It all starts here. Healthy Mouth. Healthy Body.

World Oral Health Day 2016 celebrated across Dubai, UAE

An interview with Dr. Aisha Sultan - President Emirates Dental Society

By Dental Tribune MEA/CAPPmea

Dubai/UAE: On 20th of March, the world celebrated World Oral Health Day across the globe with an aim to put the global spotlight on the importance of maintaining good oral health. The awareness campaign is an initiative of the FDI World Dental Federation.

Dubai joined the celebrations spearheaded by the Emirates Dental Society, Emirates Medical Association in cooperation with Philips Sonicare, Baraha Hospital, Department of Tourism and Commerce Marketing and the Ministry of Health.

The organizing partners celebrated the World Oral Health Day (WOHD) at various locations in Dubai, UAE. The event took place during the course of an entire week between 20th of March and 26th of March 2016. The awareness was based on the initiative of the FDI World Oral Health Day.

By Philips

DUBAI, UAE: Royal Philips has united with FDI World Dental Federation to celebrate World Oral Health Day (WOHD), March 2016, and raise awareness of the importance of good oral health and its impact on overall health and wellbeing. Together we will support the 2016 campaign ‘It all starts here. Healthy mouth. Healthy body’. The main focus for Dubai during this special week is Dubai focusing on an overall healthy society.

In a world where 90% of the population will suffer from a condition in the mouth, teeth or gums during their lifetime, World Oral Health Day offers an opportunity to remind and engage patients about the importance of oral health awareness, education and motivation for every person that joins us here today. After the educational part, the visitors will move on to the next station which is the practical part, in order to implement the oral hygiene. We will be explaining how to use the mouth wash and electronic brushes, the visitors will further have the opportunity to practice new brushing techniques explained by professional staff from Philip Sonicare who were also present.

For the ‘Healthy body’ part, there is a physical section where the physiotherapist specialists will educate patients on a proper, healthy body position. Next, there is a clinical examination, just outside of the building in our mobile dental clinic where each visitor is examined and will receive a form with the recommendations on the follow up treatment (cleaning, filling, etc.)

Another location of the activation will be at the famous Jumeirah Kite Beach on Thursday 24th of March. What will exactly happen there?

On Thursday we will relocate to celebrate the World Oral Health Day at Jumeirah Kite Beach. We expect to have a large audience, especially families with children. The children will have the same type of examination and education as the previous location. In addition, free dental screenings, checkups, brushings stations, giveaways and professional consultations on visitor’s teeth will be performed in order to strengthen the importance of Oral Health.

Thank you Dr. Aisha, we wish you and team good luck in the awareness campaign.

Build healthy habits for life with Philips this World Oral Health Day

By Philips

Dubai, UAE: Royal Philips has united with FDI World Dental Federation to celebrate World Oral Health Day (WOHD), March 2016, and raise awareness of the importance of good oral health and its impact on overall health and wellbeing. Together we will support the 2016 campaign ‘It all starts here. Healthy mouth. Healthy body’.

Through meaningful innovation, Philips launched a connected children’s toothbrush and app, designed to reinforce and help build healthy oral hygiene habits from the outset. With a comprehensive range of oral healthcare solutions, Philips continues to support patients’ oral care needs throughout their lifetime to encourage good oral hygiene routines to help prevent long-term health issues.

An example of a Local WOHD activation Philips Sonicare, in collaboration with the Emirates Dental Association, is implementing free dental screenings and checkups on Kite Beach on March 24. Brushing Stations, prize give aways and professional consultation on consumer’s teeth will help strengthen the importance of Oral Health. They’ll also be school visits in Jordan and an engaging exhibition booths in major malls in Lebanon. Social activations can be found on the Philips Oral Health Care Facebook page, including ‘making the pledge’ to better oral health care for a change to win Sonicare prizes.

Our efforts don’t stop there and this WOHD we’re making sure people of all ages are motivated to take care of their teeth and mouths. Providing top tips and guidance on how to improve their daily regime, Philips wants patients to make simple changes that lead to broader health benefits that go beyond a healthy smile.

For more information about the Philips Oral Healthcare and World Oral Health Day please visit philips.com/wohd or become a fan on Philips Oral Healthcare Middle East

Additional information about FDI and World Oral Health Day can be found here: http://www.worldoralhealthday.org/
Ultimate clean. Superior results.

Philips Sonicare DiamondClean removes 7x more plaque than a manual brush and eliminates surface stains to whiten smiles in just one week. And with accessories like an innovative glass charger for home use and a portable charging case, it’s the jewel of our collection for good reason.
Mirror mirror on the wall who has the whitest teeth of all...

By Jordan

The American Dental Association asked consumers what would they most like to improve about their teeth’s appearance. This is in line with the research we have conducted, that shows a clear trend that more consumers are concerned with their teeth’s appearance.

