Dentists collect Halloween candy in trick-or-treat buyback

Everyone knows candy causes tooth decay. That means come Halloween, dental care professionals are simply aghast. Some dentists this year, however, used a clever idea to cut down on the need for drilling and filling. Around the country, a number of dentists gave cash and prizes to trick-or-treaters in exchange for their Halloween candy. The sweets are being shipped to American troops serving in Iraq and Afghanistan.

“We bought back approximately 70 pounds of candy,” said Dr. Todd Snyder of Aesthetic Dental Designs in Laguna Niguel, Calif., one of the dentists who held an anti-decay promotion this year. “Surprisingly, I am amazed at how much candy it takes to weigh that much. We had a steady stream every five to 10 minutes of parents with one or two kids who would drop off their candy.” In addition to getting $1 per pound for the candy they brought in to dental offices, the children also received toothbrushes and the chance to win raffle prizes.

The programs are designed to help kids maintain healthy teeth and gums.

“Ditch the candy, that’s what we’re saying,” said Snyder, who

Greater N.Y. Dental Meeting = no registration fee!

Heading to the Greater N.Y. Dental Meeting? Don’t forget to visit Times Square and pull up a lounge chair to watch the hustle and bustle. (Photo/Julienne Schaer, NYC and Company)

Dentists can help identify cardiovascular risk

A recent study indicates dentists can play a potentially life-saving role in health care by identifying patients at risk of fatal heart attacks and referring them to physicians for further evaluation. Published in the November issue of the Journal of the American Dental Association, the study followed 200 patients (101 women and 99 men) in private dental practices in Sweden whose dentists used a computerized system, HeartScore, to calculate the risk of a patient dying from a cardiovascular event within a 10-year period.

Designed by the European Society of Cardiology, HeartScore measures cardiovascular disease risk in persons aged 40–65 by factoring
Patients who have sensitive teeth may be brushing too hard, AGD says

By Fred Michmershuizen, Online Editor

Do you have patients who complain about sensitive teeth, sharp pains or discomfort triggered by hot or cold? The culprit, according to the Academy of General Dentistry, might be in their very own hands.

According to a nationwide member survey conducted by the AGD, one in three dentists say that aggressive toothbrushing is the most common cause of sensitive teeth. Acidic food and beverage consumption was found to be the No. 2 cause.

As the AGD pointed out in a news release announcing the survey results, dentin hypersensitivity — or the temporary condition affecting approximately 40 million Americans of all ages — is caused by discomfort or sharp and sudden pain in one or more teeth and is often triggered by hot, cold, sweet or sour foods and drinks, pressure on the tooth or even breathing cold air.

Van B. Haywood, DMD, said that aggressive toothbrushing and consuming acidic foods may lead to tooth sensitivity. This is because over time, they can wear down the enamel on your teeth and even your gums.

“When the protective layer of enamel erodes or gum lines recede, a softer tissue in your teeth called dentin can be left exposed,” Haywood said. “Dentin connects to the tooth’s inner nerve center, so when it is unprotected the nerve center can be left unshielded and vulnerable to sensations, including pain.”

The survey also found that several other factors in addition to aggressive toothbrushing and acidic foods and beverages can cause tooth erosion and contribute to the oral condition.

These factors include certain toothpastes and toothbrushes, tooth whitening products, broken or cracked teeth, bulimia and acid reflux.

Out of the nearly 700 general dentists who responded to the survey, nearly 60 percent said that the frequency of tooth erosion has increased compared to five years ago.

“Being able to detect tooth erosion in its early stages is perhaps the most important key to preventing dentin hypersensitivity,” said Raymond K. Martin, DDS, MAGD. “Discoloration, transparency and small chips or cracks in the teeth are all signs of tooth erosion and should be discussed with your dentist as soon as possible.”

Fifty-six percent of dentists surveyed say that patients manage tooth sensitivity by avoiding cold foods and beverages, while 17 percent said that patients avoid brushing the sensitive area of the mouth.

“When these may seem like the quickest and easiest ways to prevent sensitivity, none of them will actually solve the problem,” said Gigi Meinecke, DMD, FAGD.

For those who are already affected by sensitive teeth, the AGD recommends patients adhere to the following actions to help alleviate symptoms:

• Switch to a desensitizing toothpaste. There are many brands of toothpaste made specifically for sensitive teeth.

• Use a soft-bristled toothbrush. When a patient uses a hard-bristled toothbrush, he or she may be wearing away the enamel on the teeth or causing the gums to recede.

• Practice good oral hygiene. A patient should floss regularly and brush at a 45-degree angle, brush gently in a circular motion and brush at least twice a day for two to three minutes.

• Avoid highly acidic foods and beverages. A patient should make a conscious effort to limit his or her intake of highly acidic foods and beverages every day.

(Source: AGD)

The person’s age, sex, total cholesterol level, systolic blood pressure and smoking status.

Patients with HeartScores of 10 percent or higher — meaning they had a 10 percent or higher risk of having a fatal heart attack or stroke within a 10-year period — were told by dentists to seek medical advice regarding their condition.

Twelve patients in the study, all of them men, had HeartScores of 10 percent or higher. All women participating in the study had HeartScores of 5 percent or less.

Of the 12 male patients with HeartScores of 10 percent or higher, nine sought further evaluation by a medical care provider who decided that intervention was indicated for six of the patients.

Two patients did not follow the dentist’s recommendation to seek further medical evaluation and one patient was only encouraged by his dentist to discontinue smoking.

Physicians for three patients were not able to confirm their risk for cardiovascular disease.

All 200 patients enrolled in the study were 45 years of age or older with no history of cardiovascular disease, medications for high blood pressure, high cholesterol or diabetes and had not visited a physician during the previous year to assess their glucose, cholesterol or blood pressure levels.

The study’s authors conclude that oral health care professionals can identify patients who are unaware of their risk of developing serious complications as a result of cardiovascular disease and who are in need of medical interventions.

According to the authors, “With emerging data suggesting an association between oral and non-cardiovascular diseases, and with the possibility of performing chairside screening tests for diseases such as cardiovascular disease and diabetes, oral health care professionals may find themselves in an opportune position to enhance the overall health and well-being of their patients.”

(Source: ADA)