

**MINISTRY OF HEALTH OF UKRAINE  
ZAPORIZHZHIA STATE MEDICAL UNIVERSITY  
Department of Foreign Languages**

**S. Ye. Trehub**

## **ENGLISH LANGUAGE**

### **EDUCATIONAL AID**

**of English professional oriented texts' reviewing  
for the 1<sup>st</sup> year students of the medical departments  
(Specialty "Dentistry")**

**Zaporizhzhia**

**2018**

UDC 811.111(075.8)

E56

*Ratified on meeting of the Central methodical committee  
of Zaporizhzhia State Medical University  
and it is recommended for the use in educational process.  
(protocol N 5 from 24.05.2018)*

**Reviewers:**

**I. M. Maslova** –PhD of Medical Sciences, Assistant of Department of Therapeutic, Orthopedic and Pediatric Dentistry, Zaporizhzhia State Medical University;

**D. A. Moskvitina** - PhD (Philology), Associate Professor, Department of Foreign Languages, Zaporizhzhia State Medical University.

**Complier:**

**S. Ye. Trehub** - PhD (Pedagogics), senior lecturer, Department of Foreign Languages, Zaporizhzhia State Medical University.

E56 **English Language:** educational aid of english professional oriented texts' reviewing for the 1<sup>st</sup> year students of the medical departments (specialty "Dentistry") / comp. S. Ye. Trehub. – Zaporizhzhia : ZSMU, 2018. - 73 p.

**Англійська мова** : практикум з реферування фахових текстів з англійської мови для студентів 1 курсу медичних факультетів (спеціальність «Стоматологія») / уклад. С. Є.Трегуб. – Запоріжжя : ЗДМУ, 2018.-73 с.

Практикум створений на основі автентичних професійно-орієнтованих текстів. Робота містить широкий спектр мовних кліше, фахових лексичних одиниць. Реферування іншомовного фахового матеріалу сприяє розвитку та вдосконаленню вмінь і навичок студентів-стоматологів з оволодіння професійною лексикою, збагаченню знань фаховою термінологією, формуванню вмінь культури фахового мовлення. Практикум націлений на викладачів медичних вишів.

**UDC 811.111(075.8)**

## Content

PREFACE.....	5
Cliches .....	9
<b>Part 1 Dental Problems and dental diseases</b>	
№1 . Top 9 Common Dental Problems .....	12
№ 2. Top 10 Facts Your Dentist Wants You to Know .....	14
№ 3. Top 5 Reasons to Visit the Dentist.....	16
№ 4. Top 10 Reasons to Have a Dental Cleaning.....	17
№ 5. Why Does My Tooth Hurt?.....	19
№ 6. What Causes a Toothache?.....	22
№ 7. Tooth Abscess.....	23
№ 8. Gum Disease.....	23
№ 9. Wisdom Teeth.....	24
№ 10. Cracked or Broken Tooth .....	24
№ 11. Sinus Cold or Infection.....	24
№ 12. What Is Gingivitis?.....	25
№ 13. What to Do When You Bite Your Lip or Tongue.....	26
№ 14 What Causes Bad Breath? .....	27
<b>Part 2 Cosmetic Dentistry. Fillings. Braces.</b>	
№ 15 Dental Treatment .....	30
№ 16 What is a Dental Implant? .....	30
№ 18 Feed Your Teeth!.....	31
№ 19 Fluoride - What is Fluoride? .....	33
№ 20 Dental Sealants .....	34
№ 21 Sugar Free Xylitol .....	36
№ 22 Ingredients to Keep Your Smile in Top Shape .....	37
№ 23 Much about Mouthrinses.....	39
№ 24 Cosmetic Dentistry- Veneers, Crowns, Bonding, Tooth Whitening.....	41

№ 25 What are Dental Crowns?.....	43
№ 26 What is Cosmetic Dentistry? .....	46
№ 27 Different Types of Fillings .....	48
№ 28 Are There Side Effects From Whitening Your Teeth? .....	50
№ 29 What You Can and Can't Eat With Braces.....	52
№ 30 What are Braces? .....	56
№ 31 Myobrace: Alternative to Traditional Braces.....	57
№ 32 Recovery After Oral Surgery .....	59
№ 33 What is TMJ Disorder? .....	61
№ 34 Can Adults Wear Braces?.....	62
№ 35 Orthodontic Band - Definition of Orthodontic Band .....	64
№ 36 Why Are Wisdom Teeth Removed? .....	65
Glossary .....	66
Recommended Literature .....	71

## Передмова

Соціально-економічні зміни в Україні, процеси глобалізації та інформатизації, наміри держави щодо інтеграції в європейську спільноту посилюють увагу до якісної стоматологічної діяльності, спрямованої на забезпечення кваліфікованої допомоги громадянам України, а відтак – і до професійної культури спілкування майбутніх стоматологів.

Метою практикуму є навчання реферуванню іншомовного фахового матеріалу (на основі автентичних професійно-орієнтованих текстів), сприяння розвитку та вдосконаленню вмінь і навичок студентів-стоматологів з оволодіння професійною лексикою, збагаченню знань фаховою термінологією, формуванню умінь культури фахового мовлення. Практикум є своєрідним інтенсивним курсом який дозволяє повторити, закріпити та перевірити знання в рамках головного напрямку програми, а також може ефективно використовуватись в позааудиторний час.

Практикум призначений для аудиторної та самостійної роботи з англійської мови для студентів стоматологічного факультету вищих медичних навчальних закладів України та розрахований на 60-80 годин.

Запропонований практикум пов'язаний, насамперед, з професійною освітою студентів-дантистів.

Практикум складається з двох розділів, які включають 36 автентичних текстів; мовних кліше; глосарію, алгоритму навчання реферуванню; списку використаних джерел. Тексти пристосовано до виконання навчальних завдань з професійної мовної підготовки студентів-стоматологів за рахунок скорочення інформації та спрощення. Лексичний склад текстів забезпечує тематичну спадкоємність і достатньо високу повторюваність, що сприяє формуванню культури фахового мовлення майбутніх дантистів.

Урахування принципу наочності виступає стимулом до мовленнєвої діяльності. Кольорова наочність сприяє кращому розумінню та засвоєнню матеріалу.

Досконале вивчення навчального матеріалу практикуму дозволяє розвинути навички аналізування фактів і власної оцінки; ефективного опрацювання іншомовної фахової літератури. Це, у свою чергу, буде сприяти формуванню світогляду сучасного дантиста як представника нової генерації асоціації стоматологів.

**Що таке реферування інформації і для чого воно потрібне сучасному студенту медичних вишів?**

Одним з найважливіших аспектів фахової підготовки студентів-стоматологів є робота з професійно-орієнтованою інформацією на іноземній мові.

Актуальність цього питання обумовлена зростанням суспільного значення іноземної мови в час розбудови демократичної правової держави за умов Європейської інтеграції України. Важливими чинниками є й потреби сьогодення в підвищенні якості комунікативної освіченості спеціалістів медицини, необхідність удосконалити рівень професійного діалогу сьогоденішнього лікаря-стоматолога для практичного застосування набутих профілюючих знань у професійній діяльності.

Важливе значення в підготовці конкурентоспроможного фахівця в галузі стоматології займає саме реферування статей, текстів тощо.

**Мета та завдання реферування-** це, насамперед, розуміння й аналіз статті (тексту), що читається, можливості оперувати здобутою інформацією протягом тривалого часу та застосовувати її у своїй професійній діяльності. Велике значення має здобуття студентами навичок правильно добирати, вивчати та реферувати фаховий матеріал.

**Головною метою реферування** є підвищення рівня теоретичних знань і практичних навичок студентів у галузі стоматології з урахуванням сучасних вимог.

Засобом досягнення цієї мети є **вирішення наступних завдань**, а саме:

- поглиблене проникнення студентів у фахову діяльність;
- ознайомлення із новітньою літературою;

- набуття навичок критичного аналізу матеріалів, що використовуються, та власних узагальнень;
- розвиток здібностей до самостійного осмислення та логічного викладання проблеми;
- отримання можливості практично засвоїти правила оформлення здобутої інформації;
- оволодіння лексичними та граматичними структурами; мовними кліше, які забарвлюють та роблять виклад тієї чи іншої інформації більш яскравою та валідною.

### **Приклад реферування фахового тексту:**

#### **Interferon**

Interferon is a protein produced by various body cells in response to viral infections. Interferons protect other cells from becoming infected by the virus. Interferons also are produced if certain harmful chemicals and drugs enter the body. Researchers have tested interferons in the treatment of many diseases, including certain cancers.

