Welcome to our first newsletter for 2011! You’re invited to share our resolution of making this the healthiest year ever, from both a dental and an overall health perspective.

We’d like to reinforce the importance of good oral hygiene and regular dental visits for your optimum dental health. An excellent preventive measure to avoid serious dental problems is to maintain a regular checkup schedule, which will detect any problems early, before they become big, expensive issues.

If you haven’t already booked your next checkup, please start the new year on a healthy note by calling for a dental appointment now.

We look forward to seeing you again soon!

Edward J. Zuckerberg
Dr. Edward J. Zuckerberg

For example, you may feel that your breath is not as fresh as you’d like it to be, and you have questions on which is the most effective mouthwash, and why. We can explain how to evaluate mouthwashes based on pH, alcohol content and therapeutic effect, to help you make your most educated choice.

Regarding choices, you know you need to brush your teeth twice a day, but is there one toothbrush that’s better than the rest? We will look at a variety of different factors before recommending the one that’s right for you. Whether it’s a manual toothbrush or an electric one, we’ll include the health of your gums, your dexterity, and even the maintenance expense of replacing the toothbrush or toothbrush head in our evaluation before making our suggestions.

Tooth whitening is a subject patients often have a lot of questions on. Ask us to give you the facts on different tooth whitening procedures, and find out more about the many claims regarding tooth whitening toothpastes, mouthwashes, and the differences between professional tooth whitening and drugstore solutions.

Today’s dentistry has the means to ensuring good oral health and the most attractive smile possible. And we’re happy to give you the information and direction you need in order to make the right choices for you and your family.
DRUGS, DRY MOUTH AND DENTAL DECAY

Medications can often solve one problem, but then lead to another. As we see in dentistry, one of the common side effects of many drugs, including antidepressants, antihistamines and allergy medications, is dry mouth. By reducing saliva production, dry mouth can leave you susceptible to cavities, excess plaque, fungal infections in the mouth, and bad breath.

Signs of dry mouth can include: saliva that seems thick or stringy; sores or split skin at the corners of your mouth; bad breath; difficulty speaking or swallowing; a burning or tingling sensation on your tongue; change in your sense of taste; increased plaque, tooth decay and periodontal (gum) disease.

Most of us take saliva for granted, but it is actually an important natural defense system in the mouth. It protects the teeth by washing away sugars and not allowing bacteria to stick on the teeth long enough to promote the development of cavities.

Some tips to help prevent dental decay that stems from dry mouth include:

- Establishing a consistent, daily flossing and brushing routine.
- Using a mouthwash specially formulated for dry-mouth sufferers.
- Chewing sugarless gum, to help stimulate saliva production.
- Drinking more water, and avoiding coffee, tea and other caffeinated drinks, in addition to alcohol, all of which can dry out your mouth.
- Ensuring a frequent schedule of professional dental cleanings.

Please keep us updated on the medications you are on. If a lack of saliva is interfering with your oral health and your enjoyment of food, make sure you talk to us, and to your doctor.

TOOTHACHE TIPS

A toothache can be a symptom of a deeper problem, which is why one should never be ignored. Here are a few tips to help provide you with some relief for before you arrive at the dentist:

- Rinse your mouth out with warm salt water.
- Floss teeth to dislodge any trapped food particles.
- Take aspirin, ibuprofen or acetaminophen to relieve the pain, but do not place an aspirin directly on the affected area.
- Use a cold compress on the outside of your cheek to help relieve any pain or swelling. Never use heat as heat incubates and promotes bacterial growth.

Now, here's a riddle: When is a toothache not a toothache? The answer is, when it's sinusitis.

Sinusitis, the inflammation of one or more sinuses due to a bacterial infection or sinus congestion from a cold, flu or allergy, can sometimes have the same symptoms as a toothache. As the roots of the upper teeth lie very close to the floor of the maxillary sinuses (the sinuses located between the eye sockets and the upper jaw), any inflammation of these sinuses when a cold, flu or allergy attack can feel like a toothache.

If you are unsure as to the cause of your toothache, please make a dental appointment to have it evaluated, to ensure you receive the proper treatment.
MOUTH SORES. Canker sores and cold sores are common, annoying mouth irritations that are often confused with one another.

The first sign of a cold sore is usually a tingling sensation around the mouth, followed by painful, fluid-filled blisters on the lips and around the mouth. The blisters typically burst and scab over, usually healing in about a week.

