

Tongue 'n' Cheek... and Teeth, too!



Own Your Smile: Make oral health a priority

In a recent statewide survey, 75 percent of Wisconsin adults 18 and older said regular dental exams and cleanings by a dentist are "important" to "very important" for controlling dental costs.

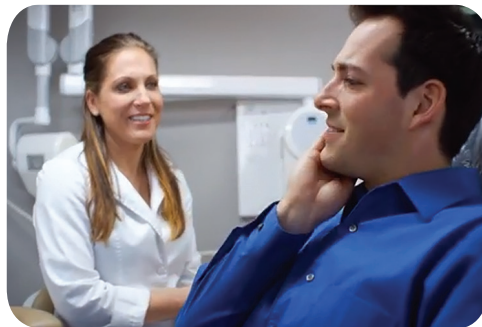
The Wisconsin Dental Association's new Own Your Smile oral health literacy and public awareness campaign is motivating adults statewide to make good oral health a priority by seeking affordable, preventive care in member dentists' practices for long-term value, regardless if they have dental insurance.

In a recent statewide survey, 75 percent of Wisconsin adults 18 and older said regular dental exams and cleanings by a dentist are "important" to "very important" for controlling dental costs.

Preventive care and early treatment of dental disease saves individuals pain, dollars and time in the dental chair over the long term. Having a dental home further strengthens the doctor-patient relationship which encourages regular preventive checkups and continuity of care.

On average over a 12-month period in Wisconsin, it costs an

established, adult patient \$26 per month (2013 Schenck Dental Fee Survey) for two routine cleanings and dental exams



and one set of X-rays - necessary for comprehensive and accurate dental diagnosis. This compares to an average, monthly cellphone bill expenditure of \$63 per month (2010 Bureau of Labor Statistics, Consumer Expenditure Survey).

Dental treatment costs increased just 2.3 percent from

2010 to 2012, or less than the cost of all consumer goods (2.6 percent), medical care (3.5 percent), hospital services (5.2 percent), prescription drugs (3.9 percent) and physician services (2.4 percent) according to the American Dental Association Health Policy Resources Center.

The U.S. Surgeon General reports poor oral health costs adults in the United States an estimated 164 million missed work hours every year. Children miss 51 - 54 million school hours annually because of dental problems.

Checkout WDA Own Your Smile awareness spots and learn the steps everyone can take to enjoy a lifetime of good oral health when you visit WDA.org.

Going to cheer on the Milwaukee Brewers at a Friday or Saturday game this season? Post your Own Your Smile selfie via Instagram for a chance to win tickets to a future game and appear on the Miller Park video board.



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- ✓ Fluoride myth vs fact: FDA and bottled water

Sign up for **FREE**, quarterly **Tongue 'n' Cheek...and Teeth, too!** patient e-newsletter, so you don't miss important oral health news and dental tips!



* 2013 Schenck Dental Fee Survey

Using herbal supplements? Tell your dentist

Certain common supplements, such as herbal products and vitamins, can have side effects, especially if taken with other medicines or before surgery.

Like toothpaste and orange juice, some things just don't mix. Dentistry has other pairings that also should be avoided.

Certain common supplements, such as herbal products and vitamins, can have side effects, especially if taken with other medicines or before surgery.

According to the Journal of the American Dental Association, there are four common dietary supplements - St. John's wort, ginkgo biloba, valerian and evening primrose - that can create adverse interactions with the drugs frequently prescribed during dental treatment.

Be aware of the following combinations:

- Ginkgo biloba and evening Primrose can be dangerous when taken with aspirin or ibuprofen, because they each can

act as blood thinners. The combination may cause difficulties in blood clotting, which could be serious for patients undergoing surgery.

- Calming supplements, such as St. John's wort or valerian, can strengthen the effects of anesthesia.



- Taking high doses of vitamins before undergoing anesthesia can also cause concern. In

particular, vitamin C, often taken in high amounts for cancer treatment, can weaken the efficiency of anesthesia.

