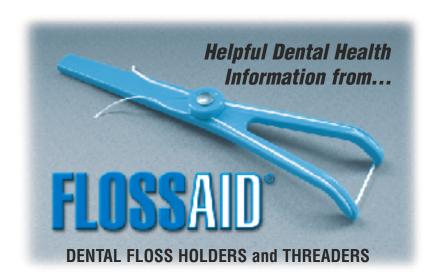
## Know Your Teeth



#### PREVENTION OF DENTAL PROBLEMS

#### **USE BOTH TOOTHBRUSH AND FLOSS**

The stickiness of plaque makes it difficult to remove: both brushing and flossing are required. Proper brushing adequately cleans the chewing, front and rear surfaces of the teeth. But, only floss can effectively clean between the teeth. This is why flossing is considered as important as brushing!

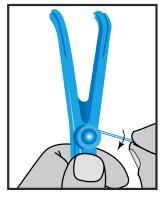
#### PREVENT CALCULUS BUILDUP

Effective plaque removal by brushing and flossing also removes mineral deposits within the plaque before they calcify and harden. Since it takes less than 48 hours for calcification to occur, plaque must be removed daily to prevent calculus buildup. If calculus begins to form, that indicates that those areas of your teeth are being consistently neglected. Then, you should modify your brushing and flossing techniques, and make sure that all areas are completely covered. Any calculus buildup that takes place, in spite of your efforts, should be removed once or twice a year by your dentist.

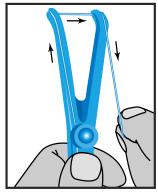
#### **VISIT YOUR DENTIST REGULARLY**

While good oral hygiene helps prevent dental disease, regular dental examinations are still necessary for early detection and treatment of any developing oral problem. Your dentist may also wish to acquaint you with specific oral hygiene procedures, and advise you about proper nutrition as it relates to your dental health.

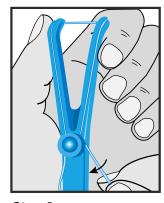
# HOW TO STRING THE FLOSSAID DENTAL FLOSS HOLDER



Step 1: Use an 18" length of floss, tape or yarn. Wrap one end ONE TURN around disc.



**Step 2:**Follow V groove to prong tip, go under and across. Then, return to disc.

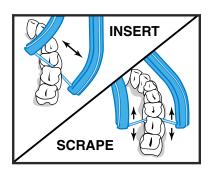


Step 3: For desired tension, squeeze prongs slightly (not closer than 3/4" between prongs). Wrap string two or more turns around disc.

To advance used or frayed floss, undo to step 1, wrap floss around handle and repeat steps 2 & 3.

### **HOW TO FLOSS**

To insert string between teeth, preferably slant holder and work the floss through with a sawing mo tion. Then, scrape each side of adjacent teeth with several firm strokes. Begin just below the gum line, always scrape toward crown. The taut string will curve sufficiently for effective coverage.



To remove string, gently work it back out past the contacts. If string snags, don't force it. Instead, detach one end of string from holder and draw it through the tooth space.

Rinse holder occasionally to get rid of debris. When you are finished flossing, rinse your mouth vigorously.

#### DENTAL DISEASE

#### PLAQUE: THE MAJOR CAUSE OF DENTAL PROBLEMS

Plaque and its toxic waste products which form on the surfaces of the teeth have been shown by dental research to be the major, direct cause of tooth decay and periodontal disease. Therefore, it is essential to good oral health that plaque be removed daily through brushing and flossing.

#### **HOW PLAQUE FORMS**

The soft tissues in the mouth continuously produce a sticky, slimy substance which adheres to the teeth as a thin, semi transparent coating. This coating of the teeth is an excellent breeding ground for microbes, particularly at the gum line, between the teeth and in other sheltered areas. If these microbe colonies are left undisturbed, the microbes will multiply and the coating becomes thicker and faintly visible. This is plaque.

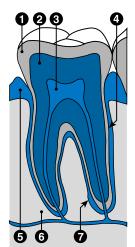
#### PLAQUE PROMOTES THE FORMATION OF CALCULUS

Plaque becomes a matrix into which minerals from saliva settle. Unless plaque is removed daily, these mineral deposits will harden into rough, cement-like formations known as calculus or tartar. Once calculus begins to form, plaque adheres even more firmly and is increasingly difficult to remove.

#### PLAQUE PRODUCES TOXINS

The microbes within the plaque are nourished by organic substances sloughing off the soft tissues of the oral cavity, and by food particles left after eating, especially carbohydrates (sugars and starches). In the process, the microbes release harmful waste containing acid and other toxins. These waste products are the primary factors contributing to tooth decay and periodontal disease.

#### **TOOTH & GUM STRUCTURE**



#### 1. Enamel

Very hard, mineral layer covering crown.

#### 2. Dentin

Hard, somewhat resilient, mass of mineral and organic matter.

#### 3. Pulp Chamber

Contains nerves and blood vessels extending through root canals to root tips.

#### 4. Cementum

Bone-like layer covering root area of tooth.

#### 5. Gum Tissue

#### 6. Bone

#### 7. Root Membrane

Tissue fibers which, at one end, are embedded in wall of bone socket and, at the other end, attached to the cementum, thus anchoring the tooth.

#### **TOOTH DECAY**

Acid repeatedly attacks and dissolves the enamel, creating microscopic cavities. Eventually, the damage shows up as a small white spot. If not treated, it soon becomes a visible cavity and the destructive process is greatly accelerated.

#### PERIODONTAL OR GUM DISEASE (PYORRHEA)

The toxins produced by the microbes within the plaque inflame the gum tissues, causing swelling and redness. Repeated attacks ultimately destroy the tough, connecting tissue fibers and make gum edges weak and flabby. This creates pockets along the gum line which shelter still larger masses of plaque. Trapped food particles and tissue fluids flowing from the inflamed gum edges add nourishment to the microbes, and more toxic waste is generated.

Often, rough calculus deposits are present, which are likely to irritate the tender gum tissues and cause occasional bleeding. This further increases the food supply for the microbes, intensifying the production of toxic waste and, in turn, aggravating the damage to the gum tissues.

The symptoms described are early signs of periodontal disease. The disease will progress over the years, with little or no discomfort to the patient, while it erodes the bone structure supporting the teeth. Through professional treatment and a conscientious oral hygiene program at home, the disease can be arrested. If ignored, the ultimate result can be loss of otherwise healthy teeth.



#### **PROGRESS OF TOOTH DECAY**

Decay has penetrated enamel and is spreading through the dentin.

Decay has spread to pulp chamber and destroyed the nerve. Abscess has formed at root tip.



#### **PROGRESS OF GUM DISEASE**

Here, the disease has advanced to where some bone loss has occurred.

Severe bone loss has taken place.
Through professional treatment,
the tooth can still be saved.