There are three types of interferons: alpha, beta, and gamma. Alpha and beta interferons are produced by many types of cells throughout the body. Gamma interferon, also called immune interferon, is produced by white blood cells called lymphocytes. All three interferons are released by the cells within a few hours after a viral infection occurs. They bind to the cells that border the infection and prevent the virus from spreading. Some interferon enters the bloodstream, where more is produced to help protect the rest of the body. In addition to its antiviral properties, gamma interferon acts as a signal molecule in triggering an immune response to many kinds of infections. An immune response is the process by which the body produces disease-fighting cells and antibodies.

Interferon was jointly discovered in England by Scottish virologist Alick Isaacs and Swiss virologist Jean Lindenmann in 1957. In the late 1960s, Kari J. Cantell, a Finnish virologist, developed techniques for obtaining interferons from human white

blood cells. Today, scientists use techniques of molecular biology to manufacture large quantities of interferons.

Interferons are used to treat hepatitis C, hairy-cell leukemia, and Kaposi's sarcoma, a cancer often found in people who have AIDS. They also may be useful against skin cancer and certain viral diseases, including hepatitis B.

### **Rendering the article.**

**The title of the article is** Interferon. **The article centers** about a protein produced by various body cells in response to viral infections. **At the beginning of the article** is spoken about the types of interferon. There are three types of interferons: alpha, beta, and gamma. Alpha and beta interferons are produced by many types of cells throughout the body. Gamma interferon, also called immune interferon, is produced by white blood cells called lymphocytes. **It is of importance to note** that all three interferons are released by the cells within a few hours after a viral infection occurs. **In the middle of the article** the **author** says about the binding of interferon. **The article ends with the information** about the discovery of interferon. **Lastly I'd like to say** that interferons are used to treat hepatitis C, hairy-cell leukemia, and Kaposi's sarcoma, a cancer often found in people who have AIDS. They also may be useful against skin cancer and certain viral diseases, including hepatitis B. **It may be important to conclude** that this article is very interesting and informative. It has much **useful information** about the discovery, binding and usage of interferon.

**NB!** Зверніть увагу на виділені фрагменти та зрозумійте їх значення.

Для декорування повідомлення використовуйте наступні кліше, оперування та вживання яких розширює мовний коридор та сприяє кращій презентації здобутої інформації.



1.	It seems to me	Мені здається
2.	In (to) my opinion	На мою думку
3.	From my point of view	З моєї точки зору
4.	I am (not) sure	Я (не) впевнений
5.	If I am not mistaken	Якщо я не помиляюсь
6.	As a rule	як правило
7.	As for me = as regards myself	Щодо мене
8.	According to this text	Відповідно до тексту
9.	It's natural	Природньо
10.	Oh, I'm sorry! It was my mistake!	Вибачте! Це була моя помилка!
11.	To consider	Вважати
12.	To suppose	Думати, вважати
13.	To work at the problem	Працювати над проблемою
14.	To become interested in	Бути зацікавленим в
15.	To continue one's studies	Продовжити навчання
16.	To pay particular attention to	Віддавати особливу перевагу
17.	Laboratory findings	Лабораторні відкриття
18.	To solve a difficult task	Вирішувати складне завдання
19.	The main problem of the article is... - to reveal - to put into practice - to apply in practice	Головна проблема 9aragr... -відкрити - ввести у практику - застосувати у практиці
20.	The article concerns (deals with)	Стаття відноситься (має справу)
21.	According to the theme of the article	Згідно з темою статті
22.	To reach a conclusion	Прийти до висновку
23.	And now I'd prefer to talk about...rather than...	Зараз я би хотів поговорити про,... а не про...
24.	It strikes me that...	Мене вражає, що
25.	I know from personal experience...	Я з свого досвіду знаю, що
26.	I've got an impression that...	В мене враження, що
27.	On the other hand...	З іншого боку
28.	There are different views of...	Існують різні думки щодо
29.	The author argues that...	Автор стверджує, що
30.	You are certainly correct to say that...	Ви абсолютно праві, говорячи...
31.	I have almost no doubt that...	У мене майже немає сумнівів, що...
32.	I can disagree.	Я можу не погодитися.
33.	I'd like to remind you that...	Хотілось би нагадати, що....
34.	We have to bear in mind that...	Необхідно пам'ятати, що...
35.	It must be admitted that...	Необхідно усвідомити, що...
36.	It immediately brings to mind...	Це відразу нагадує...
37.	The other thing that we should keep in mind is...	Наступна річ, про яку необхідно пам'ятати...
38.	Let me give you a brief example...	Дозвольте навести короткий

		приклад...
39.	What we have seen now is a kind of a perfect example of...	Те, що ми зараз побачили, - це чудовий приклад того, що...
40.	There is a great deal of discussion about...	Багато обговорень йдеться з приводу....
41.	Nobody doubts that...	Ніхто не сумнівається, що...
42.	Let's have a final look at...	Давайте розглянемо востаннє...
43.	It only remains for me to say...	Мені залишається додати лише те, що...
44.	To sum up I'd like to say	Підсумовуючи, хочу сказати...
45.	Summarizing, we may say that...	Підсумовуючи ми можемо сказати, що...
46.	It's a well-known fact that	Добре відомий факт, що
47.	I want to continue his (her) story about and tell you about	Я хочу продовжити його (її) розповідь про ... і розповісти про...
48.	I'd like to add some important facts (information) a couple of details	Я б хотів додати декілька важливих фактів (небагато інформації), декілька деталей
49.	It goes without saying	Зрозуміло
50.	I agree-I don't agree- I disagree	Я згоден/не згоден
51.	I can hardly imagine person who...	Мені важко уявити людину, яка...
52.	I'm afraid I have a very general idea about	Боюся, у мене дуже загальне уявлення про
53.	I'm far from this problem	Я далекий від цієї проблеми
54.	And now some (=a few) words about...	А зараз кілька слів про...
55.	The article is about ...	Стаття про...
56.	The article describes (concerns) smth. ...	Стаття описує...
57.	The purpose (object) of the article is to describe ( to show)	Мета статті-описати чи показати...
58.	The article highlighters the problem...	Основна проблема статті..
59.	The article centers on the problem...	Основна проблема статті..
60.	The first 10aragraph deals with...	В першому абзаці йдеться про...
61.	Then the articles goes on the problem of...	Потім в статті йдеться про...
62.	It is evident that...	Очевидно, що...
63.	It is said that...	Кажуть, що
64.	It is important to point that...	Важливо відмітити, що
65.	What I have found out is...	Те, що я знайшов – це...
66.	It is interesting to note that...	Важливо замітити, що
67.	The final paragraph states (ends with)	В останньому абзаці мова йде

		про...
68.	At the beginning of the text...	На початку тексту...
69.	In the middle of the text...	В середині тексту...
70.	At the end of the text...	В кінці тексту...
71.	The title of the text is...	Заголовок тексту...
72.	The main problem of the text is...	Головна проблема тексту...
73.	The article centers about (deals with; devotes considerable attention to)	В статті йдеться про...
74.	Firstly, secondly, thirdly;	По-перше, по-друге, по-третє
75.	Lastly I'd like to say that	На прикінці я б хотів наголосити, що
76.	In conclusion	В заключенні
77.	Summing up	Підсумовуючи

## Part 1. Dental Problems and dental diseases

## **Text № 1.**

### **Top 9 Common Dental Problems**

**By Tammy Davenport**

#### **Dental Care Expert**

Dental problems are never any fun, but the good news is that most of them can be easily prevented. Brushing twice a day, flossing daily, eating properly and regular dental check ups are essential in preventing dental problems. Educating yourself about common dental problems and their causes can also go a long way in prevention.

#### **1. Bad Breath**

If you suffer from bad breath, you are not alone. Bad breath, also called halitosis, can be downright embarrassing. According to dental studies, about 85% of people with persistent bad breath have a dental condition that is to blame. Gum disease, cavities, oral cancer, dry mouth and bacteria on the tongue are some of the dental problems that can cause bad breath. Using mouthwash to cover up bad breath when a dental problem is present will only mask the odor and not cure it. If you suffer from chronic bad breath, visit your dentist to rule out any of these problems.

#### **2. Tooth Decay**

Did you know tooth decay, also known as cavities, is the second most prevalent disease in the United States (the common cold is first). Tooth decay occurs when plaque, the sticky substance that forms on teeth, combines with the sugars and / or starches of the food we eat. This combination produces acids that attack tooth enamel. The best way to prevent tooth decay is by brushing twice a day, flossing daily and going to your regular dental check ups. Eating healthy foods and avoiding snacks and drinks that are high in sugar are also ways to prevent decay.

#### **3. Gum (Periodontal) Disease**

Studies have shown that periodontal disease, also known as gum disease, is linked to heart attacks and strokes. Gum disease is an infection in the gums surrounding the teeth. Gum disease is also one of the main causes of tooth loss among adults. There are two major stages of gum disease: gingivitis and

periodontitis. Regular dental check ups along with brushing at least twice a day and flossing daily play an important role in preventing gum disease.

