



Dental Care

# What Is Gingivitis?

Gingivitis develops when plaque, tartar and bacteria build up on the teeth. This causes red, swollen and bleeding gums.

It's the earliest stage of gum disease, also called periodontal disease. Left untreated, it can lead to periodontitis, a more severe type of gum disease that involves bone loss in your jaw.

## SYMPTOMS

Almost half of all adults older than 30 have some kind of gum disease, the Cleveland Clinic says. A symptom of gingivitis is bad breath, particularly the kind that doesn't go away, even after brushing. Also be on the lookout for gums that bleed easily, red and swollen gums, sensitivity to heat and cold, and tenderness or pain when you chew food.

## CAUSES

Gingivitis is more likely to occur in men, those living in poverty, those with less than a high school education and people who smoke or use tobacco. Women who are pregnant or have other hormonal changes are also more susceptible, as are diabetics and people with a family history of gum disease.

Some prescriptions and over-the-counter medications can contribute to gingivitis, the Cleveland Clinic says, especially medications that cause dry mouth. Medications that treat epilepsy, some cancer thera-



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pies, calcium channel blockers and some oral contraceptives can all cause dry mouth.

Gingivitis is the body's inflammatory response to plaque and tartar on your teeth. When plaque and tartar stay on your teeth too long, it irritates the gums. It's not contagious, though people with gingivitis can spread bacteria

through saliva-to-saliva contact.

## DIAGNOSIS

If you have symptoms of gingivitis, talk to your dental professional. Your dentist will look for signs of bleeding, infection, loose teeth and gums that are pulling away from your teeth. Dental X-rays can show whether you've lost any jawbone

underneath. You may be referred to a periodontist, who is a specialist in gum disease.

## TREATMENT

Gingivitis treatment involves controlling the infection. You'll have your teeth cleaned thoroughly to remove the harmful bacteria, plaque and tartar. Depending on the severity of

your disease, a dental professional may recommend scaling and root planning, a deep dental cleaning and smoothing the surfaces of the roots of teeth so that bacteria doesn't stick.

Improved oral hygiene will greatly help, including scheduling regular check-ups. You may be prescribed an antimicrobial mouthwash.

# Teeth Whitening Basics

Around 37 million Americans used tooth whitening products in 2020, according to Statista, Census data and the Simmons National Consumer Survey.

Here's what you need to know about whitening your teeth.

## TYPES OF TEETH WHITENING

There are two kinds of tooth whitening procedures, those that are done in a dental professional's office and those done at home with over-the-counter products. In-office tooth whitening may also be called dental bleaching and can be done using a variety of products and techniques. At-home whitening can be done with custom-fitted trays or with over-the-counter products such as strips, gels, rinses, gums and films.

## TYPES OF STAINING

Tooth stains come in two forms. Extrinsic stains commonly come from an accumulation of colored compounds on tooth enamel, the American Dental Association says. These colored compounds can come from tobacco use, exposure to metal salts, and the consumption of pigmented foods and beverages.

Intrinsic stains occur inside the tooth, within the enamel



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or underlying dentin. These can come from genetic disorders, such as dentinogenesis imperfecta, amelogenesis imperfecta or local factors during development. Aging can also cause intrinsic discoloration. As people age, the tooth enamel becomes more translucent and thinner, which allows the more yellow dentin to show through and

darken the overall color of the tooth.

## WHICH METHOD IS BEST?

Cleaning intrinsic stains involves a chemical reaction that changes the color of the tooth. The ADA says this is done with ingredients such as carbamide peroxide and hydrogen peroxide. Carbamide peroxide releases about a third

of its content as hydrogen peroxide, which is an oxidizing agent. Some stains may be more responsive to chemical bleaching than others.

Extrinsic surface stains can be treated with products such as whitening toothpastes. These over-the-counter products contain carbamide peroxide and hydrogen peroxide, just like the in-office products,

but at lower concentrations. Just like other staining, however, some stains are more responsive to treatment than others. Also, the ADA says that over-the-counter products may take longer to work than in-office treatments.

Look for the ADA Seal of Acceptance on products and talk to your dental professional before beginning treatment.

# Overcoming Dental Anxiety

Fear of the dentist is common, Healthline says, but there are ways you can overcome your dentophobia or odontophobia.

Letting fear hold you back from these important medical visits can sacrifice your health. Here are some strategies for coping with dental anxiety.

## DENTOPHOBIA

Fear of going to the dentist is called dentophobia. It's important to recognize the difference between a fear and a phobia. A fear is something you dislike, even strongly dislike. This can cause stress, of course, and avoidance. But it's not yet a phobia.