Talk to your dentist

Whether it's echinacea or aspirin, always provide your dentist with a complete medical history. It is especially important to include ALL medications, including any herbal or conventional (over-the-counter or prescription) medications being taken.

If a herbal medication interferes with your dental treatment, your dentist may ask you to stop taking the medication until the treatment is complete.

A safe alternative may be recommended or a different drug may be prescribed for treatment.

Supplement fact sheets and tracking app available

The National Institutes of Health has fact sheets on dietary supplements online to make it easy to find reliable information.

NIH also has an online dietary supplement label database at www.dsld.nlm.nih.gov. This free database lets you look up the ingredients of thousands of dietary supplements. It includes information from the label on dosage, health claims and cautions.

For more personalized, on-the-go information about dietary supplements, check out NIH's free updated app for your smartphone or tablet: My Dietary Supplements or MyDS at <http://myds.nih.gov>.

The MyDS app provides additional supplement information and lets you keep track of the vitamins, minerals, herbs and other products you or family members take.

Delaying dental care can lead to pain, higher cost

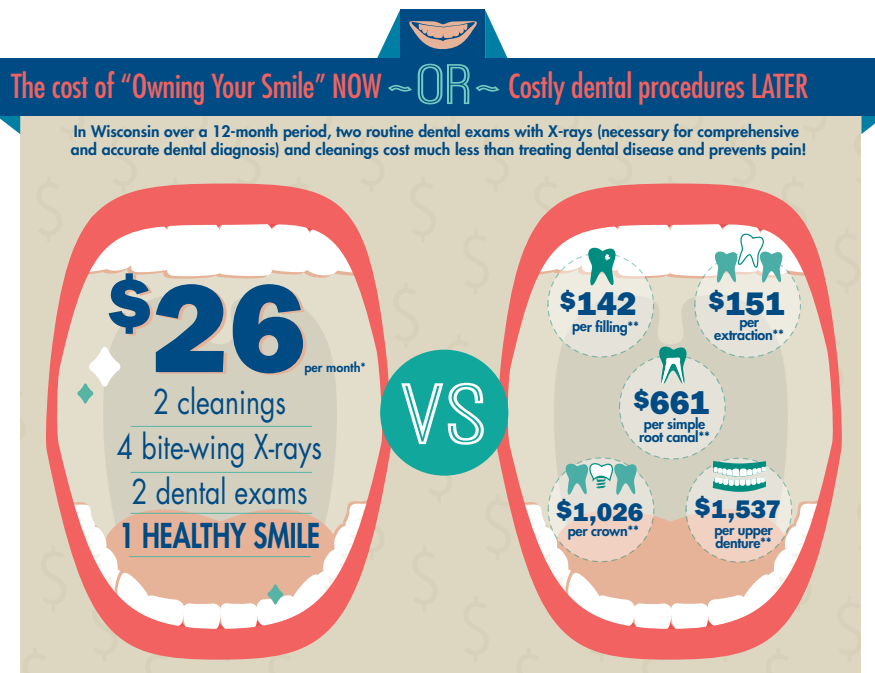
Don't wait until your tooth is infected and hurts to see a dentist. Make your oral health a priority, because taking care of your teeth will never be easier or less expensive than it is today.

It costs on average \$26* per month over a 12-month period for an adult patient to receive two routine cleanings and dental exams and one set of X-rays in Wisconsin.

Compare this preventive, pain-free option to costs of fillings, extractions, root canals or crowns (see infographic).

Learn more at www.wda.org/your-oral-health/own-your-smile.

*2013 Schenck Dental Fee Survey



* 2013 Schenck Dental Fee Survey (based on 2 visits per year, established patient)
** 2013 Schenck Dental Fee Survey

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Wear a mouthguard AND keep it clean!

Damaged or knocked out teeth, broken jaws and cuts to lip and mouth can be sustained when playing sports. Wearing a custom-fitted mouthguard helps absorb and spread the impact of a blow to your face which might otherwise result in an injury.