#### **4. Oral Cancer**

Oral cancer is a serious and deadly disease that affects millions of people. In fact, the Oral Cancer Foundation estimates that someone in the United States dies every hour of every day from oral cancer. Over 300,000 new cases of oral cancer are diagnosed every year, worldwide. This serious dental disease, which pertains to the mouth, lips or throat, is often highly curable if diagnosed and treated in the early stages.

#### **5. Mouth Sores**

There are several different types of mouth sores and they can be pesky and bothersome. Unless a mouth sore lasts more than two weeks, it is usually nothing to worry about and will disappear on its own. Common mouth sores are canker sores, fever blisters, cold sores, ulcers and thrush.

#### **6. Tooth Erosion**

Tooth erosion is the loss of tooth structure and is caused by acid attacking the enamel. Tooth erosion signs and symptoms can range from sensitivity to more severe problems such as cracking. Tooth erosion is more common than people might think, but it can also be easily prevented.

#### **7. Tooth Sensitivity**

Tooth sensitivity is a common problem that affects millions of people. Basically, tooth sensitivity means experiencing pain or discomfort to your teeth from sweets, cold air, hot drinks, cold drinks or ice cream. Some people with sensitive teeth even experience discomfort from brushing and flossing. The good news is that sensitive teeth can be treated.

#### **8. Toothaches and Dental Emergencies**

I can't think of much worse than suffering from a toothache. While many toothaches and dental emergencies can be easily avoided just by regular visits to the dentist, we all know that accidents can and do happen. Having a dental emergency

can be very painful and scary. Fortunately, you can do several things until you are able to see your dentist.

## **9. Unattractive Smile**

While an unattractive smile is not technically a "dental problem," it is considered a dental problem by people who are unhappy with their smile and it's also a major reason that many patients seek dental treatment. An unattractive smile can really lower a person's self-esteem. Luckily, with today's technologies and developments, anyone can have a beautiful smile. Whether it's teeth whitening, dental implants, orthodontics or other cosmetic dental work, chances are that your dentist can give you the smile of your dreams.

### **Text № 2.**

## **Top 10 Facts Your Dentist Wants You to Know**

### **1. Dental Check Ups Include Oral Cancer Screenings**

When you go for your regular dental check up, your dentist and hygienist are also screening you for any signs of oral cancer. Every hour of every day, someone dies of oral cancer in the United States. This serious dental disease which pertains to the mouth, lips or throat is often highly curable if diagnosed and treated in the early stages. Visiting your dentist for regular check ups and avoiding tobacco are the key factors in preventing oral cancer. •

### **2. Gum (Periodontal) Disease Affects Your Overall Health**

Gum disease is one of the main causes of tooth loss in adults and has also been linked to heart disease and strokes. If diagnosed in the early stage, gingivitis can be treated and reversed. If treatment is not received, a more serious and advanced stage of gum disease, called Periodontitis, which includes bone loss, may follow. Brushing twice a day, flossing daily, and getting regular dental check ups and cleanings are the best prevention against gum disease. •

### **3. Dental Cleanings and Check Ups are Extremely Important**

Going to the dentist for regular check ups & cleanings is one of the most important factors in maintaining good oral health.

Regular check ups can prevent cavities, root canals, gum disease, oral cancer, and other dental conditions. Don't wait until you have a problem before you see your dentist, help prevent problems before they happen. •

#### **4. Brushing Twice a Day Helps to Keep the Cavities Away**

When you brush your teeth properly, at least twice a day, you are removing the plaque that causes cavities. Plaque is the soft and sticky substance that accumulates on the teeth from food debris and bacteria. Flossing daily will remove the plaque from in between the teeth that the toothbrush cannot reach. Removing plaque from your teeth also helps to prevent gum disease. •

#### **5. Bad Breath Could be the Result of a Dental Problem**

About 85% of people with persistent bad breath have a dental condition that is to blame. If bad breath is the cause of a dental condition, mouthwash will only mask the odor and not cure it. Don't be embarrassed to talk to your dentist, they are there to help you. Flossing daily and brushing your teeth & tongue twice a day can greatly reduce and possibly eliminate bad breath. •

#### **6. Proper Nutrition is Important for Good Dental Health**

The sugars from soft drinks and non-nutritional foods combine with the bacteria in our mouths which produces acids that attack tooth enamel. This can lead to cavities and gum disease. Limiting the amount of beverages and foods that are high in sugar can greatly help to maintain good dental health. •

#### **7. Dental Problems Do Not Get Better or Go Away Without Treatment**

If your dentist gives you a treatment plan for dental work that you need to have done, you should focus on getting your teeth fixed as soon as possible. Even cavities continue to get bigger. If they get big enough to reach the nerve in your tooth, your only options would be to have a root canal or have the tooth extracted. •

#### **8. A Root Canal is Usually Not Painful**

I can't tell you how many times I have heard a patient say, "Just pull the tooth, I've heard root canals are horrible." With today's technology, root canals are nothing

like most people think. I have had root canals and I was pleasantly surprised every time. In my opinion, a root canal is as painless as having a filling. •

## **9. Change Your Toothbrush**

Manual toothbrushes become worn out after about 3 months and are not as effective as they once were. If you have gum disease, you should change your toothbrush every 4 - 6 weeks because bacteria can harbor in the bristles. You should always rinse your toothbrush out with hot water after every use and change it after you have been sick. •

## **10. Maintaining Good Dental Health is Easy**

Some people think that having good dental health takes too much effort. Seeing your dentist for regular dental check ups and cleanings, brushing twice a day, flossing daily and eating a nutritional diet are the key factors in having healthy teeth and gums. Now, what's so hard about that?

### **Text №3**

## **Top 5 Reasons to Visit the Dentist**

**By Tammy Davenport**

### **Dental Care Expert**

Visiting your dentist for regular check ups and cleanings can help prevent many dental problems as well as to help you maintain optimal oral health. Don't wait until you have a toothache before you call your dentist.

#### **1. To Prevent Gum Disease**

Gum disease is one of the leading causes of adult tooth loss. If diagnosed in its early stages (gingivitis}, it can be treated and reversed. If treatment is not received, a more serious and advanced stage of gum disease called periodontitis may follow. Regular visits to the dentist for check ups and dental cleanings, flossing daily and brushing twice a day are key factors in preventing gum disease. •

#### **2. To Prevent Oral Cancer**

According to The Oral Cancer Foundation, someone dies from oral cancer, every hour of every day in the United States alone. When you go for your regular



dental check up and cleaning, your dentist and hygienist are also screening you for oral cancer, which is highly curable if diagnosed early. •

### **3. To Avoid Losing Your Teeth**

Since gum disease is one of the leading causes of tooth loss in adults, visiting your dentist on a regular basis and maintaining good oral hygiene is crucial for avoiding false teeth and keeping your natural teeth. •

### **4. To Prevent Dental Emergencies**

Many toothaches and dental emergencies can be easily avoided just by regular visits to the dentist. Your dentist can detect any early signs of problems with your teeth or gums. Early detection of cavities, broken fillings and gum disease are easily treatable. If these problems go untreated, root canals, gum surgery and removal of teeth could become the only treatment options available. •

### **5. To Help Maintain Good Overall Health**

Gum disease has been linked to heart disease, strokes, pancreatic cancer and more. Visiting your dentist for regular check ups can help you to avoid gum disease, thus promoting better overall health. •

## **Text № 4**

### **Top 10 Reasons to Have a Dental Cleaning**

**By Tammy Davenport**

#### **Dental Care Expert**

Good oral hygiene is important, not only for looks, but for general health as well. Poor oral hygiene can lead to a variety of dental and medical problems such as gum disease, infection, bone loss, heart disease, strokes and more. Regular check ups and cleanings can prevent these problems as well as provide you with good oral hygiene.

#### **1. To Prevent Oral Cancer**

According to The Oral Cancer Foundation, someone dies from oral cancer, every hour of every day in the United States alone. When you have your dental cleaning, your dentist is also screening you for oral cancer, which is highly curable if diagnosed early.

## **2. To Prevent Gum Disease**

Gum disease is an infection in the gum tissues and bone that keep your teeth in place and is one of the leading causes of adult tooth loss. If diagnosed early, it can be treated and reversed. If treatment is not received, a more serious and advanced stage of gum disease may follow. Regular dental cleanings and check ups, flossing daily and brushing twice a day are key factors in preventing gum disease.

## **3. To Help Maintain Good Physical Health**

Recent studies have linked heart attacks and strokes to gum disease, resulting from poor oral hygiene. A dental cleaning every 6 months helps to keep your teeth and gums healthy and could possibly reduce your risk of heart disease and strokes.

## **4. To Keep Your Teeth**

Since gum disease is one of the leading causes of tooth loss in adults, regular dental check ups and cleanings, brushing and flossing are vital to keeping as many teeth as you can. Keeping your teeth means better chewing function and ultimately, better health.