A fear rises to a phobia when it causes distress and avoidance to the point of interfering with your daily life. Phobias are also usually fears of things that won't cause you harm, but your phobia tells you that it will. Such as the dentist.

## TREATMENTS

For a phobia, consider seeking professional help, such as from your doctor or a therapist. They may recommend exposure therapy, where you might make visits to the dentist's office without sitting for an exam, gradually increasing your time there and activity until you conquer your phobia. This may be paired with medi-



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cation to help ease your anxiety.

## TIPS FOR STAYING CALM

If you're wrestling with fear or anxiety, Healthline recommends these tips for staying calm in the dentist's chair.

- Visit at a less busy time of day, such as the early morning. There may be fewer patients

and fewer procedures making scary noises.

- Bring noise-cancelling headphones or earbuds and listen to music to help you relax.
- Ask a friend or family member to come with you to your appointment and help ease your fears.
- Practice deep breathing or

meditation techniques to help you calm down.

Most importantly, let your dental professionals know about your fears. They can help ease your anxiety and be prepared to help you through your exam. Remember that seeing the dentist is critical to maintaining good health and

well-being. It's way more than just having a white smile.

You should have your teeth professionally cleaned once every six months for optimal dental health. While you're in the chair, your dentist will also check for signs of cavities, gum disease, oral cancer, dry mouth and bad breath.



# Your Teeth and Your Heart



What do your mouth and your heart have in common? An awful lot, as it turns out.

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There's a connection between poor oral health and poor heart health, including cardiovascular disease, heart attacks and stroke.

## WHAT'S THE DEAL?

There are several theories as to why heart health and oral health are connected, Harvard University says. Some of them are that poor oral health kicks off the body's immune response, causing inflammation that can cause vascular damage throughout the body, including the heart and brain.

Another theory is that the bacteria that causes gingivitis and periodontitis also travels to blood vessels throughout the body, causing inflammation and damage. In turn, that damage causes tiny blood clots, heart attacks and stroke. Researchers have found the remnants of oral bacteria within atherosclerotic blood vessels from the mouth, Harvard says.

Lastly, it may be that there's not a direct connection, rather there's a third risk factor, such as smoking, poor access to health care and a lack of exer-

cise that's a risk factor for both conditions.

## IT'S NOT JUST THE HEART

The link between poor oral health and heart disease isn't the only one. Harvard says that periodontal disease, especially cases caused by the bacterium called *prphyromonas gingivalis*, is linked to rheumatoid arthritis and pancreatic cancer.

Watch out if you already take medications for pre-existing conditions. Some medicines,

such as decongestants, antihistamines, painkillers, diuretics and antidepressants can dry out your mouth. A dry mouth tends to be a dirtier mouth because saliva washes away food and neutralizes acids in the mouth, protecting you from bacteria that can lead to disease.

## WHAT YOU CAN DO

The good news here is that this can mostly be avoided. The American Dental Association says you should be brushing your teeth twice a

day for two minutes with fluoride toothpaste. Use floss regularly and follow the regimens your dental professionals recommend and see them for professional cleanings every six months.

Change out your toothbrush regularly to make sure you're getting the optimum cleaning. Use a mouthwash with the ADA Seal of Acceptance. That means that scientific evidence demonstrated the safety and efficacy of that product, which has been evaluated by the ADA Council on Scientific Affairs.

# Getting Braces as an Adult

It's not just a teenage thing anymore. About 4 million Americans wear braces, and up to a quarter of them are adults, a study by Humana shows.

Some adults having their teeth aligned now didn't have them fixed as children or have teeth that have moved over time. They may also be more able to afford them now.

Ohio orthodontist Dale Anne Featheringham told the AARP that shifting teeth can be caused by adults losing teeth, losing bone around the teeth or just by the way you hold your mouth.

"Because the bones of the jaw and around your teeth and gums change as you age, problems can arise that prompt older people to seek orthodontic treatment," she said.

Misaligned teeth can be tough to clean, letting disease set in and causing other health problems.

"Every day we're learning more about the connection between the health of the mouth and overall health, and we're discovering that inflammation is linked to more serious problems like heart and lung diseases," Featheringham told AARP. "It used to be that the only adults who came in for treatment were those who



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had serious functional problems like the inability to eat or speak well. But now we're seeing significant numbers of adults seeking treatment for cosmetic improvement and overall wellness."

