeses, almonds, cashews anything that you can snack on to help keep your mouth alkaline. If I have a glass of red wine, I have a piece of cheese afterwards. Chew it well and swish it around. That helps tremendously."

ACV is not a substitute for medication

"Where I get concerned," says Dr. Stevenson, "is when patients tell me, 'My doctor has suggested I go on this type of medication for my diabetes or stomach acid problems, but I'm going to take apple cider vinegar, instead."

In other words, don't replace a proven medication in favour of a treatment that is currently not supported by science. Von

Fast fact: "Of all the acids, including lemon juice, apple cider vinegar is one of the least acidic." - Dr. David Stevenson

The Effects of a Gluten-free Lifestyle on Your Oral Health

By Maggie Blood

What people with celiac disease, wheat allergies and gluten sensitivities need to know



Maintaining a good oral health-care routine that your dentist would be proud of can be a little challenging for most of us, but it can be even more trying for people with health issues, specifically, celiac disease (CD). According to the Canadian Celiac Association, the autoimmune disorder affects about one in 1,000 people in Canada and can cause more than just digestive discomfort for people who have it.¹

The condition causes the small intestine to be damaged by gluten, making it harder to digest certain foods and absorb critical nutrients. In order to combat these issues, people with CD eliminate wheat, rye and barley from their diets. While celiac disease, wheat allergies and gluten sensitivities are actual conditions, gluten-free eating has become a lifestyle choice for many people without any medical reason to do it. Yet, research is suggesting that may not be healthy,

especially when no planning is done to find suitable food alternatives.²

Because of the popularity of the gluten-free diet in Western culture, many food manufacturers now offer gluten-free products that can be found in grocery stores nationwide. The problem for anyone

eating a gluten-free diet is that those foods, baked goods in particular, can be highly processed, loaded with sugar and lacking in nutrients. Anyone on a gluten-free diet is in danger of falling short on proper levels of fibre, iron, folate, niacin, thiamine, calcium, vitamin B12, phosphorus and zinc. According to Registered Dietitian Katherine Tallmadge, author of Diet Simple: 195 Mental Tricks, Substitutions, Habits & Inspirations (LifeLine Press, 2011), People who unnecessarily shun gluten may do so at the expense of their health.³

So what does this do to the mouth? These nutrients are essential for developing and maintaining healthy bones and teeth. While celiac disease can develop at any age, if it occurs in children younger than seven, when permanent teeth developing, are there can be defects to the dental enamel.4 Ontario Dental Association Past-President Dr. LouAnn Visconti, who maintains orthodontic practice in Timmins, comments that "the number of teeth affected is also strongly linked to factors that include the age when a gluten-free diet is started."

There is also oral health research from the Celiac Disease Foundation suggesting that children with celiac disease may be at a higher risk of getting cavities.5

According to Dr. Visconti, this may be related to being unable to fully absorb calcium and other key minerals. "Another issue that can affect dental health is recurring canker sores and a dry or burning sensation on the tongue because of difficulties absorbing vitamin B12, folate and iron," says Dr. Visconti.

Being aware of the nutritional value in what you eat is critical when on a gluten-free diet, and so is maintaining good oral health-care habits. Brushing twice a day and flossing daily are musts. Just keep in mind there are some toothpastes, mouthwashes and even floss that can contain gluten, so be sure to read the labels!

Gluten in the **Dental Office**

Ontario Dental Association Past-President Dr. LouAnn Visconti says that "most people don't realize the dental office has supplies that may contain gluten." If you or a loved one has celiac disease, it's important to be aware of this before your next visit to the dentist. And of course, if you have any questions, please ask your dentist. Gluten may be found in some dental products, includina:

- gloves
- paste used to polish teeth
- fluoride
- topical local anesthetic
- orthodontic retainers.

For a complete list of dental products that are gluten-free, including polishing pastes, fluoride varnishes, whitening strips and toothpastes, please visit this link on the Celiac Disease Foundation's website: https://celiac.org/about-celiac-disease/related-conditions/ oral-health/.

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What a Pain!

By Michelle Outar



Experiencing chronic jaw, face, head, shoulder or neck pain? Ask your dentist about temporomandibular joint disorder



If you have chronic jaw, face, head, shoulder or neck pain, temporomandibular joint disorder (TMD) may be the culprit. TMD is a common problem that affects more women than men between 20 and 40 years of age.²

So, what is TMD? This disorder involves issues with jaw movement accompanied by chronic pain in and around the temporomandibular joints³, otherwise known as jaw joints, which connect the lower jawbone to the skull.⁴ These joints on each side of the jaw control movement, allowing you to talk, eat, chew, swallow and yawn.⁵