## **5. To Detect Dental Problems Early**

Your dentist and hygienist will be able to detect any early signs of problems with your teeth or gums. Early detection of cavities, broken fillings and gum disease are easily treatable. If these problems go untreated, root canals, gum surgery and removal of teeth could become the only treatment options available.

## **6. To Maintain Good Oral Health**

Your dental hygienist will help to ensure that you are maintaining your good oral health by visual examination and comparing your previous dental check ups. If you are falling off track with your oral hygiene he / she will help put you back on the right path.

## **7. To Use Your Dental Insurance Plan**

Dental insurance plans usually pay for all or most of the cost of dental cleanings and check ups every six months. Take advantage of this and save a lot of money in the long run by avoiding costly dental procedures that can result from poor oral hygiene.

## **8. To Create a Treatment Plan**

If your dentist diagnoses any problems in your mouth, he /she will most likely give you a treatment plan. This treatment plan should have the cost of each procedure that you will need, so that you can discuss financial arrangements with the front office.

## **9. To Have a Bright and White Smile**

Your dental hygienist can remove most tobacco, coffee and tea stains. During your cleaning, your hygienist will also polish your teeth to a beautiful shine. The result? A whiter and brighter smile!

## **10. To Prevent Bad Breath**

Dental studies show that about 85 percent of people with persistent bad breath, also known as halitosis have a dental problem that is to blame. Good oral hygiene is essential in preventing bad breath. Regular check ups and cleanings are the best way to make sure that you are maintaining good oral hygiene.

### **Text № 5**

#### **Why Does My Tooth Hurt?**

**By Lora Dodge**

##### **Dental Care Expert**

A toothache is no fun at all and can even be scary when you don't know what is causing it. A toothache is described as any pain, soreness or ache in and/or around a tooth. The tooth may be sensitive to temperature, painful when chewing or biting, sensitive to sweets, or it may even have a sharp pain or dull ache.

Diagnosing the Problem your dentist has several methods he will use to determine the cause of the pain. First, he will ask you several questions regarding the types of symptoms you are having. Is it sensitive to cold or heat? Does it hurt to eat? Has it woken you up in the middle of the night? These questions will help your dentist narrow down the possible causes for your discomfort.

Your dentist may also want to take an x-ray of the offending tooth to check for abscesses, cavities, or any other hidden problems. There are other tests a dentist sometimes performs to help diagnose a toothache. Such tests include a percussion test

where the dentist will gently tap on areas of the tooth or surrounding teeth to help identify the precise location of the pain. A biting pressure test, using a “biting stick” or cotton tip applicator, may be used to determine what area of the tooth is causing the pain. The cold air test uses a gentle stream of cold air blown directly on the different areas of the tooth to figure out where the sensitivity is coming from.

Once your dentist has diagnosed the cause of your toothache, they will explain to you what is involved to fix the problem and possibly prescribe you medication to help alleviate the symptoms in the meantime. In cases of severe pain, it is often difficult to determine the exact cause. Of course, if left untreated, your symptoms will only worsen over time.

The Most Common Causes of Toothaches Are:

- **Tooth Decay**

Also known as cavities, this condition refers to the decay of the outer surface (enamel) of the tooth. When plaque sticks to the tooth enamel, it feeds on the sugars and starches from food particles in your mouth. This produces an acid that eats away at the enamel, causing weak areas and holes. As the decay spreads inward toward the middle layer of the tooth (dentin), it can create symptoms such as sensitivity to temperature and touch.

- **Inflammation of the Tooth Pulp**

Also called pulpitis, this condition means that the tissue in the center of the tooth (nerve/tooth pulp) has become inflamed and irritated. This inflammation causes pressure to build inside the tooth and puts pressure on the surrounding tissue. Symptoms of an inflamed tooth pulp can be mild to extreme, depending on the severity of the inflammation. Treatment for pulpitis is essential because the pain will only worsen.

- **Abscess**

A dental abscess is caused by the buildup of bacteria inside the pulp chamber that becomes infected. This infection then tries to drain itself out of the very tip of the tooth root. The pressure from the draining infection causes a pain that can become

severe with swelling if left untreated. Most abscesses can be seen visually on a dental x-ray.

- **Cracked Tooth**

Your teeth can be weakened over time due to the amount of pressure from biting and chewing. The force from biting down on a hard object like ice or a popcorn kernel can sometimes cause a tooth to crack. Symptoms of a cracked tooth may include pain when biting or chewing, and sensitivity to hot and cold temperatures or to sweet and sour foods. Treatment for this condition will depend on the location and direction of the crack as well as the extent of the damage.

- **Impacted Tooth**

Teeth can become impacted when they are prevented from moving into their proper position in the mouth by other teeth, gums or bone. The most common teeth to become impacted are the wisdom teeth because they are usually the last to erupt. When the jawbone cannot accommodate for these extra teeth, the teeth remain stuck under the gum. This impaction can create pressure pain and even jaw soreness.

- **Gum Disease**

Also known as gingivitis and periodontitis, gum disease is characterized as an infection of the gums that surround the teeth. This infection eventually causes bone loss and deterioration of the gums. Gums become detached from the teeth, forming pockets that fill with more bacteria. Tooth roots are then exposed to plaque and become susceptible to decay and sensitive to cold and touch.

- **Sensitive Teeth**

Sometimes you may notice that your teeth or a specific tooth is sensitive to cold air, liquids and foods. There are people who simply have what is known as "sensitive teeth," meaning your teeth may have developed a sensitivity linked to cold temperatures. Your dentist may have you start brushing your teeth with a special toothpaste made for teeth sensitivity, such as Sensodyne, to help alleviate your symptoms. He may also apply fluoride to your teeth (especially the parts of your teeth that meet the gum). Always let your dentist know when you are experiencing dental sensitivity of any kind.

## • **Non-Dental Causes**

Believe it or not, there are times when tooth pain or sensitivity has nothing to do with your teeth at all. For example, if you have a sinus infection or have sinus congestion, you may notice your teeth feeling more sensitive than usual. You may even have pain or discomfort that seems to be coming from several teeth, when in fact, the pain is caused by a sinus infection. This is especially true of your upper teeth, because they are located directly under your sinus cavities, and any pressure or pain from your sinuses can affect these teeth. If your dentist feels that this may be a possibility, he may have you try taking a decongestant to see if symptoms are alleviated or lessened.

### **Text № 6**

#### **What Causes a Toothache?**

**By Shawn Watson**

**Dental Care Expert**

When you have a toothache, every movement, thought, sound -- even touch -- is overshadowed by throbbing pain of a toothache. If you have a toothache and are not sure what could be causing it, continue reading.

Untreated tooth decay is a gateway to a host of serious dental problems that may result in a toothache. While a cavity may not cause significant tooth pain, the consequences of untreated tooth decay leads to potentially painful bouts of tooth pain.

Small cavities that only involve the enamel are usually painless, and generally go undetected by the patient. Once the decay penetrates through the enamel, it invades the dentin layer of the tooth. At this point the cavity is likely just cold- and sweet-sensitive. As the decay progresses deeper into the tooth, the pain intensifies. Pain from a toothache caused by a cavity is best described as sharp and intermittent.

### **Text № 7**

#### **Tooth Abscess**

An abscess forms when an infection develops just below the root of the tooth, when the pulp of the tooth has become infected. An abscess is comprised of pus, which is essentially white blood cells, dead tissue, and bacteria. When an abscess

appears on a dental x-ray, it looks like a small, round, bulb. This pocket of infection, along with the inflammation of the tissues inside of the tooth, causes a very painful type of toothache -- often described as throbbing and pulsating, with intermittent sharp pains. Many people with an abscessed tooth have a difficult time identifying the exact tooth that is causing the pain, and it doesn't always show up on x-rays.

Untreated tooth decay and advanced gum disease are common causes of tooth abscess.

## **Text № 8**

### **Gum Disease**

Gum disease doesn't necessarily cause a toothache, although advanced gum disease may cause pain in the mouth that may be interpreted as a toothache.

When the early stages of gum disease, known as gingivitis, begin to progress, the bacteria responsible for the infection causes inflammation of the tissues. This inflammation may cause a dull pain in the area where the gums are infected. In serious cases of gum disease, known as periodontitis, a gum abscess may occur. This abscess is similar to an abscessed tooth, only the pocket of infection is on the outer tissues in the mouth. Pain from advanced gum disease, and a gum abscess may be described as a throbbing, dull pain, that increases in severity when the area is stimulated.

## **Text № 9**

### **Wisdom Teeth**

A toothache caused by the wisdom teeth is very common. In fact, the development of a toothache in the area of the wisdom teeth generally indicates the need to have your wisdom teeth extracted.

