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Cosmetic, implant and preventive dentistry

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Merry Christmas and Happy New Year!

Hope that you have a safe and happy holiday season.

Enjoy the break and see you again in the new year!

From all of us here at CSD





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# Our New Water Ozonation System is Here

We've just upgraded our water ozonation system to provide continuous ozonated water on demand!

Previously our ozone device generated ozone gas to provide ozonated water at low concentration. Unfortunately it involved bubbling ozone gas into a bottle which was inconvenient and time consuming.

The new electrolytic device is a point of use unit that provides ozonated water to eliminate all known bacteria, fungi, algae, yeast and protozoa (including parasites and amoebae).

With the new system, we can:

- Refill dental unit water bottles to counter biofilm build up
- Ozonate water as a preprocedural mouth rinseUse as an irrigant during ultrasonic scaling
- Powerfully disinfect hands, surfaces, floors and instruments

Oxygenate drinking water to 20ppm (Normal tap water 5ppm)

With a point of use ozonated water system we are able to take advantage of the the antimicrobial and immune stimulating properties of ozone. When used as a preprocedural rinse, it will rapidly kill bacteria and other pathogenic organisms in dental plaque by rupturing their cell membranes (within several seconds). And it has no sideeffects such as unpleasant taste or tooth staining, which are characteristic of other biocides or disinfecting agents such as chlorhexidine.

Ozonated water can also be used as a sterile irrigation solution for surgery (as it helps reduce bleeding), or as an antimicrobial mouthrinse following tooth extraction. Of interest, ozonated water when used as a daily mouthrinse has been reported to accelerate healing of oral mucosal wounds, particularly when used over the first 48 hours after surgery. The

> same benefits of accelerated wound closure may be seen when used in patients with oral ulcerations from chemotherapy.

> > The greater speed of wound closure can be explained by the known positive effects of topical ozone on enhancing the local microcirculation. Known positive biological

effects of ozone include

improved oxygenation of tissues, quicker healing and accelerating of the immune response to bacteria. Accompanying these effects is an enhancement of natural antioxidant defence systems.

Ozone is also known to stimulate the production of several key cytokines including interleukin 2, 6, 8 and transforming growth factor-beta, and to the attenuate the inflammation driven by bacterial lipopolysaccharides. Recent studies have show that that ozonated water as a mouth rinse can reduce gingivitis in orthodontic patients.

As a topical agent, the use of ozonated water has an excellent safety profile as ozone dissipates quickly and is converted back to diatomic oxygen. And best of all, these units can be installed in the home to receive all the same benefits! Ask us for more information about the home systems.

Ozone in water can kill bacteria and other pathogenic microorganisms by rapidly rupturing their cell membranes (within several seconds). The same effects occur when dental plaque is exposed to water has no side-effects such as unpleasant taste or tooth staining, which are characteristic of other biocides or disinfecting agents.

> Professor Laurence Walsh, University of Queensland





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Woodwind and brass players beware—the same horn that creates melodic tones might also be harboring a darker note —bacteria and fungi that risk a musician's health.

In a recent study, researchers worked with a small-town high school band to examine the microbial flora in woodwind and brass instruments and their potential to transmit diseases.

They cultured 13 previously played instruments, including two clarinets, two oboes, two saxophones, two mellophones, two trombones, two trumpets and one cornet. Six instruments had been played within a week of testing and the other seven had not been played for more than one month.

Scientists looked for germs in a total of 117 distinct testing sites, including mouthpieces and reeds, internal chambers and cases of the instruments and found more than 400 bacteria, 19 yeasts and 58 molds that could risk a musician's health.

"Parents may not realize that the mold in their child's instrument could contribute

to the development of asthma," said Dr. R. Thomas Glass, lead author of the study in the March/April issue of General Dentistry. He recommends musicians use cleaning cloths and solutions made for musical instruments and not to share their instruments with others.

Researchers said harmful contaminants were found in instruments whether they were played recently or not. Though the reeds or mouthpieces were consistently more contaminated, the midpoints and bells had enough microorganisms to expose the musicians to toxins and produce disease. Even instrument cases were contaminated.

Researchers say the results indicate that woodwind instruments were more heavily contaminated than brass instruments; reeds were significantly more contaminated that mouthpieces and clarinets were more contaminated than any other instruments.

## **Dental Trauma in** Children

These consist of injuries to the teeth, gums and bone of the jaw. Most often this is a broken or displaced tooth.

Children just starting to walk are most prone to injury ie. 1.5 to 3.5 years of age. 30-50% of children experience dental injury with boys twice as much as girls.

With trauma, teeth may be chipped, broken, loose, out of place or knocked out. The type of treatment with vary with the type of tooth and the age of the patient but here are some guidelines.

### **Baby Teeth**

Normally it is not necessary to repair chipped teeth but broken teeth can be easily repaired with some treatment of the nerve. It is important the the tooth pulp is sealed within a day.

