THE CAVITY COMPASS

ORAL HEALTH: WHAT WE'RE DOING WRONG

BILLAL ANWARY

LETTER 1 - 09/30/2023



HOW COULD THAT BE?

We do it twice a day as recommended, yet the Dentist still tells us we have cavities and cracks in our teeth. Is it a trick to get us to fork over hundred of dollars for treatment? Are they just using our teeth as practice? Well, the answer is not actually malicious by any means. Most of us are taught how to brush as children and then left to take on the responsibility of maintaining our oral health with minimal guidance. Every individual has a different set of factors to consider and challenges to address when brushing. Factors we have to look out for are mouth size, gum sensitivity, diet, and even commitment to making the effort.

BRUSHING

- Dentists recommend a toothbrush with soft bristles that can bend and reach under the gum. The size and flexibility of the brush are important, and the American Dental Association seal ensures quality.
- Scrubbing too hard isn't necessary. Instead, think of brushing as massaging the teeth and gums. Plaque is soft and can be removed with gentle, circular motions.
- Brushing should last for at least 2 minutes, twice a day. Setting a timer or syncing with a favorite song's duration can help maintain the proper brushing time.
- Change your toothbrush every 3 to 4 months or when the bristles become frayed. Avoid sharing brushes and store them in an open area to prevent mold growth.
- Brush using small circular, up-and-down motions rather than back-and-forth. Pay attention to the gum line and use a 45-degree angle against the gumline for effective cleaning.
- Brush all tooth surfaces, including the inside (tongue-side) of teeth. Many people overlook this area, leading to inflammation and calculus buildup.
- Wait 15 to 20 minutes after eating before brushing to allow saliva to neutralize acid.
 Alternatively, rinse your mouth with water to minimize acid damage before brushing.
- Brush at least twice a day for 2 minutes and maintain a high-quality cleaning routine at least once a day. Thorough brushing, flossing, and rinsing help control bacteria effectively.

RESOURCES

- HTTPS://WWW.WEBMD.COM/ORAL-HEALTH/FEATURES/BRUSHING-TEETH-MISTAKES
- HTTPS://JOURNAL.FORMOSAPUBLISHE R.ORG/INDEX.PHP/FJAS/ARTICLE/VIE W/4838/5891

The Cavity Compass

BILLAL ANWARY



First and foremost...

Partials are a simple concept in the field of Dentistry, but get more complex as the needs of individual cases change or increase.

Technically speaking, permanently fixed bridges and implant supported bridges are a type of partial denture. Though, since we mentioned those in the last issue of The Cavity Compass, I would now like to bring to your attention the world of removable partial dentures.

1. Cast Metal Partial Dentures (Metal Framework Dentures):

- These dentures have a metal framework made of alloys like chromium-cobalt or
- The metal framework provides strength and durability, allowing for a more precise fit.
- They are typically thinner and more comfortable than other types of partial
- Metal clasps or attachments may be used to secure the denture to existing teeth.
- They are often preferred for their longevity and stability.

2. Acrylic Partial Dentures (Plastic Dentures):

- Acrylic partial dentures are made entirely of plastic, including the artificial teeth and the base that rests against the gums.
- They are less expensive than metal framework dentures.
- · They are typically easier to adjust and
- However, they may be bulkier and less durable compared to metal framework dentures

3. Flexible Partial Dentures:

- These dentures are made of a flexible thermoplastic material (such as Valplast
- They are designed to be more comfortable and less conspicuous than traditional acrylic or metal dentures.
- The flexible material allows for a snug fit around the natural teeth without the need for metal clasps.
- They are often preferred for aesthetic reasons and because they can be more comfortable to wear.

Another important thing to keep in the back of your mind is that the world of Dentistry is ever evolving with regard to the tools and technology that clinicians use to create better treatment for their patients. So, here are some quick and easy terms to help you stay on top of your next appointment:

- Intraoral camera: portable devices used to capture detailed images of the inside of the mouth. Images can be displayed on a computer screen, enabling patients to view and comprehend their oral health conditions more effectively. This is particularly beneficial for older adults, as it helps them visualize dental issues more clearly and become more involved in their treatment plans.
- 3D Cone Beam Imaging: a type of 3D radiography that offers superior diagnostic capabilities to X-ray's. It offers increased precision in treatment planning, especially for implants and extractions.
- <u>Laser Dentistry:</u> precise, comfortable treatment for gum disease, cavity detection, and soft tissue surgeries.









QUESTIONS OR SUGGESTIONS - WRITE ON THE BACK AND RETURN TO LINDA

May Events

We are excited to share with you our arsenal of events coming this May:

Gero intern presentations May 9th:

- Wendy S. CWP flyer for friends
- Noah T. Connects through karaoke
- Billal A. The Cavity Compass

Nutrition with Debbie

- May 7- fiber talk
- May 21- cooking demo

PT Talk with Dr. Konrad Dias coming soon!!

Be on the lookout!



If you missed out past talks and karaoke, have no worry, there's plenty more to come!









A Abrupt Welcome

This iteration of The Cavity Compass is going to take a different turn than usual. So rather than defining what different things mean, we'll be talking about money!

Everyone's favorite topic until its time to pay the piper.

Dentistry has become almost synonymous with big bills and extensive payment plans. It's easy to make the jump in thinking between "this is beneficial to my health care" to "this is all a big business".

There's a delicate balance between recognizing dentistry as essential healthcare and acknowledging the business aspect of it. On one hand, dental procedures are crucial for maintaining oral health, which in turn can impact overall health. But on the other hand, the cost of these procedures can sometimes feel disproportionately high, especially for those without adequate insurance coverage.