An impacted wisdom tooth may cause a toothache that is described as throbbing, with bouts of sharp pain. The pain is generally because the tooth is trying to erupt into the mouth, but it is unable to because there isn't enough room, or

because it's in an undesirable position. A tooth that is cutting through the gum may also cause a toothache -- similar to when a child is teething.

## **Text № 10**

### **Cracked or Broken Tooth**

A cracked or broken tooth is often responsible for a severe toothache. How the tooth is cracked or broken also affects the type of toothache you may develop.

When there is a small crack or break in either the natural tooth or a filling, bacteria is able to enter the tooth and cause decay to form. When a tooth has a substantial break, it is possible that the nerve of the tooth has become exposed. A dull, persistent pain is often the outcome. When a tooth has a cracked root, a toothache is inevitable. Similar to a cracked or broken filling, the toothache is usually described as a dull, aching pain that has intermittent bouts of sharp, painful jabs in the gum area of the tooth.

Temporomandibular Joint disorders, and/or a misaligned bite, known as malocclusion, often cause toothaches in teeth that appear to be healthy.

When your jaw or teeth are misaligned, the forces exerted on the teeth are not distributed evenly. The extra forces on the teeth may cause inflammation in the nerve of the tooth, which in turn may cause a toothache.

TMJ disorders and misaligned bites also cause patients to clench or grind their teeth. Grinding the teeth wears away the enamel surface of the tooth, exposing the dentin layer, which causes pain from sensitivity to temperature. Grinding and clenching the teeth may also cause teeth to fracture, which may result in the loss of natural tooth structures, or cause restorations to break. Clenching and grinding aches may be felt more during the night or you wake up, and tend to get worse during stressful periods in your life.

## **Text № 11**

### **Sinus Cold or Infection**

Sinus colds and infections, known as sinusitis, are notorious for causing a toothache on a otherwise healthy tooth.



Your sinus cavity sits just above your upper jaw. The roots of your maxillary teeth come within millimeters of your sinuses. When you have a sinus cold or sinus infection, the pressure from your sinuses is often referred to one or more upper teeth. A dull aching pain that may be sensitive to pressure often occurs. Keep in mind that once your sinus infection subsides, the toothache will go away as well, and there will not be any permanent damage to the tooth or teeth in question. Sinus infections that mimic toothaches should clear up within 48 hours of taking antibiotics. If the tooth remains painful, see your dentist.

## **Text № 12**

### **What Is Gingivitis?**

**By Shawn Watson**

**Dental Care Expert**

Question: What Is Gingivitis?

Many people often ignore the early signs of gum disease, known as gingivitis, simply because they do not know what gingivitis is.

Gum disease plagues 75% of adult Americans and has been connected to serious diseases such as heart disease and stroke. Learn how to recognize gingivitis along with ways to halt and prevent gingivitis from progressing into a more serious form of gum disease.

Answer: Gingivitis is a reversible form of gum disease. Affecting only the attached and free gingival tissue that surrounds your teeth, bacteria that invades the area below your gumline, known as the sulcus or periodontal pocket, causes gingivitis to develop and eventually manifest into periodontitis, if left untreated.

The early warning signs of gingivitis are often mistaken as normal occurrences one should expect when it comes to the mouth. Symptoms of gingivitis include:•

Bad breath •

Red, puffy, and inflamed gums •

Bleeding after brushing and flossing

The causes associate with gingivitis vary, but typically include:•

- Improper or infrequent brushing and flossing •
- Trapped plaque in hard to reach places, such as around the wisdom teeth, above and below orthodontic bands and brackets, or fixed appliances •
- Teeth that are crooked or overlap each other •
- Certain medications that cause xerostomia or gingival enlargement •
- Tobacco use •
- Conditions such as diabetes may cause gingivitis •
- Pregnancy and oral contraceptives

Even though you may recognize these early warning signs as gingivitis, it is important that you book an appointment with your dentist for a check up. Why? There is a fine line between gingivitis and periodontitis. It is important to note that gingivitis is a reversible condition that is treated with professional cleanings to remove plaque and calculus build up, along with regular home maintenance that may include a prescribed antibacterial mouth rinse known as chlorhexidine gluconate. Your dentist is able to confirm the extent of your gum disease and plan treatment accordingly. If left untreated or improperly treated, gingivitis will progress into periodontitis, which is irreversible and often leads to tooth loss.

Obtaining regular dental check ups will help keep gum disease under control or eliminated completely. If you are concerned about gingivitis, speak with your dentist or dental hygienist at your next dental appointment.

## **Text № 13**

### **What to Do When You Bite Your Lip or Tongue**

#### **Dealing With Dental Emergencies**

**By Shawn Watson**

#### **Dental Care Expert**

Biting down on your lip or tongue usually happens unexpectedly. Children, though, are at high risk for biting their lip or cheek after being anesthetized for dental work. Most times, it only results in pain, but there are instances where biting down on your lip or tongue requires medical attention.

## What to Do:•

When you bite your lip or tongue, assess the area for any debris, especially if the injury occurred from a fall. Clean the area gently with a clean piece of gauze. If there is debris stuck inside the wound, do not attempt to remove it.•

Control any bleeding by applying firm pressure over the wound, with a clean piece of gauze or a clean towel. If the bleeding doesn't stop, continue applying pressure to the area, and call 911 or head to the nearest medical center for immediate care.•

If the bleeding does stop, apply a cold compress to the area to reduce swelling.•

It may be necessary to take an over-the-counter pain relief medication to manage any discomfort from the wound.•

As the wound heals, inspect it for any signs of infection. If you suspect the area has become infected, see your dentist or physician as soon as possible.

## **Text № 14**

### **What Causes Bad Breath?**

#### **Facts About Bad Breath - Halitosis**

**By Shawn Watson**

#### **Dental Care Expert**

Halitosis -- known as bad breath to most -- is an embarrassing condition that can affect anyone at anytime, and is caused by several factors. The most common causes of bad breath are preventable and easily treated, however certain medical conditions may also cause bad breath. Chronic halitosis may indicate an underlying medical concern that should be addressed by your dentist or medical doctor.

Learn about the most common reasons why you may experience bad breath, and when you should see a dentist for your halitosis.

#### **Cause: The Food We Eat and Digestion**

The food we eat can adversely affect our breath. Odors from garlic, onions, cabbage, and certain spices may result in halitosis when the suspected food is absorbed into the blood stream after digestion. When the blood has transferred to the lungs, the smell from the food is evident when you exhale.

With eating comes digestion, another cause of bad breath. Gasses produced during the digestive process may escape through your mouth, emanating the odor it produces. Poor digestion resulting in constipation and disorders of the bowel may contribute to bad breath again, from the gasses that are produced during this process.

#### Cause: Infrequent Brushing and Flossing

It may seem like an obvious factor, but when you examine how limited and neglected brushing and flossing habits contributes to bad breath, the cause hits you like a brick wall -- decaying food particles and bacteria trapped in your mouth.

When the food we eat is left behind either because it is trapped in hard to reach places such as the wisdom teeth, the tiny hair-like follicles on the tongue, or simply because brushing and flossing is neglected, it begins to decay in your mouth. The human mouth is 98.6 F, an ideal temperature for food to begin to decompose. When you exhale, the odor from the decomposing food, bacteria, and plaque causes the offensive odor.

#### Cause: Oral Diseases and Infections

Periodontal disease is directly related to improper or neglected brushing and flossing. One major sign of this potentially irreversible oral disease is halitosis. The accumulation of plaque, bacteria, and decomposing food particles contribute to bad breath as they destroy the delicate tissue that surrounds our teeth.

The same bacteria that cause gum disease, tooth decay, and abscessed teeth are also responsible for halitosis.

#### Cause: Dry Mouth

Xerostomia is a condition that causes a decrease in the production of saliva, resulting in a dry mouth. Several factors cause xerostomia, some of which may need to be treated by your doctor.

Saliva is necessary to provide lubrication the mouth to allow for proper chewing and swallowing. Saliva naturally cleanses the mouth and helps prevent cavities. If you are experiencing dry mouth, bad breath may occur because the food particles remain trapped in the mouth to rot and cause the unpleasant smell when you exhale.

### Cause: Cigarette Smoking

The effects of smoking on our overall health and wellness are frightening. Over 4,000 chemicals have been identified in cigarettes, 200 of which are poisonous. Lung cancer and COPD are obvious diseases that come to mind when you consider the health risk associated with the habit. But did you know smoking is also a major cause of periodontal disease? How does this relate to halitosis you ask? The smoke produced from a cigarette is inhaled into the lungs, and then exhaled through the nose and mouth. This causes an immediate effect on your breath because the chemicals and residue from the smoke remain in your mouth and airways. Continued use of cigarettes contribute to gum disease, a major cause of bad breath.

### Cause: Medical Conditions

Unexplained or chronic bad breath may be an indication of an underlying medical condition or disease.