Symptoms and causes of TMD

Most people affected by TMD have the following signs or symptoms: pain or tenderness around the ear, jaw joint, jaw muscles, temples and other areas of the face.⁶ Symptoms can also include problems opening or closing your mouth, and a popping, clicking, crunching or grinding noise when you chew, yawn or open your mouth.⁷

Dentists believe the disorder can be caused by many factors, including jaw injuries, joint disease such as arthritis, teeth clenching or grinding, head or neck muscle tension, stress and the use of partial or full dentures that are not fitting properly, as well as certain habits such as fingernail biting, and pen or pencil biting.⁸



How your dentist can help

Dr. Kim Hansen, President-Elect of the Ontario Dental Association (ODA), with a practice in Prescott, helps his TMD patients by doing an indepth examination. He assesses his patients through verbal and clinical evaluation of the jaw area. Dr. Hansen takes clinical measurements of muscle tenderness, restricted openings or deflections and comes up with a best treatment plan for the patient. Depending on the circumstance, this may include referral to a specialist, specific radiographs taken of the jaw area or sometimes physiotherapy to the affected muscles.

> According to Dr. David Stevenson, President of the ODA, with a practice in Carleton Place, "your dentist is a doctor of the mouth and is in the best position to evaluate most factors which can

influence the cause of the condition and the severity of the symptoms." And, he says, "this begins with determining whether

the condition is sudden in nature, such as an injury from a fall or trauma, or stems from long-standing habits or improper function of the teeth."

Dr. Stevenson says that TMD symptoms from sudden injury can be managed with soft diets, limiting jaw movements, use of hot or cold packs, anti-inflammatory medications, muscle relaxants and time. For patients with more long-term TMD, he suggests changes to actual teeth, fillings or dentures. For chronic patients, he recommends making modifications to habits such as clenching, grinding and gum-chewing. Another solution is to wear a night guard or a splint made by your



Diagnosing and Treating TMD

To judge your condition, your dentist will do a detailed exam and may take X-rays. Depending on what your dentist finds, they may suggest a plan to treat your TMD. Treatment may include:

- Referring you to another health-care worker to help you ease muscle pain or open your jaw. This could be a physiotherapist, a chiropractor and/or a behavioural therapist.
- Correcting problems with your teeth. If you have a bad bite, braces or other dental work may be used to correct the problem. Teeth that are causing the problem can sometimes be reshaped to fit together better.
- Taking medicine. Depending on the cause of your TMD, medicine for pain, inflammation, tense muscles or depression may help.
- Wearing a night guard or bite plate (also called an occlusal splint). An occlusal splint is made of clear plastic. It fits over the biting surface of the teeth of one jaw so that you bite against the splint, rather than your teeth. This helps your jaw joints and muscles to relax. Depending on your TMD, your dentist may tell you to wear a splint 24 hours a day, only at night or for some length of time in between.
- Having surgery. If none of the other treatments have worked, or if it is very hard to open your jaw, you may need surgery.

Source: Canadian Dental Association

dentist to help cushion the joint and reduce friction from grinding or clenching your teeth. Surgery is rarely needed, depending on the cause of TMD.9

Alternative treatments

For those of you who are looking for alternative treatments to relieve TMD symptoms, you might consider therapeutic botox, acupuncture, stretching massage or mindful movements to help reduce pain. Dr. Stevenson says that alternative methods should always be considered depending on circumstances of the patient with TMD. For example, he says if muscle tension or posture are contributing factors to TMD, then a proper therapy alternative may prove invaluable in regulating TMD symptoms and preventing reoccurrence.

Patients can also apply personal massage therapy techniques to give themselves temporary relief. Dr. Shannon Hobbs, owner of Yorkville

> Dental in Toronto, says she gives her patients guidelines on how to apply self-massage of the mouth. Dr. Hobbs suggests using a warm compress on the jaw to loosen the muscles and get the blood flowing, then to slowly massage the cheek and lower jaw muscles with two fingers in small circular motions while the mouth is slightly open. She says this technique helps to promote circulation and reduce

muscle tightness in the jaw.

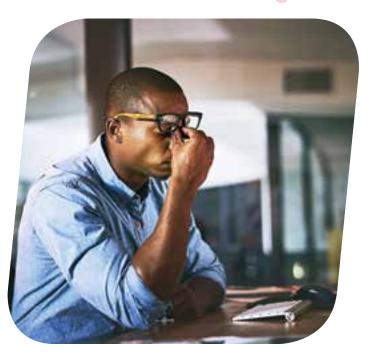
Why is TMD becoming more widespread?