The basic need for clean teeth has evolved into clean and white teeth. Supporting the macro health and beauty trends, consumers want to live better lives that also last long.

As we age our teeth naturally become yellower. The outer layer of our enamel gradually breaks down, exposing the under-layer, called dentin, which is naturally yellower than enamel. We can take care of our enamel by brushing with a soft toothbrush, not brushing too hard, and using a toothpaste that is also gentle and kind to our enamel.

Consumers are increasingly aware of stains that build up on their teeth by their diet. How much diet influences teeth stains, differs from market to market, but there is a general awareness around some of the main products that contribute to daily stain build-up.

The trend in Norway is that more and more patients are asking their dentists for help when it comes to whitening. Whitening treatments at the dentist are by far the best choice. Not only are they safer, they are also take-home to the patient’s mouth. Prior to treatment, a check-up will ensure there are no undetected cavities if there are, these should be filled prior to whitening applications. The treatments are, as a rule, more effective and quicker. It is important that the patients are informed that these will not work on crowns, fillings, caps or veneers. To ensure a good and lasting result it is also important to help them find the most effective routine (for maintaining their new white smile): Help your patients keep daily surface stains, sometimes referred to as extrinsic stains, in check.

Most dentists already recommend a soft toothbrush and are positive to gentle formulated whitening toothpastes (most commercial whitening toothpastes contain some level of silica to lift plaque and tartar during daily brushing sessions). There are also several toothbrushes that have specialized bristles that effectively lift stains.

The number one recommendation from dentists is to encourage their patients to floss once a day. Flossing before brushing will remove food particles and plaque between the teeth (where 30% of cavities start) and leave this space clean and receptive to fluoride treatment from the toothpaste. Using a straw could also be recommended if the patient has a high intake of caffeinated drinks like coffee, tea, juices or carbonated drinks. Tobacco intake is also one of the worst offenders when it comes to staining teeth. Patients might experience some sensitivity post treatment, so it is also important to advise them on what to do should this happens to them.

Deeper stains, or intrinsic stains, are more difficult to remove. These can be caused by a past injury, use of certain medications and antibiotics and grey or dull teeth can also be hereditary. Teeth bleaching, using either a hydrogen or carbonate peroxide will help break up these deeper stains into smaller, less colored pieces that will make the teeth appear brighter and whiter.

Consumers try whitening products because they want white teeth². Many consumers are skeptical to the working power of whitening products. However, they buy them anyway as they feel they have nothing to lose. A whitening toothpaste gives them all the other benefits they need, for example, cavity protection and fresh breath, and on top of that they also get any whitening advantages that they might have missed out on if they choose a product without whitening claims. 27% of all toothpastes launches globally are whitening toothpastes. In comparison only 5% of toothbrush launches are¹. These numbers are expected to keep growing, in line with an escalating trend of consumers wanting nice looking white teeth.

References
1. www.ADA.org
2. Nordental, Norway and Sweden 2014
3. Mintel rapport, 2014


By DTI

GENEVA, Switzerland: Every World Oral Health Day (WOHD), which is celebrated annually on 20 March around the world, is held under a new and specific theme. This year’s WOHD will focus on raising awareness of the link between good oral health and overall well-being, with the slogan “It all starts here. Healthy mouth. Healthy body.”

Oral disease affects 3.9 billion people worldwide, with between 60 per cent and 90 per cent of children globally suffering from tooth decay. Yet, poor oral health goes far beyond the initial implications of dental disease and tooth decay. It has been associated with a number of health conditions, such as heart disease, pancreatic cancer, pneumonia and lung disease. In a recent study, 40 per cent of people with serious periodontal disease also reported suffering from an additional chronic condition.

Despite these links, people are unaware of the long lasting and widespread effects of poor oral health. Therefore, WOHD 2016 will shed light on the importance of good oral health in a simple and engaging way, encouraging understanding, that good oral health is fundamentally intertwined with overall well-being.

As a result of WOHD activities, the World Oral Health Day website, www.worldoralhealthday.org, focuses on communicating that prevention, early detection and treatment are key to ensuring the best outcomes and reducing oral health-related complications.

A series of dynamic and engaging material, including a global video, trend of consumer media strategy and social media content have been designed to inspire people across the world to participate in the WOHD campaign and improve their oral health regime.

Dental professionals, companies and institutions that would like to be involved in this year’s WOHD activities are invited to e-mail WOHD@fdiworldental.org for a full campaign guide, which is available in English, French and Spanish and includes materials for download, such as poster visuals, social meme designs and information on the WOHD video and smartphone game.


By Jordan

By DTI

The slogan “It all starts here. Healthy mouth. Healthy body.”