Ketoacidosis occurs in diabetics when there is insufficient glucose in the blood for the body to use as energy. An obvious sign of this is a fruity-smelling odor in the breath. People with eating disorders may experience halitosis, as well as frequent dieters. Breath that has a fishy smell or is reminiscent of urine or ammonia may be obvious in people with chronic kidney failure. After prolonged vomiting or if an obstruction is in the bowel, the breath may smell like feces. Sinusitis and lung infections also cause bad breath. Children with a foreign body trapped in their nose may experience halitosis. If suspected, see your doctor.

### Treating and Preventing Bad Breath

In order to treat your bad breath, the root cause of halitosis needs to be identified. Visit your dentist if you experience chronic bad breath (in other words bad breath that never goes away).

Over-the-counter breath fresheners such as gum, mints, breath strips, breath sprays, and certain mouth rinses will only provide a temporary relief from bad breath. These general guidelines will assist you in managing, and hopefully eliminating, your experience with bad breath.

## **Part 2. Cosmetic Dentistry. Fillings. Braces.**

### **Text № 15**

#### **Dental Treatment**

Having dental work completed, such as a root canal, may leave you with a toothache. This may sound contradictory to what dental treatment is intended to do, but there are many dental procedures that may leave you with a small toothache for a day to two after the treatment has been completed. Many patients feel varying degrees of pain or discomfort after dental treatment and, understandably, often feel disappointed -- because they spend a great deal of money to treat a toothache, not create a new one. If the pain doesn't subside, see your dentist.

So you're thinking about getting a dental implant or perhaps you've already made the decision to have one placed. What happens now? To some, just the thought of having an implant surgically placed in their mouth can be very intimidating and scary. It doesn't have to be.

### **Text № 16**

#### **What is a Dental Implant?**

There are now more options to replace missing teeth and one that is gaining in popularity and use is the dental implant.

The implant is usually made of titanium and is surgically placed by a dentist or dental specialist such as an oral surgeon. These screw-like parts are placed into the jaw bone and are meant to imitate the root of the tooth.

#### **How Much Time is Required for an Implant Placement?**

There are several factors that will determine the length of time needed for an implant procedure. •

Your dental health •

The number of teeth involved •

Which teeth are replaced •

If there will be a tooth extracted prior to implant placement

These factors will also determine the total number of visits to the dentist throughout the treatment period. For instance, a single tooth implant surgery can typically take 1-

2 hours from start to finish. This includes time for anesthesia as well as dressing the patient for a sterile surgical environment.

Is the Treatment Painful?

Just as with any surgery, there can be some discomfort. Local anesthesia and/or I.V. or oral sedation are used to eliminate any discomfort at the time of the procedure.

## **Text № 17**

### **What to Expect During a Dental Implant Procedure**

Most patients report that they were much more comfortable following the procedure than they had anticipated. Your doctor will prescribe medications to ease any discomfort that may occur.

Will I Be Given Any Special Instructions to Prepare for Surgery?

Your dentist may provide you with some pre-operative instructions to follow. These may include:•

Having you rinse with a special anti-bacterial mouthwash, such as chlorahexadine.•

Prescribing you antibiotics to take for a few days prior to surgery as a preventative measure.•

Asking you to eat a good breakfast on the day of surgery, unless you are planning on having the procedure done under I.V. sedation. In that case, you would not be eating anything after midnight the night before surgery.•

Having someone available to bring you to the appointment and drive you home if you elected to take an oral sedative or have I.V. sedation.

## **Text № 18**

### **Feed Your Teeth!**

Give some thought to the vitamins, minerals and nutrients needed in your mouth

**By Sanda Moldovan, DDS**

**Dental Care Expert**

The next time you knock back a handful of manufactured vitamins to ensure your body's good health, give some thought to the vitamins, minerals and nutrients needed above the neck—in your mouth.

Teeth are not just hard-as-stone dead objects, but living tissues. Just as other parts of your body require nutrients and nurturing, so do your teeth. The mouth is the gateway to your overall wellness. It requires more care than brushing, flossing and rinsing alone.

Our teeth need to eat! Did you know a nourished tooth has the ability to fill a cavity?! The dentine—just under the enamel can grow and heal itself, but it needs oxygen, nerve supply and nutrition.

Nutritional deficiencies manifest in the mouth. Redness at the corners of the mouth, shiny, glossy tongue, burning mouth, bleeding gums, can all be signs of different deficiencies, such as B-6, iron or vitamin A or C.

Eliminating sugar and adding essential nurturing nourishment with minerals and antioxidants protects your teeth from decaying, promotes disease free gums and keeps harmful bacteria and infections away!

It's not necessary to rush out and buy a bucket load of vitamins if your grocery shopping list includes the right combination of foods which maximize good oral health.

They include:

The B's: 2, 16 and 12, niacin and folic acid work wonders to protect against oral cancer development. Include poultry, bananas and almonds for delivering a rich b combo.

Vitamin A is found in carrots and cantaloupe, but also green leafy vegetables such as spinach, kale and collard greens. 'A' fights cavity causing dry mouth and maintaining healthy gum cells all around the mouth.

Vitamin C deters bleeding gums, loose teeth and cell damage. It will also promote a faster recovery from oral surgeries. Fill your basket with a fresh and delicious array of strawberries, cantaloupe, mangos, kiwi and papaya.



Sunshine, milk, eggs and oily fish are the essence of Vitamin D—which ensures strong teeth and jaw bones.

Calcium in the forms of milk, cheese, yogurt, salmon, sardines and green leafy vegetables is much needed element in preventing bone, jaw and teeth loss. It is a miracle mineral for rebuilding enamel.

Zinc heals cold sores and canker sores and is also important for proper digestion. It's housed in seafood, pumpkin seeds, liver, eggs and lentils.

Your immune system will love you for pumping iron into it by way of fish, dark leafy greens and eggs.

Potassium is found in almost all the food groups—from fruits to vegetables to dairy and legumes. It promotes proper nerve and muscle responses.

This is just a simple sampling of the many necessary and helpful ways to increase your daily intake of vital antioxidants and minerals. By eating the whole fruit or vegetable, we also ingest fiber. Vegetable fibers, from celery or apple for instance, have a cleansing action of the oral cavity, yet another reason why you should have the entire fruit or vegetable and not just a multivitamin or a juice. For more information, consult a nutritionist or an integrative dentist. A recent poll shows that only 4 per cent of dental practices offer nutritional counseling, so it's up to you to seek out resources for additional guidance.

Remember to think before you chew—as to how the foods you choose to eat affect not only the rest of your body—but your mouth. Feed and care for your teeth and gums and they'll function and smile back at you in healthy appreciation.

Dr. Sanda Moldovan is a practicing Beverly Hills and Los Angeles Periodontist and Nutritionist, with a focus on natural health.

## **Text № 19**

### **Fluoride - What is Fluoride?**

**By Shawn Watson**

**Dental Care Expert**

Question: Fluoride - What is Fluoride?

Answer: Fluoride, a naturally occurring mineral, is often added to drinking water and is commonly found in toothpaste. Research has shown that the rate of cavities decreases in areas where fluoride is added to the water supply. Health authorities, such as The American Dental Association and The World Health Organization, both advocate the addition of fluoride to drinking water, and recommend you use toothpaste that contains fluoride, if age appropriate.

If you do not have fluoride in your water, fluoride is also available in:•

Tablets •

Rinse •

Varnish

Foam

Speak with your dentist if you are concerned whether or not you are receiving enough, or too much fluoride daily. Fluoride treatments are also given at your dental office after a cleaning appointment every six months to one year.

## **Text № 20**

### **Dental Sealants**

#### **Not Just For Kids**

**By Lora Dodge**

#### **Dental Care Expert**

In addition to good oral hygiene, including brushing and flossing, there are other ways to protect teeth from decay. Dental sealants can safeguard your teeth against decay-causing bacteria.

What are Dental Sealants?

Dental sealants are made of plastic and are applied to the chewing surfaces of the back teeth to prevent decay. The plastic fits into the depressions and grooves (pits and fissures) of teeth.

The sealants protect tooth enamel from the bacteria and acids that cause decay.

Why Can't I Just Brush and Floss?

While brushing and flossing help to remove food particles and plaque from smooth surfaces of the teeth, toothbrush bristles often can't reach into the tooth's depressions and grooves. Sealants protect those areas and prevent food and bacteria from getting in.

#### How Does the Dentist Apply a Sealant?

Your dentist can apply sealants easily, and it takes only a few minutes to seal each tooth. The dentist will first clean the teeth that will be sealed, which may require the use of a dental drill to open the grooves of the teeth and determine if decay is present. Then he or she will roughen the chewing surfaces with an acid solution, which will help the sealant to stick to the teeth. The dentist then "paints" the sealant on the tooth in a very thin layer. It bonds directly to the tooth and hardens. Sometimes your dentist will use a special curing light to help the sealant harden.

