

Optimal Oral Health Report

YOUR GUIDE TO OPTIMAL ORAL HEALTH AND BEAUTY

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THE PANKEY INSTITUTE ■ ONE CRANDON BLVD. ■ KEY BISCAWAYNE, FLORIDA 33149

Jaw Pain

Muscle fatigue and spasms in the jaw joints not only cause pain in the jaw muscles but can lead to spasms in the head and neck, migraine and cluster headaches, tooth and facial pain, ear and sinus pain, and anxiety or depression.

As you chew, your upper and lower teeth come together, pushing against the skull. If you have an uneven bite, missing teeth, or improperly aligned teeth, your muscles work harder to bring the teeth together. If you clench or grind your teeth, the strain only increases.

Bad posture, poor ergonomics, and head or neck trauma contribute to jaw joint pain. And pain isn't the only result. You may experience clicking when moving your jaws or feel them locking when you open or close your mouth.

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FOCUS ON ORAL HEALTH



Occlusal (Bite) Disease

by Gary DeWood, DDS, MS, Clinical Director

Occlusion is the coming together of teeth, a meeting of two surfaces made of the hardest stuff in your body. You probably haven't devoted a lot of thought to making those surfaces move against each other because, for most of us, it just happens.

Thankfully, your brain is able to coordinate thirty-two teeth and dozens of muscles without telling you what it's doing. When you're enjoying dinner with your favorite person, this is a very good thing. When you're sleeping soundly and grinding your teeth away, it's not so good. After all, our teeth are supposed to last a lifetime.

Teeth are negatively affected by three diseases: decay (cavities), periodontal (gum) disease, and occlusal (bite) disease. Most of us are acquainted with the signs, symptoms, and treatment of the first two, probably from personal experience.

Dentists are highly trained in the diagnosis and treatment of decay and periodontal disease. Through education and experience, the doctor is able to



look into the future and recommend appropriate treatment to minimize the effects of these diseases by dealing with them as early as possible.

Occlusal disease does not always present itself so obviously. Wear, sensitivity, cracks, loose teeth, breaking teeth, sore muscles, painful jaw joints, headaches – these and more can be the effects of occlusal disease. In its early stages, an obvious injury, like a broken tooth, often hides the underlying cause.

Doctors who study at The Pankey Institute learn and develop skills in recognizing the signs of occlusal disease and in providing appropriate treatment to halt, and often reverse its effects. Recognizing occlusal disease as early

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Jaw Pain (continued)

The National Institute of Health estimates that more than 10 million Americans have problems affecting the jaw joints and muscles. The Academy of General Dentistry reports that 1 in 8 Americans suffer from headaches, and up to 80% of these headaches are estimated to be caused by muscle tension.

You may have a poor bite if you experience any of the following:

- ◆ You clench your jaw muscles for long periods of time.
- ◆ When you wake up in the morning, your jaw muscles feel tired and sore to the touch.
- ◆ You experience pain behind the eyes.
- ◆ You grind your teeth while you are sleeping.
- ◆ Your jaw clicks and pops upon opening.
- ◆ Your head or scalp feels painful when you touch it.
- ◆ Your ears ache or you hear ringing.
- ◆ You have neck, shoulder or back pain.
- ◆ You feel dizzy.

If you experience any of these symptoms, your dentist can evaluate your bite to determine if it is a probable contributing factor. If so, your dentist will recommend an effective plan of treatment. □

Occlusal Disease

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as possible increases the probability that you will have young teeth at an elderly age. Much of the bridgework, the crowns, and the repairs that adults experience might be avoided if the signs of occlusal disease were recognized and addressed in the early stages.

Your doctor incorporates evaluation of the signs and symptoms of occlusal disease into a comprehensive evaluation, often through the use of study casts (models of your teeth) and occlusal (bite) analysis. Your doctor knows that looking into the future means providing you with all information about what's happening today that will impact your teeth five, ten, twenty and more years from now.



Wearing a bite splint may not look as relaxing as it feels, but wearers report dramatic relief of muscle tension and pain.

Occlusal Disease therapy commonly begins with a "bite splint." This hard acrylic appliance is fabricated to fit snugly over either your upper or lower teeth. It becomes a temporary perfect bite for you.

Wearing the bite splint is a time of discovery for both you and your doctor.