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Success with Air-Polishing

Christina Chatfield explains how she has embraced air-polishing for both stain and biofilm removal

By Christina Chatfield, UK

When I opened Dental Health Spa in 2007, I wanted to market something different to the Brighton consumer that other dental practices were not offering, to ensure my hygiene patients, so I invested in two air-polishing units. Was it new? No, it had been around for 30 years, so just about my entire clinical life. In fact, way back in 1999, I had one in my practice, where I had a nurse all the time, but I knew nothing about it other than it tasted foul, was messy and a nightmare to maintain (or so I had heard). No one had shown me how to use it. I had never been taught anything about it during my training at dental school — my boss did not tell me, or indicate to me why I had one. Yet air-polishing is the very thing that I have used to build my practice over the last seven years. All technology evolves, from twin tubs to automatic washing machines, manual toothbrushes to the all singing, oscillating, pulsating and sonic technology we have today. Things improve because research shows us what we want or need more. It’s about comfort, aesthetics, shows us what we want or need.

Move forward 30 years with EMS and we can see how the powders have evolved, enhancing comfort, efficacy, ease of use and more importantly, removal of biofilm.

Some of my patients say their teeth are sensitive. The sensitivity they commonly refer to is from ultrasonic treatment. I am not talking about the patient who needs nonsurgical root surface debridement. I am referring to our recall and maintenance patients or people with lots of stain. So, initially we thought of air-polishers just for stain removal. With the latest family of powders, they move away from the larger grain size of classic sodium bicarbonate (at 66 microns) to smaller particle erythritol (at 44 microns). The softer powder meant that it was more pleasant experience for both Hamish and myself. It is easy to use and the softer powder means that it was not traumatic to any of the soft tissues both supra- and sub-gingivally. A great all round mouth detox, and biofilm removal.

And for the whole mouth, the Plus powder, with erythritol, is great both sub- and supra-gingivally. This extra fine particle size of only 14 microns, makes it great to use on all the soft tissues, including the tongue and in pockets, disrupting and killing biofilm and removing stain. This can be used on both dentine and composites too. So, one powder that serves the pudding.

Case studies - The proof is in the pudding

1. Hamish (Figures 1-3): worn lower anterior, dentine exposed, heavily restored and crowns posterior upper and lower dentition, peri- good, no calculus, lots of stain.

How would you normally treat him? Prior to Air-Flow Powder Plus, lots of scraping and abrasive polishing paste. A nightmare to treat and how long would it take?

This took 20 minutes, a much more pleasant experience for both Hamish and myself. It is easy to use and the softer powder meant that it was not traumatic to any of the soft tissues both supra- and sub-gingivally. A great all round mouth detox, tongue clean and stain removal. First thing I say to my clients as I sit them up before they even look is ‘How does it feel?’ That feeling of clean, sells the Air-Flow before they have even seen the results, and then it’s the wow factor!

For me, it’s down to two powders firstly. Comfort, the new supra-gingival sodium bicarbonate powder from EMS. It has the same efficiency as the previous Classic powder, but more comfortable on the soft tissues with a smaller grain size (40 microns) for the removal of supragingival plaque and heavy extrinsic staining with a fresh lemon taste.

And for the whole mouth, the Plus powder, with erythritol, is great both sub- and supra-gingivally. This extra fine particle size of only 14 microns, makes it great to use on all the soft tissues, including the tongue and in pockets, disrupting and killing biofilm and removing stain. This can be used on both dentine and composites too. So, one powder that serves the pudding.

2. Ben (Figures 6+7) he continued to lose attachment and mobility despite ongoing periodontal treatment. He is an unresponsive, chronic, generalised, severe periodontitis case. He has previously seen a periodontist, had been treated non-surgically, but was reluctant to have any teeth taken out. Ben’s contributing factors are his stress levels, his bruxism, oral hygiene due to poor access, and his tolerance to maintenance therapy. He is an ex-smoker, having stopped six years ago. I took Ben to King’s as part of my diploma in periodontology. He had five molar extractions and a further course on non-surgical intervention more than 24 hours under local anaesthetic (LA) and combined antibiotic therapy I treated Ben in practice with Perio-Flow/Air-Flow, purely for biofilm management. He was assessed at eight weeks and surgical interven- tion was decided for the upper left quadrant and a Michigan splint to replace his existing soft splint.

At nine months post-treatment, Ben’s tolerance would still be an issue. He is now treated with Air-Flow sub- and supra-gingival and his pockets remain below 4mm. My anxiety levels used to rise when treating Ben (as did his). He is now on a three monthly maintenance programme, and Air-Flow is our treatment of choice. It is quick, 100% effective and comfortable.