In fact, it is reported that an athlete is 60 times more likely to suffer harm to the teeth and mouth when not wearing a mouthguard.

Dental injuries can result in time off from school or work to recover, can be painful and disfiguring, and may involve lengthy and complex dental treatment. The cost of an injury to your teeth or jaw far exceeds the cost of a custom-fitted mouthguard from your dentist.

Mouthguards are typically mandatory for ice hockey, football and lacrosse, but their use shouldn't be limited to just those sports. It's important to use a mouthguard during any activity where there is a chance for contact with other participants or hard surfaces, including basketball, baseball, wrestling, bicycling, in-line skating and martial arts.

Prevent bacterial contamination

Even when this vital piece of equipment is worn, too often it is tossed into a gym bag and

forgotten about after practice or a game.

Cleaning a mouthguard and keeping it sanitized isn't difficult and can prevent possible dental and other health problems.

By the numbers
600,000
Visits to the emergency room each year for sports-related head and mouth injuries, according to the U.S. Centers for Disease Control and Prevention.

3 million
Number of teeth the National Youth Sports Safety Foundation says are knocked out annually during kids' athletic events.

15
A basketball player's risk of a facial injury is 15 times greater than that of a football player, as reported by the Academy of General Dentistry.

When not properly cleaned, mouthguards can harbor large amounts of bacteria, yeasts and molds that can lead to infectious and inflammatory diseases.

Symptoms associated with contaminated mouthguards include:

- Tooth decay
- Gum disease
- Bad breath

- Oral lesions
- Bacterial infection, which may cause wheezing, nausea, diarrhea or fever
- Staph infections, which may spread to the lungs and heart

Taking proper care

Running water over your mouthguard is not enough to make it truly clean. The American Dental Association suggests cleaning a mouthguard by brushing it with a toothbrush and toothpaste regularly to remove any built up debris and occasionally rinsing it with cool - not hot - soapy water.

Researchers have found that soaking mouthguards in antimicrobial solutions can also reduce the amount of bacteria.

Keep your mouthguard clean by storing it in its protective case. Make sure the case has ventilation, so the mouthguard can dry and to prevent bacteria from growing back. Also, make sure to clean the case regularly.

Know when it's time to replace

How long a mouthguard lasts depends on its construction and use. Check the condition of the mouthguard before each use, especially if it is chewed on.

It is also a good idea to bring it to regular dental exams for periodic



Maintenance must-dos

- Brush and floss teeth before wearing a mouthguard
- Before and after each use, rinse mouthguard with mouthwash or brush with a toothbrush and toothpaste
- Occasionally, clean it in soapy cool - not hot - water
- Store in a well-ventilated, plastic container
- Never throw it in with dirty, sweaty sports gear
- Do not share a mouthguard with someone else
- Avoid leaving it in direct sunlight or in a closed car
- Check for wear and replace when necessary

evaluation by your dentist.

To learn more about the types of mouthguards, visit wda.org.

Too much of a good thing

Brushing regularly is considered vital for healthy teeth and gums, but dentists and dental hygienists warn it can be overdone. Known as "toothbrush abrasion," overbrushing can lead to sensitive teeth and receding gums.

Excessive brushing can expose the root of the tooth to irritation which can cause "notching" and sensitivity to temperature. This can be accompanied by electric or "twinges" of pain when brushing.

Receding gums can also lead to other dental problems, such as periodontal disease and cavities on the roots of the teeth. These lead to the need for treatments such as fillings, root canals and tooth extractions.

The people most at risk for tooth or gum damage from overbrushing are those who are particularly diligent about their oral care and those who use medium- or hard-bristled toothbrushes.

Other factors, such as a genetic predisposition to receding gums, clenching or grinding your

teeth or having had your teeth straightened with braces, can increase your risk for damage from overbrushing.

What's important when brushing your teeth is not how hard you scrub, but that you use the proper technique and that you do a thorough job.