You will experience what a comfortable difference a stable, solid bite can make on your teeth, your muscles, and your jaw. It is very likely that many of the signs and symptoms of occlusal disease will diminish or even disappear. How long this takes depends on your situation and the signs and symptoms with which you start.

Following a new bite evaluation, your doctor may ask permission to reshape teeth so they move smoothly against each other and fit together in the same solid position that you felt with the bite splint.

In rare cases where the joint has been badly damaged, the bite splint may not achieve the desired results. When this occurs, advanced joint imaging and consultation with a specialist may be necessary to address the changes in the joints.

Whatever is recommended, the best dentists will be sure to spend time ensuring that you have a clear understanding of why it is prescribed, what to expect, and a clear picture of the anticipated outcome. They also will welcome your questions and concerns.

Keeping your teeth in maximum comfort, function, and esthetics for your entire lifetime depends on you. Seeing and addressing the signs and symptoms of the disease processes that work against that goal depends on what your dentist knows and sees. Together you can be an unbeatable team that keeps occlusion working for your health and not against it. Have a nice dinner. □

Vitamin C & Optimal Oral Health

by John F. Davis, DDS, Visiting Faculty

Vitamin C is essential to the formation of collagen which is the most abundant fiber contained in the connective tissues of the human body including bones, blood vessels, gingiva (gums) and skin. Healthy connective tissue serves as a "first line of defense" against bacteria invasion of our bodies.

Sufficient vitamin C is a consideration in oral health because the amounts of visible plaque (a continuously forming thin film of bacteria adhering to tooth surfaces) and decayed tooth surfaces are higher in individuals with low vitamin C.

Research also has identified vitamin C as a stimulant to the immune sys-

tem, helping to ward off the effects of bacterial infection seen with periodontal (gum) disease.

Its importance to our overall health has been demonstrated by its role in collagen formation, the immune system and as an antioxidant.

Because vitamin C is water soluble, it is rapidly eliminated from the body and needs to be replenished every day. Recommended daily allowances for vitamin C are 75 milligrams per day for women, 90 milligrams per day for men and 120 milligrams per day for smokers. Many elderly, alcohol consumers, and athletes require higher doses of vitamin C.

Dentists frequently advise their

patients with periodontal disease to take 500mg of chewable Vitamin C twice a day to improve periodontal health. Some authorities feel a time-release capsule is best, while others feel a powdered form is desirable.

If a person eats at least five fruits and vegetables each day, then it is possible that upwards of 500mg might be consumed. The following are just a few sources of vitamin C:

Red pepper (4 oz)	220mg
Green pepper (4 oz)	110mg
Fresh orange juice (8 oz)	125mg
Broccoli-chopped (1 cup)	85mg
Grapefruit juice (1 cup)	85mg
Orange (5 oz)	70mg
Cauliflower (1 cup)	55mg
Grapefruit (5 oz)	45mg.

"Soda Mouth"...a mother's lament

by Deborah E. Bush, Editor

"Coke," "Pop," "Soda," or whatever you call carbonated sugar beverages, they have harmed the teeth of many a youth. In August my 24-year-old son had a rude awakening. A routine teeth cleaning and checkup with an on-the-ball dental team turned into a discovery session that he will not easily forget. He was handed the mirror and invited to look around at the surfaces of his teeth. His gums were probed and bled.

What has this young man been doing since he left home for college and the wide, wide world? Well, for

one, he got into the habit of starting his day with a cola and finishing the day in similar fashion burning the proverbial midnight oil. Apparently, this habit is not uncommon in his age group. For many, the beverage of choice is Mountain Dew – its caffeine content is higher. He reports that among his peers, 4 to 6 cans a day are the norm.

Once fluoride became common in drinking water, dentists thought they would see a big drop in tooth decay but at the current rate of soda consumption ... I wonder.

John returned to the dentist the

next day for 5 composite fillings (and paid for them out of his own pocket). He promptly purchased a top of the line sonic toothbrush, several replacement heads, fluoride mouth rinse, and an assortment of flossing paraphernalia. Leaving no stone unturned, he kicked his soda habit!

He's coming home for the holidays ostensibly to see me but I suspect what's really on his mind is checking in for a thorough teeth cleaning and a chat with his dentist. His plane arrives at 6:30 PM and he's scheduled himself to be in the hygienist's chair at 8:00 AM the very next morning. I realize now that a mother's prayers *do* get answered. □