Experts warn to be wary of over-the-counter aligners and stick with professional treat-

ment from an orthodontist. Do-it-yourself kits can be dangerous and cause tooth erosion, worsen any misalignment or even lead to jaw problems.

And for adults who aren't keen on a mouth full of metal, there are options. Newer technologies include 3D-printed

aligners, which are thin pieces of clear plastic that fit over the top and bottom teeth and are barely noticeable. The clear aligners are worn all the time except when patients are eating or brushing their teeth.

Featheringham said most adult patients should plan on treatment lasting between 10

and 24 months, with adjustments every six to 12 weeks. The American Dental Association, using 2020 survey data, estimates that the average cost of braces or aligners for adults was \$5,500. Orthodontists may use payment plans to make the costs easier to swallow.

# Choosing a Toothbrush



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The American Dental Association says people should brush their teeth for two minutes, twice a day, with a soft-bristled toothbrush and a fluoride toothpaste.

You should replace your toothbrush every three to four months, or more often if your bristles are frayed or matted.

## THE ADA SEAL OF ACCEPTANCE

Look for toothbrushes with the ADA Seal of Acceptance. These products have provided scientific evidence that demonstrates safety and efficacy. They've been evaluated by the ADA Council on Scientific Affairs to ensure they meet requirements. For powered toothbrushes, they're also evaluat-

ed on the ANSI/ADA safety standards.

## HOW TO BRUSH

The ADA says that brushing for two minutes has been shown to remove plaque. Using a toothpaste that contains fluoride is associated with decreased risks of cavities and remineralization of teeth.

Generally, the ADA says to brush with the toothbrush placed against the gumline at a 45-degree angle to remove plaque from above and just below the gingival

margin. Move the toothbrush back and forth in short strokes. Clean the inside surfaces of your front teeth by tilting the brush vertically and making several up-and-down strokes.

Brushing should touch all tooth surfaces. Apply gentle pressure as you brush, reducing risks to injury of your teeth and gums.

## CARING FOR YOUR TOOTHBRUSH

Don't share toothbrushes, the ADA says, and rinse them carefully after every use. Remove all paste and debris from the bristles. Store toothbrushes in an upright position after use and allow them to air dry.

If needed, you can sanitize your

toothbrush by soaking it in a 3% hydrogen peroxide solution.

## MANUAL OR POWERED?

Manual toothbrushes are available in a variety of shapes and sizes. Research has shown that angled or multilevel bristles perform better than flat bristles. Use soft bristles to prevent injury to gums and teeth.

Powered toothbrushes tend to be more expensive, but better for people with dexterity problems or those with dental appliances.

Powered toothbrushes use a variety of head movement to clean your teeth; it's all down to what you prefer. Just make sure you choose a good brush, use it, clean it and replace it often.



# Why Is Flossing Important?

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Brushing is important, of course, but so is cleaning between the teeth where the brush cannot reach.

Flossing will keep plaque — a sticky biofilm of bacteria and food particles that form on the surfaces of the teeth — at bay.

Plaque can cause gingivitis and calculus, which is plaque that has absorbed calcium from saliva and hardened. Calculus cannot be removed by brushing and flossing. It must be removed by a dental professional. If it's not removed, calculus can cause periodontitis, which can destroy the bones, gums and

tissue that support the teeth.

Cleaning all sides of your teeth is important when removing plaque. It's true, the National Institutes of Health says, that there aren't many large-scale studies of flossing. Researchers have found modest benefits from flossing in short-term studies. The Institute says there aren't many studies because of the expense of conducting them and because periodontitis can take years to develop. The studies that

are done are pursuing another goal, such as plaque formation, rather than the onset of disease. In the end, the NIH says, flossing is a low-risk, low-cost way to clean your teeth.

If you really hate flossing, there are alternatives. You can try a water flosser, a floss holder or interdental brushes. You just need to disrupt the plaque before it hardens into a calculus and causes harm.

Ask your dentist to show you the proper flossing technique. Try using a piece of floss that's 18 inches or more, with the unused floss wrapped around the middle and

ring fingers of both hands. Don't snap the floss through the contact area between the teeth. Instead, the NIH suggests sawing the floss through the tight points. You can try a floss threader to get the floss where it needs to go.

A dentist can always tell when a patient hasn't flossed, says NIH's Dr. Timothy J. Iafolla. Missing a day or two won't hurt, but flossing or another form of interdental cleaning should be done regularly to keep infection at bay. Try to stick to the same flossing pattern and don't skip around to make sure you're getting every tooth, every time.