



How to Stop Cavities and Prevent Gum Disease in Your Mouth

Plaque and Plaque Control Information

- Q.** What is plaque?
A. Plaque is an invisible sticky film of bacteria (microorganisms on the teeth and gingiva (gums) which can't be removed by rinsing with water or mouthwash.
- Q.** How does plaque form?
A. Saliva coats the tooth surface with a thick film and immediately bacteria (germs) start growing in the film.
- Q.** How fast does plaque form?
A. Within a few hours the bacterial plaque has coated the entire mouth, both teeth and gums.
- Q.** What does plaque do?
A. Plaque acts like a blotter and takes up sugar from the food you eat. The bacteria feed on this sugar and form acid which causes your teeth to decay.
- Q.** Why is plaque harmful?
A. Plaque is harmful because the acid formed by the bacteria eating the sugar causes your teeth to decay.
- Q.** What is the difference between brushing the teeth and cleansing the mouth?
A. Brushing the teeth only removes food particles or loose debris (gunk), while cleansing the mouth means removing plaque from the teeth and gums.
- Q.** What is plaque control?
A. Plaque control is the total removal of plaque once every 24 hours. Thus the patient controls decay and gum disease themselves.
- Q.** Is plaque control easy??
A. Definitely NOT! To achieve and maintain a healthy mouth takes much self-discipline--every day. The first few weeks it may take as long as 10 minutes to remove all of the plaque from your mouth.
- Q.** How do you remove plaque?
A. 1. Proper brushing 2. Dental Flossing
 3. Interdental (between the teeth) stimulation and massage
- Q.** What is a Personal Plaque Score??
A. It is an accurate measurement of the amount of plaque in your mouth and to determine your progress and motivation at any given visit.

A TOOTHBRUSHING REPORT CARD

Personal Plaque Score (PPS)

Patient

Examiner/Evaluator

Date

PURPOSE (Why do we do a PPS?)

- ✓ To measure the amount of plaque present in your mouth.
- ✓ To determine and evaluate your oral hygiene status at any specific time.





MATERIAL (What do we need to do a PPS?)

- ✓ Trace (or a similar staining and disclosing aid)
- ✓ A mirror (preferably a small mouth mirror)
- ✓ A light source (flashlight or penlight)

INSTRUCTIONS (How do we do a PPS?)

- ✓ Put 4-5 drops of *Trace* under or on your tongue.
- ✓ Sip some water and swish the *Trace* all around.
- ✓ Be sure and cover **each** and **every** tooth with red solution.
- ✓ With a mirror and light source, check for red areas.
- ✓ Remove the red areas (plaque) with your brush and floss as you were shown.
- ✓ Restain with *Trace* and re-examine.
- ✓ Brush and floss until **all** plaque is removed.

G r a d i n g S c a l e

| | | | | | |
|-----------------------------|---|---|---|---|----------------------------|
| upper front tooth |  |  |  |  | lower front tooth |
| right side upper back tooth | No Plaque "0" | 1/3 "1" | 2/3 "2" | All covered "3" | left side upper back tooth |
| lower back tooth | | | | | lower back tooth |

• 0-3 very good • 4-7 good • 8-11 average-work harder • 12-14 below average • 15-18 YOU FAIL!

total

grade

Why Use Dental Disclosing Solution?

Dental disclosing solution never cured anything...

- ▲ It doesn't stop decay
- ▲ It doesn't cure inflamed or bleeding gums
- ▲ It doesn't relieve sensitive teeth...

It does...

- Develop pictures - pictures of where decay will come
- Determine where gums will bleed
- Determine where teeth will become sensitive

Just as certain chemicals produce pictures on exposed film, disclosing solution develops pictures on teeth. They are pictures of germ colonies (film plaque) that we must clean off in order to protect your appearance and prevent infection.

How does disclosing solution work?

Consider this: If we were to swab mercurochrome on a crystal clean window and then hose it down, the red would wash right off; but paint the mercurochrome on a dirty window and then hose it down. The red sticks to the window; it discloses the film of dirt on the window. This is just what happens on your teeth.

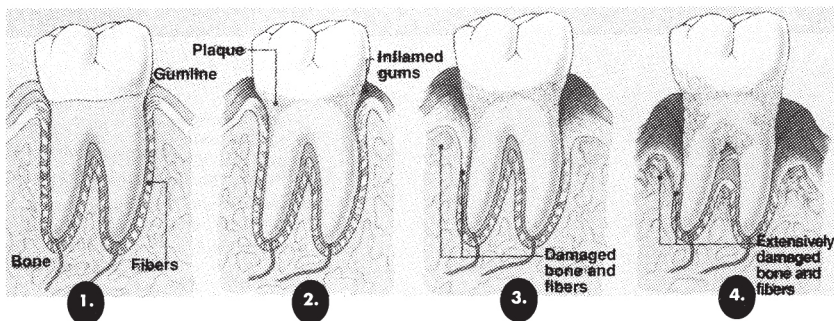
Disclosing solution washes off clean teeth, but this coloring material penetrates and sticks to germ plaque. It discloses harmful germ deposits adhering to teeth as nothing else can.

Without disclosing solution, you may overlook the formation of these germ colonies. They form so slowly you cannot feel them. They are usually colorless, so you cannot see them.