#### Aren't Sealants Just For Kids?

Decay can begin early in life, so dentists usually apply sealants to children's and teenagers' premolars and molars to protect them.

But sealants can protect adults' teeth too! Ask your dentist about sealants for your children or for yourself to see if they would be beneficial.

#### How Long Do They Last?

As long as the sealant remains intact, the tooth surface will be protected from decay. Sealants hold up well under the forces of normal chewing and usually last several years before a reapplication is needed. The risk of decay decreases significantly after sealant application. During your regular dental visits, your dentist will check the condition of the sealants and reapply them when necessary.

#### Are Sealants Safe?

Sealants are extremely safe, though some people may have an allergic reaction to the plastic. Talk to your dentist if you or your children have allergies so that he or she can provide the best treatment options.

#### Will My Insurance Pay For Sealants?

Dental insurance will usually pay for sealants for children and teenagers' permanent molars. If the dentist suggests sealants for other teeth, he or she will tell

you whether or not the costs will be covered. Be sure to check with your dental insurance company about your plan, as coverage may vary.

## **Text № 21**

### **Sugar Free Xylitol**

#### **The Benefits of Sugar Free Xylitol**

**By Shawn Watson**

#### **Dental Care Expert**

Sugar free candy alternatives that contain xylitol are a perfect way to satisfy your sweet tooth and benefit your teeth at the same time. Reducing the amount of sugar in your diet will help to reduce the instance of tooth decay for not only yourself, but also your loved one's.

The festive holiday season is a time to offer your gift of thanks. When shopping for a simple gift, many people opt for the traditional box of chocolates, or package up their home made baked goods to give as a gift, all of which are generally packed full of cavity causing sugar.

Valentine's Day is traditionally a time to impress that special "someone" with a lavish gift, romantic dinner, and the traditional box of chocolates that has been exquisitely wrapped with silky, red satin, in a heart shaped box. Children, on the other hand, could care less how the candy is wrapped, as long as it is sweet enough to satisfy their sugar craving; bring it on. Now, enter Halloween night. After a long night of trick-or-treating, children return home with mounds of candy that could last an entire year!

Considering sugar is the fuel that feeds the bacteria that causes plaque and ultimately tooth decay, why not consider a treat that has been sweetened with sugar free xylitol?

Known for it's close comparison to sugar in taste and volume, sugar free xylitol has been shown to reduce tooth decay, stop the progression of existing decay, and in some cases reverse existing tooth decay that was previously detected in the tooth.

The bacteria that is responsible for tooth decay is not able to utilize xylitol as a energy source.

If used on a regular basis; three to five times daily, sugar free xylitol will prevent the bacteria from multiplying, resulting in less plaque accumulation. The occurrence of decay will decrease due to the absence of the acid produced from plaque.

The most common place you will find xylitol is in sugar free chewing gum. You can also indulge in chocolate that is sweetened with xylitol and hard, novelty type candy that has all the sweet sugary goodness as its sugar infused counterpart.

## **Text № 22**

### **Ingredients to Keep Your Smile in Top Shape**

**By Lora Dodge**

#### **Dental Care Expert**

A handy reference guide to some key ingredients and their benefits to your oral health is listed below. Enjoy your favorites at any time to achieve a healthier, whiter smile.

#### **Basil**

A natural antibiotic, reduces bacteria in the mouth.

#### **Broccoli**

Forms an acid-resistant film on teeth that can help prevent enamel erosion.

#### **Carrots**

Full of Vitamin A which is absolutely necessary for the formation of tooth enamel. This and all crunchy vegetables also cleanse and stimulate your gums, making them healthy.

#### **Cheese**

Offers the benefit of lactic acid to help prevent tooth decay.

#### **Celery**

Activates saliva production, which assists in cleansing food particles from the teeth and dilutes sugars or acids in the mouth. Chewing celery also massages the gums.

### **Ginger**

An anti-inflammatory to support healthy mouth tissue.

### **Green Tea**

Contains an antioxidant called catechin (found in green tea too!), which reduces bacteria growth that causes gingivitis.

Kale or Chard

High in minerals that support tooth structure.

### **Kiwi**

Packs more Vitamin C than any other fruit. A lack of Vitamin C can break down the collagen network in your gums, making them tender and more susceptible to bacteria and gum disease.

### **Lemon**

A natural “whitener” and assists with pH balance in the body.

### **Onions**

Contains sulphur compounds and reduces certain bacteria that causes tooth decay.

### **Pineapple**

Helps you to produce extra saliva. Combine that with citric acid and you have an all-natural bacteria fighting mouthwash. Also contains Vitamin C and the enzyme Bromelain, promoting a healing alkaline response in the mouth.

### **Quinoa**

Pronounced “KEEN-wah” and is a super grain with a load of minerals including Calcium, Magnesium, Manganese, and Phosphorus to strengthen teeth.

### **Salmon**

A great source of Vitamin D making it easier for teeth to get the full power of calcium from foods you are eating.

### **Sea Salt**

Offers a blend of minerals needed to mineralize and strengthen teeth. Himalayan or Celtic is suggested.

### **Sesame Seeds**

These “little scrubbers” reduce plaque, and due to their calcium content provide a necessary mineral for teeth. Nuts in general have a high pH, thus are protective for teeth by managing pH balance in the mouth.

### **Shitaki Mushrooms**

Contain a sugar called Lentinan, which prevents mouth bacteria from growing.

### **Stevia**

A natural sweetener that does not have an “acid effect” on your teeth like sugar.

### **Strawberries**

Great “scrubbers,” high in fiber and lots of Vitamin C, which is great for gum health.

### **Wasabi**

A Japanese version of horseradish, which contains compounds called isothiocyanates to arrest bacteria growth.

### **Xylitol**

A sugar substitute that studies show prevents tooth decay. It is very beneficial in gum and mint form.

\*This is not an all-inclusive list of every food that’s great for your oral health, but a listing of all the key “super-smile” ingredients.

## **Text № 23**

### **Much Ado About Mouthrinses**

#### **Not all mouthrinses are created equal**

**By Sanda Moldovan, DDS**

#### **Dental Care Expert**

It can be overwhelming with so many different products on the dental aisles of your markets and drugstores to find the right products for you. Toothbrushes come in

soft, medium and hard, and there are all kinds of toothpastes in a rainbow of flavors. Waxy, or non-waxy string floss — and all those flossing devices that seemingly never end — and the list goes on.

Over-the-counter mouthwashes have become increasingly popular over the past twenty years, but not all mouthrinses are created equal and knowing your options helps you make better choices.

Many have a favorite mouthrinse, while others can't stand a number of them due to the harsh taste. How do you choose the one that's right for you? Is it even necessary to use a rinse after brushing? These are all valid questions that can baffle you as the consumer.

Oral health conditions which benefit from the more effective mouthrinse include prevention of cavities, plaque, gingivitis, tooth wear and halitosis.

If your concern is cavities for example — there are fluoride mouthrinses available. However, in this instance fluoride trays are more preferable--so that there's less of a possibility of ingesting fluoride during the daily treatment. If you suffer from gingivitis there are mouth rinses that claim to reduce bleeding gums. And some of these are actually quite effective. One of the best is Natural Dentist rinse, which is alcohol free and scientifically proven to do this. The tartar control mouth rinses do not work that well, and you still have to resort to the good ole' tooth brush to remove the plaque manually.

No rinse will ever be as good as mechanical removal of the plaque from the teeth.

While most mouthrinses have good benefits, there are a few which are actually harmful to your mouth and body.

1. Be on the look out for those with a lot of chemicals and artificial coloring, which are not healthy for us, when ingested. Some of these may even cross the mucosal barrier in the mouth and possibly get accumulated with time as toxins in our bodies. Ones with no active ingredients at all, are purely just colored water with good flavor.



2. Carefully read the pH of some of these mouth rinses and you'll find some are quite acidic, as low as 3.0. The pH of the mouth should be around neutral, around 7. Research has shown that below pH of 5.5 teeth demineralize within half an hour. How do you know what pH your favorite mouth rinse is, you ask?

Get a pH meter or pH strips and test it. It only takes a few seconds. If the pH is less than 4 don't use that rinse, because it may damage your teeth. Our diets are acidic enough as they are, so it makes more sense to choose a mouth rinse which is more alkaline to remineralize the teeth.

There is nothing wrong with choosing not to use a mouth rinse. Brushing twice a day and string or water flossing is effective at plaque control without a rinse. However if you love your mouthwash because of that fresh taste, just make sure it's not damaging to your teeth: pick one that's pH balanced and alcohol free.

