

*In partnership with responsible patients*

# Smiling Matters

Issue 1

## Welcome

**At Peter Walker & Associates, we feel it is important to keep our patients fully up to date with everything that is happening at the practice, and with the latest dental techniques available.**

But it is often difficult to remember to tell you everything when we see you, which is why we are sending you a copy of our new patient newsletter. We think you will find it interesting and useful, and we would welcome your feedback.

As you are probably aware, there have been a lot of changes at the practice in the past two years, including the new extension and a significant expansion of our team. We now have a staff of 21, which includes seven dentists, two hygienists and a strong support team, carefully chosen to ensure you receive the best possible care and attention from us.

Because there are so many new faces here, we will be introducing various members of the team to you in this and future newsletters. We are starting off with our principal dentist Peter Walker, together with associate dentist Olivia Odell and receptionist Laura Bown.

*We hope you enjoy this newsletter, and look forward to seeing you soon.*

## Peter Walker

**Peter qualified at Kings College in London in 1979**, and moved to Faringdon 12 years ago. He has a special interest in cosmetic work including crowns, bridges, veneers and teeth whitening, and also in occlusion therapy, which involves correcting misaligned jaw joints.

The jaw joint can cause a surprisingly long list of problems. These include waking up with a stiff or tender jaw, pain or discomfort at the side of the face by the ears, clicking and popping of the jaw joints, pain behind the eyes, headaches and neck and shoulder pain.

Occlusion therapy can make a huge difference to people suffering such symptoms – if you think it might be useful to you, please make an appointment to see Peter.



## Olivia Odell

**Olivia is our newest dentist**, and (according to Olivia) probably the hardest working! She qualified from Bristol in 2001, and tends to see new patients at the practice.



Olivia finds endodontics (root canal work) particularly satisfying, and also enjoys cosmetic work such as crowns and bridges. She is particularly good with nervous patients, offering gentle and relaxed family dental care.

In her spare time Olivia swaps her dental tools for paint brushes to create oil paintings. She also enjoys playing the piano and flute, and keeping fit by going on long country walks as well as attending the gym.

## Laura Bown

**Laura joined us on reception in July 2000.** Her career to date has focussed on customer service roles as she loves helping and meeting people, and spends her spare time dancing, going to music festivals, and socialising.

You may have noticed Laura is going through extensive dental treatment at the moment, involving the wearing of braces. This is something she now wishes she had done as a teenager, but couldn't face it at the time. But since starting work at the practice she has taken the plunge, and is already feeling much more confident about her smile. If you would like to get a patient's perspective on orthodontics (tooth straightening) Laura would be happy to share her experiences with you.



## Did You Know?

Whitening products for teeth date back to the Middle Ages. But the ancient procedures, in which the teeth would be filed down and bathed in nitric acid, quickly led to extensive tooth decay!

# filling you in on fillings

Tooth fillings seem to be a complex subject these days. Tabloid editors love to stir up a hornet's nest by suggesting that some types are unsafe, or that others don't last - you name it, they'll claim it.

We thought it would be useful for you to have an unbiased, easy to understand guide to fillings.



## Amalgam fillings

These are the standard silver-coloured fillings, and have been in use since 1833, making them the oldest dental material around apart from gold. They are made up of a mix of mercury and an alloy powder including silver, copper and tin.

The mercury content is the reason for the controversy currently surrounding them, although detailed scientific studies have so far suggested amalgam to be relatively safe.

Their main drawback is a cosmetic one - they just don't look particularly nice - but amalgam is proven to be strong and long-lasting.

## White fillings

Again, another area of controversy, with many people claiming that these composite fillings - usually made of a mix of glass-like particles, synthetic resin and a setting

ingredient - simply do not last as long. In the past this may have been true, but there are now new materials available which are potentially longer-lasting and which are proving so far to be very successful. Their big advantage is that the colour of a composite filling can be matched to that of your tooth, so no-one will notice that you have a filling. Many white fillings are only available privately - the NHS will only pay for them to be placed in certain prominent positions, such as the front teeth.

Most dentists will normally advise against having amalgam fillings removed and replaced with white fillings simply as a cosmetic measure. However patients are increasingly wondering about the advantages of white fillings, for either new or replacement fillings. If you would like to know more about the benefits of changing to white fillings, or would like more information on the process or costs, please ask us. We will be happy to tell you more.