Canker sores appear inside the mouth, presenting as small ulcers with white or gray bases and red borders. A bite or burn inside your mouth can trigger a canker sore, as can certain foods.

Talk to us about the best ways to soothe your mouth sores, and have us check them out if they don’t clear up after a week.

BURNED TONGUE/ BURNED PALATE. The delicate tissues on your tongue or palate can burn easily from too-hot food or drink in your mouth. In these cases, the first thing you’ll want to do is cool the burned area immediately, to not only soothe the burn, but also to make sure the heat loses its power to damage the surrounding cells. The quickest and most effective way to do this is to hold cold water in your mouth, or suck on an ice-cube.

Once the initial burn subsides, allow your injury to heal for a few days by avoiding spicy foods, acidic foods like tomatoes and citrus fruits, irritants like vinegar, and sharp, salty foods like chips.

KNOCKED-OUT TOOTH. Whether it’s a sports injury, a slip and fall, or perhaps a confrontation with a boxing wannabe, you or someone in your company may suffer the bad luck of having a permanent tooth knocked out or loose.

If it’s knocked out, the first thing to do is find your tooth and, holding it by the crown, gently rinse off the root of the tooth with clean water. Do not scrub it or remove any attached tissue fragments — if reconnected immediately, there’s a chance the torn periodontal ligaments can reattach to the gums. Carefully place the tooth back in its socket, and bite down gently on a soft cloth or moistened teabag to keep it in place. If the knocked-out tooth, however, belongs to a child or if the patient is not able to keep the tooth safely in his or her mouth, put the tooth in a cup of milk.

If a tooth is only knocked loose, the immediate procedure is very similar: simply guide the tooth back into its proper place with your finger and bite down gently.

In all these instances, call our office immediately, or get to an emergency dental clinic within 30 minutes of the incident, in order to have the best chance of saving the tooth.

Please don’t hesitate to call our office for advice on all your dental questions.
You’ve probably heard us talk about the “mouth-body connection” and how periodontal (gum) disease has been linked to heart disease, stroke and diabetes, in addition to pregnant women’s chances of giving birth to pre-term, low-weight babies. Did you know, however, about the correlation between gum disease and rheumatoid arthritis, kidney disease, and even certain cancers?

While rheumatoid arthritis (RA) and gum disease are both systemic inflammatory diseases, it is interesting to note that patients with RA are eight times more likely to suffer from gum disease than those without RA.

Also important is the correlation between gum disease and kidney disease. We know that gum disease is a leading cause of tooth loss in adults, so it’s noteworthy to learn that toothless adults are more likely to have chronic kidney disease than adults with all their teeth.

Men with tooth loss and a history of gum disease are reported to have an increased risk of developing certain cancers. While more research continues to be conducted, associations have been noted between gum disease and kidney, pancreatic and haematologial cancers, although gum disease may just be a marker of a susceptible immune system. Severe gum disease has also been documented as a risk factor for head and neck squamous cell carcinoma.

Let’s talk about your periodontal health, and we’ll work to ensure your healthy body starts with a healthy mouth!

The common toothpick, usually made from wood, is primarily used to remove food stuck in-between teeth.

Most wooden toothpicks in the United States come from birch trees in Maine, where the tree trunks are sliced into thin sheets and then cut and milled into individual toothpicks. While toothpicks work well to remove food trapped between teeth, they should be used only when dental floss is not readily available, and certainly not as an everyday replacement for floss.

Dentists can often tell if a patient is a habitual toothpick user by the telltale toothpick marks in his or her mouth. Overzealous toothpick users can cause serious problems in the mouth, including lacerated gums, damage to tooth enamel, chipping or breakage of dental veneers or bonding, and even worn tooth roots, especially where the gums have pulled away from the teeth to leave the root surfaces exposed.

While toothpicks can be a good occasional solution to cleaning teeth in a pinch, we would prefer to show you the proper flossing technique and have you develop a habit of flossing — instead of picking — on a daily basis.


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Our Services Include:
• General Dentistry • Cosmetic Dentistry
• Emergency Dental Care • Invisalign® Braces
• Bad Breath Advice & Treatment
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• Bonding & Veneers • Crowns & Bridges

Office Hours:
Mon.: 8 a.m. - 7 p.m.
Tues., Wed.: 8 a.m. - 5 p.m.
Thurs.: 1 p.m. - 7:30 p.m.
Sat.: 8 a.m. - 2 p.m.

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