

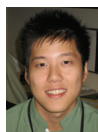
Cairns Precision Dental Group

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Issue 2

DENTAL X-RAYS — IS THE RADIATION BAD FOR ME?

By
Dr Jack Su



Many of us would have had an x-ray taken of our teeth in the past by a dentist or hygienist, but have you ever wondered "why do I need to have an x-ray?" or "isn't the radiation bad for me?"

Modern dentistry relies heavily on x-rays, or radiographs, for comprehensive diagnosis and management of dental conditions. Your dentist will often use radiographs to detect problems not seen during a routine examination and perhaps before they cause any symptoms.

Radiographs allow early detection of conditions such as hidden decay, infections, impacted teeth, bone loss, cysts and even oral cancer.

This allows the problem to be treated before it becomes too serious, when it can cause considerable pain and require more complex and expensive treatments.

Other times your dentist may require an x-ray would be tooth extractions, crown and bridge-work, and root canal treatment, as well as after any trauma.

If you are a new patient, your dentist is likely to recommend you undergo a radiographic examination to more accurately assess your oral health. Regular radiographic 'check-ups' are often required for existing patients, with the frequency dependent on your disease risk, general oral health and rate of tooth decay.

There are strict guidelines that must be followed for x-ray equipment which must comply with an Australian Standard. Every provision is taken to minimise exposure to radiation and reduce any risks associated with radiographs. Here at Cairns Precision Dental, we use digital radiography which has a sensor rather than the conventional films.

This reduces the radiation dosage even more as less exposure time is required. The risks that were once perceived with x-rays are now greatly reduced with newer technology and techniques.

The radiation you receive from one regular dental radiograph is less than half of what you receive from a day of background radiation (natural radiation from the sun, stars and earth). Another way to think about it is: a flight from Cairns to Brisbane would expose you to more radiation than two x-rays commonly taken for a dental examination here at Cairns Precision Dental.



By Dr Bruce Kidd

Rehash Recycle Circles or Cycles

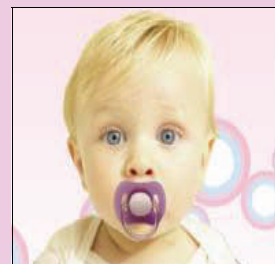
What do you do with an old toothbrush? Do you discard or recycle it? Recycle is the buzz word in this era of climate change and carbon footprint reduction. Why has it taken so long for the penny to drop? Personally I find the old toothbrush very useful for cleaning those difficult nooks and crannies in the wheels of my car. I have a great supply!

So everything goes around in cycles and can be reused or is it circles! Interest rates go up and down and corresponding our mortgage repayments.

But returning to the original idea of toothbrushes have you ever thought 'what makes a good toothbrush'? Why did this one feel better in my hand or why did another one seem to clean my teeth better? May I suggest

to critically test your toothbrush and ascertain why one does a better job. Two areas of design you need to assess are the handle and the bristle. So over to you for some road testing your toothbrush or is it tooth and gum testing?

Remember you may need 2 or 3 toothbrushes in the



Tips for healthy baby teeth

Use a baby's toothbrush with a small head and soft, rounded bristles. Up to the age of 18 months, the teeth should be brushed with plain water and preferably, teeth should be brushed twice a day—morning and night.

Watch toddlers while they brush and remind them not to miss any of their teeth or the back of each tooth. Children usually forget to brush their back teeth (molars) and the inner tooth surfaces that face the tongue.

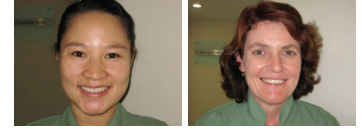
Reduce the risk of early childhood caries by not settling your baby to sleep with breast or bottle milk, sweetened milk, fruit juice or cordial.

Regular visits to your dentist or Hygienist/Therapist from an early age will give you the advice you need to prevent the risk of ECC. (Early Childhood

NOT FLOSSING !!

Flossing your teeth should be high on your agenda. It could prevent a heart attack! Periodontitis (gingivitis) is an inflammatory gum disease that affects nearly one-third of people. Its caused by bacteria in plaque building up around the teeth and irritating the gums, which causes infection. People with periodontitis are nearly twice as likely to have heart disease, according to the American Academy of Periodontology. One study found gum disease, cavities and missing teeth were as good at indicating heart disease as cholesterol levels.

Mind your mouth!!



Kim-Anh Nguyen Caroline Pym

With many sporting activities starting up for the New Year, the importance of wearing a mouth guard comes to mind. Our practice endorses their use- to prevent serious injury to mouth and jaw.

A mouth guard, usually a flexible piece of plastic that fits into the mouth; protects the lips, cheeks, tongue, teeth and jaw. They should be worn during all recreational and athletic activities to protect from serious injury—especially activities where there is contact or potential contact with another person, piece of equipment such as a ball, or the ground. According to a study published in the Journal of Paediatric Dentistry 1997, female athletes exceed males approximately 3 times more in oral and facial injuries.