# beating bad breath

In today's society, many of us are conscious of the need to keep our breath smelling sweet - the wide range of fresh-breath mints, sprays, strips and gum in the shops are clear evidence of this.

Yet most of these items only mask the smell, and do little if anything to treat the actual cause. What we should really be doing is seeking advice on the problem, and finding a permanent solution.

Bad breath, or halitosis, can be traced to a number of sources, but generally tends to be a result of either the food we eat or the bacteria living in our mouth, particularly on the surface of the tongue near the back.

Most of us are aware that if we eat garlic or strongly spiced food, it will affect the way our breath smells. In this instance there is little we can do other than mask the smell until it disappears.

But in the case of bacteria, we can make a lot of difference simply by following a good oral healthcare routine - scrupulous brushing (including cleaning your tongue, either with your brush or a special tongue scraper), flossing and regular visits to your dentist and hygienist.

In a few cases, bad breath is believed to be caused by a medical condition, such as sinusitis, diabetes, or problems with the digestive system.

If you think you may suffer from bad breath, don't be embarrassed to ask us about it - we are here to help. We can give your mouth a thorough check, and provide relevant advice and treatment - in some cases it can be as simple as providing you with special toothpaste or mouthwash.



## Did You Know?

Green and black tea are good for your teeth, according to research. Green tea can help combat bad breath, while black tea helps prevent tooth decay by suppressing the growth of bacteria in plaque. They can, however, cause staining.

# how would you like to change your smile?

First impressions count - and in the UK half of us make instant judgements on people we meet based on their smile.

Research carried out by leading oral health charity the British Dental Health Foundation says that over two thirds of people agree that having a good smile boosts confidence and helps their love life!

And with only one in eight of us judging people by their clothes, the BDHF is suggesting that people would be better off spending less on new outfits and more on the health of their mouth.



### So if you could change your smile, what would you do?

These days there are many options available which can solve a number of problems. **Stained teeth** can easily be remedied by a course of tooth whitening. There are DIY kits available, but many dentists do not recommend them. There are two main methods of whitening. One is carried out at the practice, in a painless procedure which takes less than an hour. The other process is similar, but you wear a tray like a gumshield with lightening gel inside it every night for a couple of weeks or so. The improvements can be dramatic.

If your teeth are **chipped, cracked, stained or have noticeable gaps between them**, a technique called bonding could provide an affordable way of improving your smile. We prepare the teeth in question with an etching solution, and then apply special composite resin materials. The resin is shaped, and then bonded into place, leaving you with a new improved smile.

Crowns, or caps, have been around for some years. They cover and protect a damaged tooth, and are extremely strong and long lasting. Crowns can be made from precious metal (such as gold), tooth-coloured porcelain with metal underneath or all porcelain.

If you are looking for a **striking and long-lasting transformation of your smile**, tooth veneers may be the answer. These are custom-made, thin shells of porcelain that are bonded to the surface of the teeth, enhancing your smile in as little as two visits. Minimal tooth preparation is needed, and they are very long lasting.

For those with **missing teeth**, there is now an excellent way of filling those gaps - dental implants. This involves implanting a small titanium screw into the jawbone where the missing tooth used to be. The screw then provides solid support for one or more new false teeth. Even denture wearers can benefit from implants, as they can provide a far better support for dentures, solving many of the issues around fit and looseness.

All of these treatments are carefully made to match your existing teeth to ensure that you are delighted with the results.

We haven't been able to fully describe all of the procedures available in this short article so if you'd like to know more, please ask us. When you next visit the surgery we can assess your teeth, and will then be able to discuss which options might be best for you.

## why your hygienist is your tooth's best friend

**Gum disease is the greatest threat to your teeth, claiming responsibility for a staggering 75% of adult tooth loss.**

**Which is why next time you visit your hygienist you really should pay attention to what they tell you, and - more importantly - FOLLOW THEIR ADVICE!**

Gum disease is caused by the bacteria in dental plaque. Bleeding gums, or gingivitis, is the first stage, and is very common.