Disclosing solution reveals germ colonies that irritate gums and make them swell. Swollen gums lead to formation of periodontal pockets. These pockets trap food, and this food ferments and breeds more germs and pus around the necks of the teeth.

Germs not only foul the breath and infect the body, but the resulting chronic infection also irritates the bone and "melts" it down. This bone is needed to support the teeth. When bone is lost around the necks of your teeth, your teeth loosen. By showing you where trouble may come, disclosing solution gives you an opportunity to eliminate these spots.

THE STAGES OF GUM DISEASE



Healthy Gums

Healthy gums are firm and don't bleed. Tiny fibers hold teeth tightly to the gums and underlying bone. The gums fit snugly around the teeth, so plaque can be removed from below the gumline only by flossing and professional cleanings.

Gingivitis

The early stage of gum disease is gingivitis, a mild inflammation of the gums. Plaque and tartar (hardened plaque) have built up at the gumline. The gums have become red and puffy and may bleed during brushing or flossing. The bone and fibers holding the tooth in place are unaffected at this stage, so damage can be reversed.

Periodontitis

At this stage, plaque has moved deeper along the tooth and started an infection that has damaged the bone and fibers supporting the tooth. The gums may separate from the tooth and start to recede. A pocket has formed below the gumline that traps plaque and food debris, perhaps causing persistent bad breath. Treatment can stop further damage.

Advanced Periodontitis

In advanced periodontitis, plaque-caused infection has destroyed more than half of the bone and fibers holding the tooth in place. The gums have receded and separated from the tooth and may be painful. The tooth may shift or loosen, and the bite may change. If treatment can't save the tooth, it may have to be removed and replaced to prevent further damage.

Three "P's" of Proper Toothbrushing



1. Proper Placement

This simply means *where* to put the toothbrush or the correct location.

2. Proper Pressure

This simply means how much pressure to apply with the brush or how hard to brush.

3. Proper Period

This simply means the period of time you need to brush or how long is necessary.

*** If after brushing and then disclosing and staining, plaque can still be seen on the teeth and gingiva, something is wrong!*

If you are going to spend a certain amount of time and a certain amount of effort on your oral hygiene procedures, specifically toothbrushing what we want to accomplish is for you and your child to receive "maximum benefit" possible for the amount of time and the amount of effort that you spend.

The purpose of this is an explanation of the three "P's" of proper toothbrushing.

So long as plaque can be seen on the teeth

or

gingiva after toothbrushing, then

probably two or

more of the three

"P's" of proper toothbrushing are being

done incorrectly. If all three "P's" are done

correctly, then the end product will be

clean (plaque-free) and a healthy

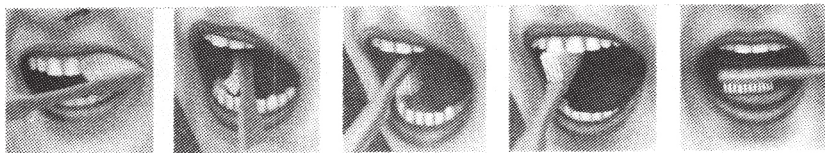
(bleeding-free) mouth.

Therefore, it is important that you

know and understand the following:



BRUSHING IS IMPORTANT



To clean the outer surfaces of your teeth, tilt the brush at a 45-degree angle against the gum-line. Gently move the brush back and forth in short (half-a-tooth-wide) strokes. Keep the bristles angled against the gumline.

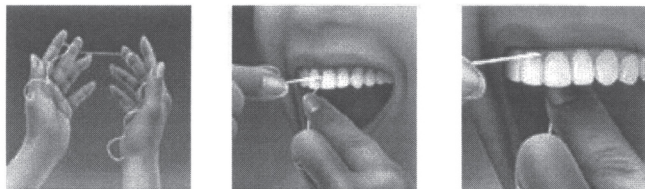
Repeat the motion on the inside surfaces of your teeth.

Brush the chewing surfaces of the molars.

To clean the inner surfaces of your front teeth, hold the brush vertically and use gentle up-and-down strokes with the front part of the brush.

Gently brush your tongue to remove bacteria and to freshen breath.

...AND DON'T FORGET TO FLOSS



Break off about 18 inches of floss and wind most of it around one middle finger. Wind the rest around the middle finger of your other hand.

Using your thumbs and forefingers, slide about an inch of taut floss between your teeth. Gently curve the floss around the tooth in a C-shape at the gumline.

Slide the floss gently up and down between the tooth and gum, making sure you go beneath the gumline. Repeat on the rest of your teeth with clean sections of floss.

If you want healthy teeth and gums then be aware of these five contributors...

Genetics...

Your family history is an indication of your teeth's susceptibility to decay and gum disease.

Oral Hygiene...

Daily brushing and flossing to thoroughly remove bacteria is necessary.

Diet...

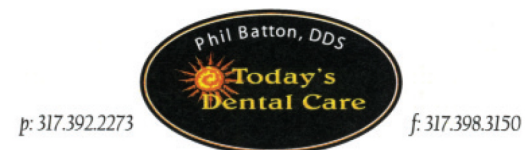
Foods that promote tooth decay must be avoided.

Medication...

Many medicines cause a reduction of the volume and quality of saliva. Saliva 'washes' your teeth and gums to reduce bacterial accumulation.

Stress...

People under chronic stress produce less saliva.



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