A loose tooth is usually left to recover on its own while observing a soft diet. A displaced baby tooth may need to be removed to prevent damage to the developing permanent tooth underneath it. A knocked out baby tooth however should NEVER be replaced. It is not uncommon for the tooth to do dark but no treatment is necessary unless there is pain or swelling. Treatment in these cases is extraction.

## More Dental Visits Recommended for Older Women

The battle against plaque, tooth decay and gum disease might be more difficult for women after menopause, according to researchers at Case Western Reserve University School of **Dental Medicine and the Cleveland Clinic.** 

Scientists studied the dental status of 28 postmenopausal women with normal bones and 28 who were taking bisphosphonates therapies for osteoporosis for two years or longer. The women, between the ages of 51 and 80, received CT scans of their jaws and a complete periodontal check for dental plaque, bleeding and bone loss. Participants followed oral ADA guidelines for brushing, flossing and visiting the dentist twice a year.

Researchers found that both groups had high levels of dental plaque that could raise the risk of bone loss in the jawbone or reverse bone mass gained through medication therapies. After menopause, women at risk for osteoporosis are also at risk for gum disease (periodontal disease), which affects bone that anchors the teeth. Over time, dental plaque that accumulates on teeth can lead to periodontal disease.

Patients with periodontal disease should be seen three to four times a year and postmenopausal women who find their dental hygiene difficult to manage would be best served with the same regime.

# **Medicare EPC Program**

We have been a provider of the Medicare Enhanced Primary Care scheme since it was introduced in 2007. It provides dental treatment for the chronically ill who are eligible under a referral from their GP. The program has been a bane for the government as it has spent far more on the program than was budgeted. It provides up to \$4250 of dental treatment rebates over a 2 year period. The rumours are that the program will be shut down at the end of this year.

For patients with incomplete treatment plans, it is advisable to complete treatment while the program is still in place. I will notify all patients once the program has ceased.

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## **Dry Mouth Syndrome**

In withdrawing from the U.S. Open this year, professional tennis star Venus Williams shed some light on a personal struggle with a condition that frustrates many people.

Dry mouth, also called xerostomia, results from an inadequate flow of saliva. It can be a symptom of several conditions and disorders, including Sjogren's syndrome, an autoimmune disorder from which Ms. Williams and more than 3 million Americans suffer.

Dry mouth is common in older adults and can also be caused by certain medications. It's a problem for so many because of the important role that saliva plays in bodily functions. Adequate salivary flow lubricates oral tissues, cleanses the mouth and begins the digestive process as foods are chewed. When salivary flow is reduced, harmful organisms grow in the mouth.

"Each day, a healthy adult normally produces around one-and-a-half liters of saliva, making it easier to talk, swallow, taste, digest food and perform other important functions that often go unnoticed," said Dr. Fares Elias, immediate past president of the Academy of General Dentistry. "Those not producing adequate saliva may experience some common symptoms of dry mouth."

For some people, having the sensation of a dry mouth is simply a nuisance. For others, the condition causes serious health problems. Left untreated, dry mouth may

lead to oral yeast infection, a burning sensation, rampant tooth decay, bad breath and other oral health problems. Chronic dry mouth can make swallowing difficult.

Dry mouth can result from radiation treatment for head and neck cancers, salivary gland disease, emotional stress, hormonal alterations associated with pregnancy and menopause, and autoimmune diseases such as diabetes and Sjogren's syndrome, a chronic disorder in which white blood cells target the body's moisture-producing glands.

Prescription and over-the-counter medications are the most common causes of dry mouth. These include antihistamines, decongestants, painkillers, diuretics, antihypertensives and antidepressants. If you think a medication is causing dry mouth, tell your physician. In some cases, a different kind of prescription can provide some relief.

Another way to get relief is to use artificial saliva such as Dry Mouth Gel, Other remedies include sugar-free gum; frequent sips of water; alcohol-free oral rinses; and restricted intake of sugar, caffeine, alcohol and carbonated beverages. Also avoid citrus fruits and acidic juices and anything crunchy to avoid injury.



Hope that you will all have a great christmas break. Don't forget that sweets are a 'sometimes' food and drink water after you have them.

- Our office will be closed from Dec 24th and reopen on Jan 9th.
- Jason and Nadine attended the Australian Osseointegration Society Implant conference in Adelaide in Nov to learn the latest advancements in implant technology
- Natasha attended a workshop for the placement of stainless steel crowns in compromised dentitions
- Renee bought a house near the Blue Mountains and surprisingly finds public transport relaxing!

## With Heartfelt Thanks For Your Referrals

Michael D, Michael N, Beverley G, Anastasia C, Jeanette H, Gregory M, Shane H, Frederico R, Vanessa L, Rochelle S, Andrew P, Matt R, Bejamin J, Eloise C, Sandra H, Adrian M, Haydn A, Sam W, Melanie L, Peter O.



Renee's house with swimming pool