Careful toothbrushing and flossing can keep levels of bacteria to a minimum, but it is not unusual for it to build up on your teeth, creating a hard deposit that can only be removed by a dentist or hygienist.

If left untreated, gingivitis may progress to the stage where the bone which holds your teeth in place is gradually destroyed. This is generally painless, and you will only notice when your teeth become loose.

This is why it is so vital to have regular hygienist appointments. You need to ensure that your teeth are regularly scaled and polished. Your hygienist, or in some cases your dentist, also checks your gums to see how healthy they are, and will recommend the best way to care for them. In most cases this means flossing or brushing between your teeth with a special narrow brush. We can show you the best way to carry out these fiddly tasks.

For more information on gum disease and other ways that the hygienist or dentist can help you, please ask during your next visit - we will be happy to answer any questions.



## Did You Know?

The first toothpaste was created by the Ancient Egyptians, and contained powdered oxen hooves, myrrh, pumice and burned eggshells.



# the jewel in the crown

Most people who have a crown or implant fitted take the process more or less for granted – they go in, have a mould or impression taken, and return to have it fitted.

**But have you ever thought about the work that goes on behind the scenes? How is the new tooth actually made? How do they get it to fit properly and match the colour of your own teeth so well?**

The manufacturing of an artificial tooth is usually done at a dental lab, where a mix of the latest technology and skilled craftsmanship ensures a perfect match.

The first steps take place in the dentist's surgery, when the dentist shapes the teeth to suit, then takes a mould or impression of your teeth. This impression is used by a model worker at the lab to create an accurate model of your mouth. Sophisticated 3D modelling software can enable the technicians to create the replacement tooth using precision measurements.

The foundation for the tooth is made from either porcelain or precious metal alloys, depending on which one your dentist feels is best for you.

Colour matching can be done in many different ways - sometimes dentists will do this in their surgery, other dentists may send you

directly to the lab, where photos of your teeth can be taken and viewed on a computer using high-tech colour-matching software.

A close look at your teeth shows they vary in shade, depth of colour and translucency. The lab replicates these variations by using up to 20 layers of different porcelains, or paints.

Highly sophisticated equipment and machinery is used for each tooth, including furnaces for firing the porcelain and state-of-the-art computer software. The technology is regularly updated to keep up with the very latest developments.

Looked after properly, a well-made crown or implant can last a lifetime, so it is well worth the investment.

If you would like to know more about how such work could improve your smile, please ask us next time you are in the surgery.

## questions and answers

**Q. I've heard that chewing gum can be good for your teeth. Is this true, and if so which sort of gum should I use?**

**A.** Yes, it is generally agreed these days that chewing gum is good for your teeth. This is because it encourages the production of saliva, which washes away sugars and neutralises acids, helping to prevent tooth decay. Most dentists recommend chewing gum for about 20 minutes after meals and snacks when it is not practical to clean your teeth, but emphasise it should not replace any aspect of routine dental hygiene. Sugar-free gum is generally considered to be best, but the differences between the various types are minimal and at the end of the day it depends which you prefer.



**Q. My mouth often gets really dry. Is there a reason for this, and what can I do to prevent or treat it?**

**A.** Dry mouth, or Xerostomia, is becoming increasingly common, and has a number of different causes. These can include ageing, medication, or medical conditions such as diabetes. Symptoms can be relieved by regularly sipping water, chewing sugar-free gum, or using glycerine mouthwashes or "artificial saliva", available from pharmacies. Sugary foods, alcohol and tobacco should be avoided – they can exacerbate the problem and increase tooth decay. A dry mouth can have serious consequences, as the lack of cleansing saliva can lead to tooth decay and gum disease, so you should discuss this problem with us at your next visit.

**Q. How often should I change my toothbrush?**

**A.** Many people don't change their toothbrush anywhere near often enough. Toothbrushes should always be changed before the bristles fray – or at least at the first signs of fraying. Old, frayed bristles are ineffective and can harbour bacteria. Most dentists recommend changing your brush every 2-3 months. Children may need theirs changing more often, as they tend to get frayed more quickly.

Articles contained within this newsletter are provided for information only and should not be taken as a recommendation for any specific dental treatment or procedure. For further advice contact the dental practice.

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