

Miles of Smiles

New Jersey Department of Health and Senior Services Children's Oral Health Program

School Year 2010-2011

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Stressed Out?

The Daily Grind May Take a Toll on Teeth

Excessive stress may have two effects – spoiling your mood and your smile! The economy combined with natural and economic disasters can stress out even the sturdiest. The mouth is often referred to as the “mirror of the body” and the effects of stress can easily be observed in the mouth. Problems range from grinding the teeth, also known as bruxism to cracked and/or fractured teeth. According to the Academy of General Dentistry, about one



in three people suffers from bruxism. It is reported that between 10 – 15% of Americans moderately to severely grind their teeth, leading to muscle soreness or fractured teeth. Reactions to stress include:

- Periodontal (gum) disease
- Cracked teeth
- Tooth decay
- Xerostomia (dry mouth)
- Bruxism (clenching and grinding)

Evidence is increasing that suggests that periodontal disease and stress may be linked.

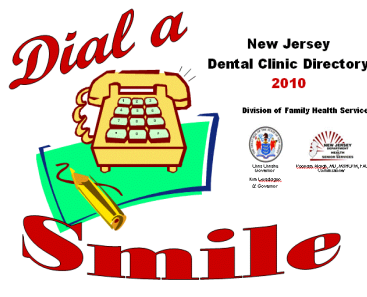
- Researchers theorize that elevated levels of the stress hormone, cortisol, may be associated with periodontal disease. Stress may lead to increased use of alcohol, tobacco, and drugs.

Changing lifestyles to include the following healthy habits can help relieve stress. Try to:

1. Get sufficient sleep
2. Exercise
3. Eat a balanced diet
4. Maintain good oral hygiene
5. Meditate and practice breathing exercises
6. Limit caffeine and alcohol
7. Maintain a positive attitude!

The 2010 New Jersey Dental Clinic Directory is Available On-Line!

The 2010 edition of the New Jersey Dental Clinic Directory “Dial a Smile” is a reference on public dental clinic services in New Jersey. These clinic services are primarily provided by local health departments, hospitals, and Federally Qualified Health Centers.



While all school nurses in New Jersey will receive a copy of this directory in the Fall 2010 newsletter mailing, you may want to share this resource with colleagues, family, and friends.

To access the New Jersey Dental Clinic Directory, go to:

www.dentalclinics.nj.gov

Straight Talk About Braces

Orthodontics is the dental specialty that prevents and treats malocclusions (a bad bite) taking into consideration each individual's growth and development. It is not just for kids and cosmetic concerns! Teeth that are twisted, crooked, crowded, overlapping or simply don't fit together properly are harder to clean and maintain, which may result in an increased risk of tooth decay and gum disease. In addition, other orthodontic problems may result in the abnormal wearing of tooth surfaces. Excessive stress on supporting bone and gum tissue or even the misalignment of the jaw joints may cause headaches or pain in the neck and/or face. The American Association of Orthodontics (AAO) recommends that all children be evaluated by an orthodontist no later than age 7.

Teeth may erupt out of position due to the following:

1. Hereditary factors (size of teeth and jaws)
2. Oral habits (thumbsucking, nail biting, mouthbreathing)
3. Missing teeth

Here's what you can expect on your first visit. The orthodontist will conduct an examination and measurement, take x-rays, and photographs of your face, profile and teeth. Impressions (mouth molds) will be taken to make a plaster cast of the mouth. The orthodontist will consult with the patient in regards to the estimated time of treatment, anticipated results and cost.

The orthodontist will evaluate the following:

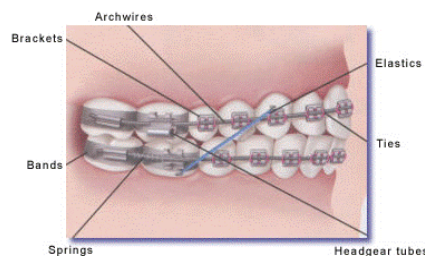
- Do the upper teeth protrude? The classic "buck teeth" are one of the most common ortho problems.
- Is there a deep bite, where the

upper front teeth cover the lower front teeth excessively?