Market your product

Once you have a great product, you need to keep up-to-date and, like anything else, you need to market it. I use radio advertising to market air-polishing and flyers, which I am about to update and introduce Air-Flow as our premium service. We are launching a Spa Plan for both our dental and our hygiene only clients and will be offering this premium service to our Spa Plan members. I bought the Air-Flow Master Pesion, having listened to the lectures at Europerio 7, mainly for my peri- and implant patients. I now have two additional hygienists working alongside me. We have the Air-Flow Master Pesion in one of the surgeries, which means I now need another because we all see the benefits and it is key for developing my Spa Plan client database. I have additional mar- keting support from Dental Beauty TV that means my website is being updated with fantastic video clips, which in turn improves the Google search engine, and these can also be sent out as a download in newslet- ters. Hands-on courses are essential to understand how in practical terms to both use and maintain Air-Flow and Perio-Flow. Sharing experiences with other colleagues will help you develop skills and ideas as to how to market them and up sell to your ex- isting clients.

Christina Chatfield

Christina is a clinical director and hygienist at Dental Health Spa in Brighton. She qualified as a hygienist in Dundee in 1982.
Providing thorough oral hygiene instructions in a clinical setting

By Theodora Little, UK

"iTOP" stands for "individually trained oral prophylaxis". You may argue that hygienists deliver this to their patients all the time, right? Unfortunately, with the time constraints placed upon hygienists in the UK, with 30- or 20-minute appointments and many without a nurse, the burning question is, how are we supposed to give patients the essential care, as well as effectively provide thorough oral hygiene instructions?

We mention time and time again that we strive for prevention and that this is key, but unfortunately all there is time for is a scale and polish with a little oral hygiene instruction. We are thus placed in a vicious circle of patients returning for each appointment with the same oral hygiene as before. Habits remain unchanged. At Curaden Dental Clinic, my hygiene appointments last a minimum of 1 hour. Curaden is a Swiss company, so this is something of the norm for it. The company takes great pride in offering high-quality products and services to patients, which is also why we recommend CURAPROX products. It is not just about their vibrant colours, which initially attract attention, naturally, there is more to the products than meets the eye. CURAPROX uses CUREN filaments instead of nylon, and their manual toothbrush contains 5,460 filaments—approximately 4,500 more than the average manual toothbrush. All of this is included in iTOP, since they only use the best in their training for dental professionals.

I suppose many will say I am lucky to be able to offer hour appointments, but as a practice we want the best for our patients. Our practice focus is prevention, and it is necessary to give time to our patients to achieve this. On occasion, the whole head is used for iTOP training only, with my main emphasis on educating the patient, starting with the basics. I will discuss products in depth with the patient, giving him or her the full knowledge to understand the benefits of these. I will also brush for the patient, not just a few teeth but all four quadrants, so he or she can feel exactly how it is supposed to feel in each area. I will of course then ask the patient to demonstrate toothbrushing to me afterwards. Usually, I will brush my teeth at the same time, as we can also learn from watching others carrying out the same task (and the patient will feel less self-conscious). With floss and interdental brushes, I will discuss the advantages and disadvantages, and how to gain the most benefit from them.

You may question why you need iTOP training, since surely you learnt all of these skills at university? You would think that in training to be a hygienist and therapist, the most basic training given would include correct and effective brushing of teeth. I am somewhat ashamed to say that not once during my time at university did we have intra-oral demonstrations with a manual, electric, sonic or any other toothbrush. Certainly, we had a lecture on the different types of toothbrushing techniques used in the past and the techniques we should use now, and were then told verbally how to use these techniques. We also received slide show lectures from company representatives who left us some samples, but did anyone actually teach me how to brush effectively? How do you really know until you feel? You’re just supposed to know, right? Who taught me? My parents? And who taught them? Is it really expected that we should know this basic oral hygiene care? Is it just common knowledge? I think not, as I treat many patients young and old and they still do not know how to brush correctly. I was trained as a hygienist and therapist and I did not know, nor was I shown at university, until I completed iTOP courses.

I have now completed my iTOP beginner and advanced courses and will hopefully attend the teachers’ seminars later this year. Going through this programme, I started to realise that correct, effective and thorough toothbrushing is, as in any art, and it should not be dismissed so easily. It is also something that should not be rushed; great care and time do need to be taken to change a patient’s habits. Of course, many may argue that patients will not want to spend x amount to receive oral hygiene instructions and that one cannot teach an old dog new tricks. I agree to an extent, however, once one has gained a patient’s trust and he or she understands the value of the service, the patient will be more than happy to accept. We all understand how important it is to communicate well with our patients, and this combined with sufficient working time, allowing for iTOP, is one of the greatest factors. Not only am I my patients satisfied, happy and grateful, they are also shocked that they have never had training on how to brush properly. As a hygienist and therapist, I too gain enormous job satisfaction and can honestly say I love what I do.

I would encourage my fellow dental colleagues not to disregard the importance of being taught how to brush correctly until you have had iTOP training. It opened my eyes and made me feel the difference, and now I can pass my oral hygiene knowledge on to my patients, because I believe my service should include more than just cleaning their teeth for them.