The following are some other tips for brushing your teeth correctly:

Electric or manual? - While type of toothbrush is a personal preference, it is important to consider the size of your mouth and how comfortable the handle is to hold. Many new electric models can assist in controlling the amount of force used and thus reduce the risk of abrasion.

Pick the right bristles - Always use a soft-bristled toothbrush to prevent gum damage.



Take your time - Brush at least two times a day for two minutes. Check out 2min2x.org for kid-friendly videos to watch while brushing.

Use a 45-degree angle - Aim toothbrush bristles and do short strokes in a vertical or circular motion. Be sure to brush outer and inner surfaces, the chewing surfaces and your tongue.

Follow up with a rinse - Bacteria can grow on an unrinsed toothbrush.

Dry it out - It is a good idea to shake out moisture and let a toothbrush dry completely before placing a cap on it. If using a cap/cover, make sure it allows air circulation.

Replace every three or four months - Look at the state of the toothbrush bristles and replace, as needed, if they look frayed.

Laying out the welcome mat for special needs patients

It is important to share information about patient allergies, medical conditions, medications and previous surgeries, especially if antibiotic premedication is needed for the appointment.

Special needs refers to a broad list of physical, mental and emotional limitations. Many special needs patients are able to receive routine dental care in a general practice setting.

The more information parents and caregivers can give to the dental team prior to the appointment, the more productive and successful that first appointment will be.

Considerations and questions to ask your dentist during the initial appointment are suggested here.

Physical and mobility concerns

Where is the best place to park, or to enter the building? Can the office hallways or clinical rooms accommodate the patient's means of movement? Would someone

from the office be available to help with access?



Health information

It is important to share information about patient allergies, medical conditions, medications and previous surgeries, especially if antibiotic premedication is needed for the appointment.

Have contact information for the patient's primary care physician

available in case the dentist needs additional information.

Office environment

Is there something that the dental team could do with lighting, sounds or music that could help with the patient in case there are sensory issues? Will there be a service animal?

Emotional needs

Is there a time of day that is best suited for the patient's appointment? What should the dental team know about the patient's emotional needs in order to better communicate with and care for the patient?

While it may seem there is a lot to consider before an initial dental visit, the above information is valuable for creating a safe and welcoming environment to care for the special needs patient.

Myth:

Adding fluoride to local water supplies is not needed, because adults and children receive the same, oral health benefits by drinking bottled water.

Fact:

Consumers drink bottled water for various reasons, including as a taste preference or as a convenient means of hydration. Bottled water may not have a sufficient amount of fluoride, which is important for preventing tooth decay and promoting oral health.

Some bottled waters contain fluoride, and some do not. Fluoride can occur naturally in source waters used for bottling or it can be added.

Fluoride is a mineral found in nearly all water supplies, but usually at a level too low to prevent tooth decay. This is why so many

Wisconsin communities add a little more fluoride to drinking water.

This process is called community water fluoridation and it raises fluoride to the level proven to prevent or even reverse tooth decay.

Unfortunately, many types of bottled water do not have enough fluoride to prevent cavities.

Brushing and flossing regularly is important. But drinking tap water that is fluoridated provides additional protection.

Find out if your local water supply is fluoridated at <http://1.usa.gov/1f3KJcz>.

The Food and Drug Administration does not require bottled water manufacturers to list the fluoride content on the label, but it does require that fluoride additives be listed.

In 2006, the FDA approved labeling with the statement, "Drinking fluoridated water may reduce the risk of tooth decay." if the bottled water contains from 0.6 mg/L to 1.0 mg/L.



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The Wisconsin Dental Association is pleased to make *Tongue 'n' Cheek... and Teeth, too!* available to our member dentists and their patients as a way of communicating oral health information and promoting quality care.

Information in this publication is provided as patient education only and cannot substitute for the judgment your dentist brings to individual clinical situations. Nothing contained herein is intended as professional dental or medical advice or to be used for diagnosis or treatment. Be sure to consult your dentist with questions about any dental condition.

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