- Is there an underbite where the upper teeth fit inside the arch of the lower teeth?
- Is there an openbite? You can tell if there is an openbite when one can stick the tongue out between the upper and lower front teeth when the back teeth are pressed together.
- Is there crowding or overlapping of teeth? Or are there large gaps between the teeth?
- Do the midlines line up? The two upper front teeth and two lower front teeth should line up with the bridge of the nose. If they do not, it may be due to a shifted lower jaw or drifting teeth, which results in a malocclusion.

Components of braces include the following gear:

- Archwires – apply force to move the teeth.
- Bands – thin sheaths of metal that wrap around teeth and anchor the wires.



- Brackets – metal or ceramic that is bonded to the teeth. Acts as a handle on the tooth and the archwire is threaded through the bracket.
- Elastics – rubber bands that hook onto the braces that help move the teeth and jaws.
- Ligatures – tiny ties or rings made of wire or elastic that fasten

the archwires to the brackets.

Once all the above gear has been placed, gentle pressure is applied through the archwires and elastics to move teeth into the correct position. Braces are generally worn for 18–30 months and may cause brief, minor soreness or discomfort after adjustment that will disappear in a few days.

Following are some orthodontic "emergencies" that can be handled quite easily at home.

Brackets are attached to the teeth with a special adhesive and are usually centered on the face of the tooth. Off center or sliding brackets indicate that the adhesive has most likely failed. If a loose bracket has rotated or the archwire is sticking out, try to push it back with a tongue depressor, or pencil eraser.

A ligature wire that is poking the lip or cheek can be moved into a comfortable position with the same tools as described above which allow you to simply push the wire, so it is flat against the tooth. Dental wax can be placed over an irritating wire/bracket until you get to the orthodontists' office.

A wire that has broken and embedded in the cheeks, gum, or tongue, should not be removed. Call the orthodontist immediately!

Good homecare is more important than ever with braces. The orthodontist may provide special brushes designed to clean in between the hardware and the teeth. See picture on page 3 for proper brushing technique. The toothbrush bristles should be placed gently under the wire and between the teeth. The brush can then be wiggled and moved in small circles from both above and below the main wire. Special attention should be given

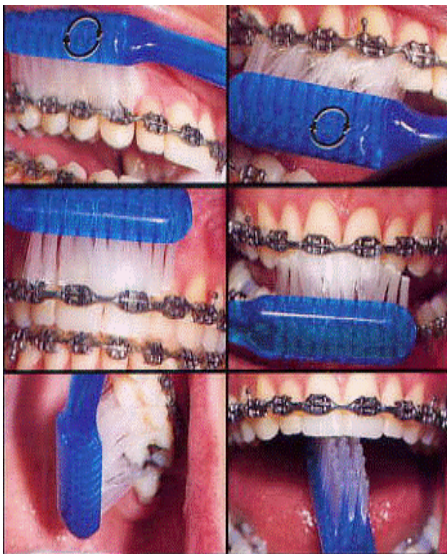
...Straight Talk About Braces

to the area between the braces and gums, which can trap plaque. Flossing with braces is a bit tricky and time consuming, but important, and should be incorporated into the daily oral hygiene routine.

Waxed floss won't shred as easily if it gets caught on the metal edges of the brackets and bands. Caution should be taken not to snap the floss into the gumline. Wipe the sides of each tooth and under the gumline using a shoeshine motion.

Good nutrition plays a role in the success of braces. Sweets, chips, nuts, gum, hard candy, soda, and chewing ice should also be avoided when wearing braces. Healthy or hard food like carrots and apples should be cut into bite size pieces to avoid damage to the braces.

Orthodontics is the way to get your bite right!

*On the Tip of the Tongue*

Oral piercings are a trend with the young population. However, you can make your students aware of the following potential complications and risks of oral piercing:

- Swelling
- Airway obstruction from swelling
- Pain
- Fractured teeth
- Gum recession
- Damage to nerves
- Infection
- Drooling and excess salivation
- Altered taste
- Prolonged bleeding after the procedure
- Aspiration or ingestion of jewelry
- Difficulty with chewing, swallowing, and speech
- Scar tissue formation
- Allergic reaction or sensitivity to metal in jewelry

If infection occurs, systemic antibiotics and chlorhexidine rinses will help to resolve the problem. Mouth jewelry that continually hits teeth can result in chipped and fractured teeth.

