"The tooth’s response to bleaching is individualistic and can only be determined by starting treatment."

Interview with Prof. Van B. Haywood, USA

Prof. Haywood: Tooth sensitivity is the single most significant deterrent to the very popular dental bleaching. How well do we understand this condition?

Sensitivity may be treated actively or passively, but at-home treatment is most desirable. Passive treatment involves reducing the frequency of application or the duration of treatment, or interrupting continuous application. Active treatment involves using a material with potassium nitrate instead of bleaching material in the tray for 10 to 50 minutes when needed, and pre-brushing with potassium nitrate toothpaste for two weeks before bleaching is initiated. Wearing the tray alone or with potassium nitrate by interfering with the transmission of the stimuli, thus de-sensitising the nerve and reducing, but not resolving the problem. Other treatments will be required before or instead of bleaching.

Claudia Salwiczek: Tooth sensitivity is the single most significant deterrent to the very popular dental bleaching. How well do we understand this condition?

Sensitivity may be treated actively or passively, but at-home treatment is most desirable. Passive treatment involves reducing the frequency of application or the duration of treatment, or interrupting continuous application. Active treatment involves using a material with potassium nitrate instead of bleaching material in the tray for 10 to 50 minutes when needed, and pre-brushing with potassium nitrate toothpaste for two weeks before bleaching is initiated. Wearing the tray alone or with potassium nitrate

What is your recommendation to dentists performing bleaching procedures?

The biggest challenge in aesthetic dentistry is to maintain the ethics of the dental profession, and to place patient care ahead of financial gain. Patients should be presented with all options for treatment, including the cost/benefit ratio and the risk/benefit ratio, based on research where possible. Conservative treatment that preserves enamel and tooth structure is always preferred. My credo, which has worked well for me and my patients in the past, is: "Do unto others as you would have them do unto you."

Thank you very much for the interview.