Part of the challenge is that dental care often falls into a gray area between medical necessity and cosmetic enhancement. Some procedures, like fillings and root canals, are essential for preventing further damage and infection. But others, like teeth whitening or cosmetic veneers, may be considered more optional.

Insurance coverage also plays a significant role. Dental insurance plans can vary widely in terms of what they cover and how much they pay. Some plans may cover preventive care like cleanings and check-ups at 100%, while others may require significant out-of-pocket expenses even for basic procedures.

Then there's the issue of access to care. For many people, especially those in underserved communities or without insurance, the cost of dental care can be a barrier to getting the treatment they need. This can lead to worsening oral health and potentially more expensive problems down the line.

Overall, it's important for both patients and dental professionals to have open and honest conversations about the cost of care. This includes discussing treatment options, insurance coverage, and potential payment plans to help make dental care more accessible to everyone.

Lets Look At The Numbers

- The average start up cost of a dental practice in California: \$500,000
- About \$250,000 for renovation permits and construction costs to design and prepare the space for your specific needs
- Another \$200,000 for basic, general practice equipment and supplies
- ~\$50,000 for third-party services such as IT and property management
- Direct Overhead Total (40%):
 - Staff Salaries (Wages only) 22%
 - Lab expenses 6-8%
 - Dental supplies 4-6%
 - Office supplies 1-2%
 - Bank & Credit Card Fees 1-2%
- Fixed Overhead Total (20%):
 - Rent 5%
 - Marketing/Advertising 3-4%
 - Continuing education 1-2%
 - Insurance 2-3% (Unless full health insurance is offered)
 - o Utilities 1-2%
 - Repairs and Maintenance .5-1%



AGING GRACEFULLY

ALTHOUGH THE CWP DOES A
WONDERFUL JOB AT EMPHASIZING THE
STEPS NECESSARY FOR SUCCESSFUL
AGING, IT DOESN'T HURT TO REINFORCE
YOUR CURRENT KNOWLEDGE. SO, HERE
ARE SOME COMMON TIPS FOR AGING
WITH GRACE:

- 1. MAINTAIN A SOCIAL NETWORK
- 2. DUST OFF YOUR ORAL HEALTH HABITS
 - KEEP UP WITH CARDIO
- 4. EAT NUTRITIOUS FOODS

5. LAUGH OFTEN

STUDY ON AMALGAM VS
COMPOSITE FILLINGS:
HTTPS://WWW.FDA.GOV/MEDI
CAL-DEVICES/DENTALDEVICES/DENTAL-AMALGAMFILLINGS

STUDY ON AMALGAM VS
COMPOSITE:
FILLINGS:HTTPS://DOI.ORG/10.1
002/14651858.CD005620.PUB2

AGING:

HTTPS://DELTADENTALAZBLOG.

COM/5-TIPS-FOR-AGINGGRACEFULLY/

MORE TIPS ON SUCCESSFUL

ADDITIONAL RESOURCES & NOTES



THE CAVITY COMPASS

LETTER 2 - FEB 2024

BILLAL ANWARY

NEEDING FILLINGS CAN BE

OVERWHELMING AT TIMES. SO, ITS

IMPORTANT TO RECOGNIZE AND

UNDERSTAND THE LINGO TO AVOID ANY

ANXIETY ABOUT GOING IN TO SEE A

DOCTOR.

- AMALGAM A MIX OF ELEMENTAL
 METALS USED TO FILL CAUSED BY
 DECAY
- ABSCESS A PUSS FILLED POCKET
 NEAR OR AROUND THE TEETH CAUSED
 BY AN INFECTION.
- BONDING A COSMETIC TECHNIQUE USED TO REPAIR OR BUILD TEETH TO MATCH THEIR NATURAL LOOK AND COLOR.
- CROWN THE OUTERMOST COVERING
 OF THE TOOTH (WHAT CAN BE SEEN
 ABOVE THE GUMS). CAN BE REPLACED
 BY GOLD, STEEL ALLOYS, OR WHITE
 METAL ALLOYS.
- OCCLUSION DEALING WITH THE
 WAY THE TOP AND BOTTOM TEETH
 MEET AND FIT INTO EACH OTHER FOR
 A COMFORTABLE BITE

Bridges Are Over and Implants are In

IMPLANTS ARE ALL THE RAGE IN

DENTISTRY THESE DAYS, BUT WHAT ARE

THEY? HOW ARE THEY DIFFERENT FROM

A BRIDGE? WHAT EVEN IS A BRIDGE?!

- AN IMPLANT IS A PERMANENT
 SOLUTION FOR MISSING TEETH. BY
 DRILLING INTO THE BONE AND
 PLACING A HOLLOW SCREW,
 DOCTORS ARE ABLE TO POSITION AN
 ABUTMENT THAT SUPPORTS A
 NATURAL LOOKING CROWN; THE
 CROWN IS THEN ABLE TO SERVE THE
 FUNCTIONS OF A NATURAL TOOTH.
- A BRIDGE ON THE OTHER HAND
 ALLEVIATES THE ISSUE OF A MISSING
 TOOTH BY USING NEIGHBORING
 TEETH AS A SUPPORT FOR CROWNS.
 THESE CROWNS ARE PERMANENTLY
 JOINED AND SIT ABOVE THE GUMS TO
 FILL GAPS IN A SMILE.

So Now, What's What?





Trick Question: we'll talk about partials next time