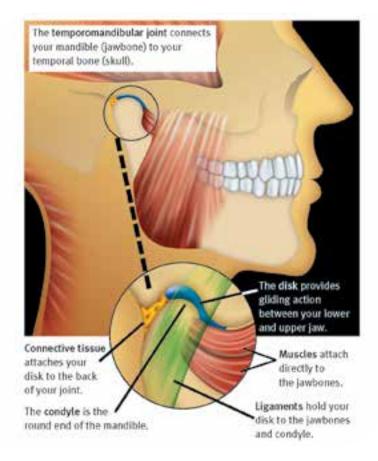
Dr. Hobbs says moderate to severe cases of TMD are increasing because of higher levels of stress in our dayto-day lives and more screen time on electronic devices. She says that "people tilting their heads downward for extended periods of time while looking at their screens can have a negative effect on the jaw muscles, which can exacerbate an underlying TMD issue. As well, people have a tendency to clench while on their devices.

Dr. Hobbs believes awareness and recognizing TMD symptoms before TMD becomes a dysfunction are key. As well, once TMD symptoms appear, she recommends consulting with your dentist right away to actively manage symptoms and prevent further damage to the iaw and teeth.

If you have symptoms of TMD, call your dentist today and set up an appointment to evaluate your jaw health. Your dentist can help find a manageable solution to help you reduce your TMD symptoms and move toward painfree living!11 you







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Looking for a Little Toothbrushing Fun? There's an App for That!

By Donna Paris

Jazz up your toothbrushing routine with a smartphone and an app or two



We all know how important it is to brush our teeth, even though most of us don't jump out of bed in the morning, excited to clean our pearly whites or look forward to it with anticipation at the end of the day. "Look at yourself. When do you pick the time to brush? We usually brush in the morning after we've eaten, after we've had coffee and then we look at our watches and phones, and it's, 'Oh, I have to get out the door!'" says Ontario Dental Association (ODA) President-Elect Dr. Kim Hansen, who maintains a dental practice in Prescott. "So we tend to grab our toothbrush and brush for 20 or 30 seconds and then again at night, when we're ready to go to sleep."

Brushing will clean your teeth, remove stains and work to remove plaque. And a fluoridated toothpaste can also help to avoid tooth decay. "To remove plague and food

particles from the areas around our teeth, the real workhorse here is the toothbrush," says Dr. David Stevenson, ODA President, who maintains a practice in Carleton Place.

> If only there were a way to help keep us motivated. Actually, there is. Get out your smartphone, and you'll be amazed at what you can do

with an app. "They can put a bit more fun and excitement into a mundane, repetitive thing," says Dr. Hansen. "I look at it as something to motivate patients and distract [kids] with songs, and especially the younger ones — they sing along."

The best part? Modern technology has made many apps easily accessible. Some are free or available for less than a toonie. Here's a quick look at what is out there:

Brighten your smile: You can check out how you'll look with a brighter smile using one of your own photos and compare how you'll look with before and after photos of yourself with these apps.

Poof — a virtual tooth fairy: There are apps to help the whole family take their brushing routines to the next level with fun timers, games and healthy tips that kids and adults will love.

If you have braces: There are informative apps out there for patients with braces that include resources on how to care for the braces and what to do if you have problems.

Kids will love these apps: There are loads of online timers to keep kids brushing for two minutes. One app features an online toothbrush that reveals a picture of popular movie characters and lets kids collect stickers when they do a good job brushing. Another app lets children pick their favourite monster, then personalize it for a two-minute show.

Cash to spend? A new Bluetooth-connected toothbrush will track your brushing in real time. As you brush, a 3D map of your mouth will show you which teeth you are brushing, and if you're not brushing enough or scrubbing

too hard. It will also let you know if you've missed any teeth and will send you progress reports, allowing you to set goals. All this info comes at a price, though—about \$200. von



Flossin' and Molar Nails and Tattooths — **Enough is Enough**

By Catherine Solmes

We bid good riddance to one dance craze and two bizarre trends that no one should try at home

Flossin'

Who knew that oral health care would inspire a trendy dance? The Instagram-famous American teenager who's known as "The Backpack Kid" popularized this nonchalant hip-and-armswinging dance craze called "Flossin'" or "The Floss." And while he may not have encouraged anyone to actually floss their teeth (or maybe he did?) The Backpack Kid certainly got his 15 minutes of fame and then some with his own music video and countless imitators.



mage from Nail Sunny

Molar nails

From live succulent plants to actual scorpions, it seems that almost anything goes for creative nail art on the Internet

these days. Some pretty unconventional teethrelated nail art can also be found, including realistic-looking molar nails and a mouth full of braces. There are even shark teeth-inspired nails!

Tooth tattoos

Barbed wire, a heart and a shamrock yes, these are common options for skin tattoos. But did you know that teeth are also being tattooed now? Called tooth

tattoos or "tattooths." these dental stain tattoos can be placed on crowns, bridges or even implants. While the Ontario Dental Association does not advise that anyone jump on this dental trend, this unique oral "art" did grab our attention. Mon





A valuable resource for your patients.