Some people may experience an allergic reaction to the studs, especially if the jewelry is of

questionable quality and contains metals such as nickel.

The best advice you can give is to discourage students from seeking a piercing. Despite your best attempts to dissuade your students from getting an oral piercing, you can provide some post-piercing homecare instructions, should they choose to forge ahead.

- Rinse the mouth 3–4 times daily with an antibacterial mouthwash, preferably alcohol free to prevent drying of oral tissues. Warm salt water rinses will help as well.
- Avoid spicy and/or hard to chew foods for the first week.
- Don't smoke or use other tobacco products.
- Drink plenty of water.
- Suck on ice for the initial three to five days to combat swelling.
- Have the dentist examine your mouth if a problem is suspected. Early warning signs of a problem include persistent, low-grade fever, yellow or green discharge from the piercing site, a pimple-like bubble on the piercing site, or continued bleeding.

Did You Know...?

Late night snacking can contribute to tooth loss? A study by a team of American (University of Missouri-Kansas City) and Danish researchers (Copenhagen University) found that nocturnal eating contributes to tooth loss. The researchers believe that one reason could be that saliva flow is reduced at night, a process that is essential for the removal of food particles.



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Brightening and Whitening Your Smile

Who doesn't want a whiter smile? Modern dentistry allows for safe and effective bleaching of teeth. In ancient times, urine was used as a mouthrinse to bleach teeth! We've come a long way from those days. Tooth-whitening products are available as an in-office treatment, home use treatments that are dispensed from the dental office, or can be purchased over-the-counter at the local pharmacy. Tooth whitening appears to be a safe way to enhance our smiles.

Teeth can be easily stained by tobacco, tea, coffee, and red wine. These types of stain are known as extrinsic stain and can be removed with routine brushing using an ADA accepted toothpaste, with a fine abrasive. Intrinsic stain may be the result of systemic conditions, the use of medications during tooth development (i.e. tetracycline), childhood disease, an infection or trauma to a tooth and natural aging changes.

Tooth whitening is typically accomplished with either hydrogen or carbamide peroxide, which work in the same manner. The peroxide diffuses through the tooth enamel and oxidizes stain molecules, making them invisible to the eye.

Professional bleaching is a dentist supervised procedure and may include:

- In-office bleaching
- Dentist prescribed home bleaching

The in-office bleaching is a procedure performed by a dentist. A neutralizing gel or a rubber shield is placed near the gums to protect them from contact with the bleaching agent. A peroxide bleaching agent is applied to the teeth and then exposed to a light or laser usually over the course of 1 - 4 sessions to whiten the teeth. Each session is approximately 30 - 60 minutes in length. The in-office treatments used today are mostly hydrogen peroxide-based in the 25%-38% concentration range, while the home use products typically use carbamide peroxide in the 10%-16% and even up to 35% range.



Home bleaching is prescribed by the dentist and dispensed in the dental office. A custom-fitted mouth tray is fabricated for the patient, which holds the bleaching gel. At home, the patient applies the peroxide bleaching gel in the mouthpiece that is worn for an hour every day or overnight for a week or two.

Over-the-counter (OTC) bleaching products are available that contain peroxide as the main ingredient. The concentration is lower in these products and while the cost is substantially lower, it may take a longer amount of time to get the desired effect. Some of the OTC products include whitening strips, gels that are painted on the teeth, trays, and whitening rinses.

Adverse reactions of bleaching may be tooth sensitivity and gum irritation. The tooth sensitivity may be decreased through the use of whitening agents that contain potassium nitrate, fluoride or ACP (amorphous calcium phosphate), making this side effect more manageable. The twice daily use of over-the-counter potassium nitrate containing toothpaste two weeks prior to bleaching and during the treatment regimen can reduce sensitivity. Regardless of method selected, the American Dental Association recommends that you consult your dentist prior to use of any bleaching product.

It is believed that most bleaching products are safe and effective; however, at the present there's very little evidence on the long-term safety and effectiveness of these procedures.