Injuries to the mouth and jaw, broken, cracked or lost teeth, jaw and joint fractures are painful and hard to treat. Broken jaws often require surgery, hospitalisation, general anaesthesia

and wiring the jaw shut for 30 days to let the injury heal. A lost tooth must be reimplanted or false teeth made and fitted. Although easier to fix than a broken or fractured jaw, lost teeth are just as painful.

Some sports that mouth guards should be worn for are:

- | | | |
|-----------|--------------|---------------|
| Football | Baseball | Ice Hockey |
| Soccer | Softball | Martial Arts |
| Rugby | Lacrosse | Boxing |
| Wrestling | Field Hockey | Skateboarding |

MAKE AN APPOINTMENT TO GUARD YOUR MOUTH FROM SERIOUS MOUTH AND JAW INJURY BEFORE THE GAMES BEGIN!!

In the unfortunate event that you or your child is not protected the following steps can be taken to save the tooth in need.

1. If the tooth is dirty wash in saline or better still—owner’s saliva.
2. Avoid scrubbing.
3. Insert the tooth into the empty socket quickly or if not possible— fully immerse the tooth in milk.
4. Get to the dentist within 30 minutes.



“Am I brushing my teeth correctly?”

- By Dr Gary Taifalos



One of the most commonly asked questions I get is “Am I brushing my teeth correctly?” As a dentist I tend to take this for granted, however there are 2 very important influencing factors for achieving clean teeth and gums every time you brush. These are your selection of your toothbrush and the technique used in brushing your teeth.

1. A soft bristled toothbrush with rounded edges is better for teeth and gums than a hard-bristled one. Soft bristles are able to reach smaller crevices and hollows in your teeth. A toothbrush with a small head is more effective in hard-to-reach areas than a large toothbrush. Bristles harden quickly and get a

‘shaggy dog’ appearance. A worn-out toothbrush is not effective in removing plaque, so a new toothbrush is recommended every two to three months.

2. Outlined below is a simple brushing technique to achieve a great result every time you brush:

Place the toothbrush at a 45 degree angle over the teeth and gums. A small amount of toothpaste is required. Move the brush in small circles, using a rolling action of the wrist, again including the edges of the gums. Take care to cover the front and rear surfaces of all teeth. You may find it easier to get the outer surfaces of your back teeth by slightly closing your jaws.

On the top biting or grinding surfaces of your teeth, move the brush back and

forth .

The inside of the lower teeth can be difficult to clean properly. To assist in cleaning them, raise the elbow to shoulder level. It may help to hold the brush in the palm, across the hand, to angle the brush downwards slightly.

Proper brushing of all teeth and gums will take about three to five minutes. The minimum amount of time to brush is two minutes.

Do not use harsh, horizontal ‘scrubbing’ strokes on the front and back surfaces of the teeth or the gums. Using a scrubbing stroke does not effectively remove plaque, and it may damage teeth and gums. To help prevent bad breath (halitosis), gently brush your tongue from back to front and all of the upper and lower gums.

If you have any queries, make an appointment with one of our hygienists on 4054 2203. They are happy to guide you through the best oral hygiene techniques.

TO WHITEN OR NOT TO WHITEN

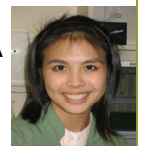
George Clooney. Julia Roberts. Brad Pitt. All these names conjure up images of beautiful people with beautiful, gleaming-white smiles. With this plethora of supermodel looks in an image-driven society, it is not surprising that there is an ever-increasing pressure for average joe blows like you and I to attain the same. Thus begging the question- “Should I whiten my teeth?” Whilst bleaching your teeth will not miraculously transform you into a Hollywood star, it may however improve self-confidence and quality of life. So what factors should you consider prior to making your decision? Firstly, you are a suitable candidate if the discoloration is evenly distributed

and intrinsic. Contraindications include unrealistic expectations, having gum-disease, sensitive and heavily-filled teeth. There are two types of whitening systems; in-office and at-home. In-office systems are performed by the dentist, offering a quicker procedure (2 hours) using a higher concentration bleaching agent, whilst at-home systems use a lower concentration bleaching agent over a longer period of time at a relatively lower cost. Both systems use the same active ingredient and both produce successful results of up to a 7 colour shade change. Regardless of the type of system used, periodic touch-up bleaching is required to maintain the colour.

Is it safe? Are there side effects?

Clinical studies have shown that the percentage of bleaching agent used is non-carcinogenic, causes no appreciable damage to tooth structure and has minimal effects on fillings. The most common side effects are teeth sensitivity and gum irritation, which usually resolves within a few days.

To whiten or not to whiten? A smile is just an image, but a smile says a million words.



By Dr Lina Okada