Some mouthrinses contain a significant amount — up to 27% volume — of alcohol. Alcohol provides an antibacterial effect, acts as a carrier of flavor and adds a 'jolt' to the mouthrinse. However, debates over whether or not alcohol consumption contributes to oral cancer have ensued for several years now. Better safe than sorry until all the facts from studies are in might make alcohol-free mouthrinses a more favorable option. There are many available on the market and it's been proven that they can often be as effective as those containing alcohol.

Dr. Sanda Moldovan is a practicing Beverly Hills and Los Angeles Periodontist and Nutritionist, with a focus on natural health.

## **Text № 24**

### **Cosmetic Dentistry- Veneers, Crowns, Bonding, Tooth Whitening**

Cosmetic dentistry has never been more popular and accessible for anyone looking to improve their smile. Find information on treatment options from in-office tooth whitening to full mouth reconstruction.

#### **What is a Gold Crown?**

**By Shawn Watson**



**Dental Care Expert**

Question: What is a

Gold Crown?

There are many different types of crowns used to restore a tooth. Here, we take a look at gold crowns and why they have been used in dentistry for a number of years.

Answer: Gold crowns are one of the classic types of dental crowns used in dentistry.

There are two types of gold crowns used to restore a tooth. The full gold crown is made entirely from gold or gold alloy.

A porcelain fused to metal crown (PFM) is made from a combination of gold and porcelain. In regards to the gold, there are three types of alloy used for fabricating gold crowns:•

High Noble Alloy - Precious Metal - Made from, at a minimum, 60% high noble alloy. This includes gold, platinum and palladium. If using a combination of these alloys, at least 40% must consist of gold.•

Noble Alloy - Semi Precious Metal - A noble alloy consists of 25% precious metal.•

Non-Noble Alloy - Non-Precious Metal - Made from less than 25% precious metals, noble alloy generally is made from a combination of nickel, chromium, and gold.

Why Are Gold Crowns Recommended?

Gold crowns are able to withstand heavy forces from chewing. They do not chip or break, making them a long lasting dental restoration. If a tooth with a gold crown breaks, it is generally because the underlying tooth structure has fractured or decayed.

Gold crowns are not immune to becoming loose, especially if you are eating foods and candy that are harmful to crowns and bridges.

Gold crowns also cause the least wear on the opposing tooth. For patients that grind their teeth or have a heavy bite, a gold crown will typically cause the same amount of wear on the teeth, compared to the tooth's natural enamel.

Gold crowns are used primarily to restore molars and premolars because of their classic yellow or white gold color. There are instances where people request gold crowns for their front teeth - think Flava Flave and many other well known rappers that choose gold crowns as a fashion statement.

**Should I Consider a Gold Crown?**

Selecting a gold crown for your tooth is a personal choice, however your dentist may recommend a gold crown if you exhibit heavy wear patterns on your teeth. People with metal allergies, such as a nickle allergy, should ensure their dentist is made aware of their allergy before a gold crown is fabricated. High noble alloy that contains no nickle or other common metals that cause allergic reactions should be carefully used if you do in fact have a metal allergy.

**Does a Gold Crown Cost More?**

Many dentists have a specific base price for all of the crowns they offer their patients, however because gold is a very expensive alloy, a gold crown may cost more than a porcelain crown. The increase cost is generally reflected in the laboratory charge, not your dentists fee.

**The Gold Standard**

Gold crowns are an excellent choice for patients that are not necessarily concerned about having an entirely white smile. Gold crowns are, in fact, an attractive restoration and offer a long life. If you require a crown, speak to your dentist about the many different crowns that are available.

**Text № 25**

**What are Dental Crowns?**

**By Alex Naini, DDS**

## Cosmetic Dentistry Expert



Whether from neglect, genetics, or just bad luck, problems such as a broken tooth, discolored tooth, or cavity filled tooth can happen to anyone. When it does, it is assuring to know that today's cosmetic dentist has many options at hand to fix the problem. When deciding how to approach fixing a problem, the dentist will consider many factors – severity of the decay on the tooth, size of the crack, overall mouth health, age, etc.

Once these factors are considered, they can then decide on a method of treatment (e.g. crown, bridge, veneer, bonding, etc...) to restore the tooth. One of the most versatile options is the porcelain crown.

### **What is a Crown?**

A crown is essentially a cap that fits over the existing, problematic tooth. When in place, the crown looks like a totally healthy, natural tooth while completely hiding the troubled tooth. While there are occasionally crowns made from metals or plastic (resin), most dental crowns these days are made from porcelain.

### **Material Types**

Crowns can be crafted from a number of different materials, each having advantages and disadvantages. These days the most commonly used material is porcelain, however metal or porcelain fused to metal is also used in many cases. All Porcelain crowns are favored by dentists due to their natural appearance, strength,

ability to color adjust, and ability to resist stains. However, while very durable, all porcelain crowns aren't quite as durable and wear-resistant as metal crowns.

The cost for a porcelain crown can vary greatly between dentists, type of material and quality of laboratory used, but generally falls somewhere between \$1200-3000.

Metal crowns are very strong and can last a long time. They are very resistant to chipping or breakage. In addition, sometimes less of the existing tooth needs to be removed with metal crowns versus porcelain crowns. While these are advantages, the obvious biggest disadvantage is the un-natural color. There is just no way to blend the metal color into a mouth full of white teeth. However, while most would not consider metal crowns for the front of their smile, sometimes it is an alternative for out-of-sight teeth in the back of the mouth.

On occasion dentists will use stainless steel for crowns. Stainless steel is generally used for temporary crowns to protect the existing tooth from further damage while a permanent crown is being made, or, more commonly, used for children to cover a baby tooth that will eventually fall out.

What to Expect? Getting a crown is typically a two-step process. Proper preparation of the existing tooth is a crucial step in the crown installation process. Once your dentist has ensured that decay and other issues around the troubled tooth have been remedied, it is time to prepare the tooth. To do this, the dentist must remove portions of the bad tooth to make space for the crown to fit over it. The dentist will then take an impression of the tooth (and surrounding teeth) using impression material or a digital impression technique. The impression is then sent to a dental laboratory where the actual crown is manufactured, or made in office with a milling machine. It will typically take about two weeks to get the finished crown back from the lab. In the meantime, your dentist will fit you with a temporary crown to keep the prepared tooth protected while awaiting arrival of the permanent crown.

While your new crown will be stain resistant and resist chipping and breakage to some capacity, it is still essential that you practice standard oral hygiene practices around the new crown as the crown does not protect the underlying tooth from decay

and other problems. This will keep cavities from developing under (and around) the crown. The dental crown can be cleaned as part of your regular 6-month cleaning. For more information about the dental crown option, contact your local dentist.

## **Text № 26**

### **What is Cosmetic Dentistry?**

#### **Cosmetic Dentistry Categories**

**By Alex Naini, DDS**

#### **Cosmetic Dentistry Expert**

A Google search for the term “cosmetic dentistry” yields approximately 4.46 million results. However, even with this high level of interest, many patients still struggle with understanding whether to see a general or cosmetic dentist for a specific procedure. So, what exactly is cosmetic dentistry as compared to general dentistry or other niche specialties?

What began as simply the repairing and replacement of damaged teeth has developed into a much broader discipline today.

Modern cosmetic dentistry is generally considered to be any procedure that enhances the appearance of the teeth. While a cosmetic dentist also performs routine care such as regular check-ups, x-rays and fillings, most of their work falls into one of the following main areas:

**Teeth Whitening:** Teeth whitening is the most common cosmetic procedure today. Teeth whitening can instantly (depending on the method used) reverse years of discoloration and create a beautiful, bright new smile. There are three main options for whitening teeth - over the counter products, take home kits from the dental office and in-office whitening. The in-office method is far superior in terms of overall effectiveness, but is the most expensive.

**Porcelain Veneers:** Porcelain veneers consist of several thin layers of porcelain combined with a special adhesive layer. The very natural looking, stain resistant veneers are then bonded to the front of the existing tooth.

Porcelain Crowns: Similar to veneers, porcelain crowns restore a tooth to original function and improve the overall appearance of the tooth by replacing the exterior part of the tooth.

Crowns fit over the existing tooth instead of on the front of the tooth like veneers.

**Orthodontics:** Orthodontics deals with the position of the teeth. Usually this results in straightening the teeth. Unlike times past, there are now two options for achieving this goal – conventional braces with wires and brackets and the newer option of invisible braces (clear aligners). Treatment with the clear aligners consists of a sequence of removable trays that are used to straighten the teeth. The trays fit over the teeth, somewhat similar to a thin mouthguard. While the outcome of the two methods may be similar, there are advantages and disadvantages to each.

**Bite Adjustment:** A bite adjustment is a procedure performed to re-align teeth so that they line up in an ideal manner. This is typically done to eliminate teeth grinding and the headaches and pain that result from the grinding.

**Tooth Contouring:** Tooth contouring is reshaping the existing teeth to make them look and feel better. In some cases removing small amounts of tooth structure to help blend the misaligned tooth in the smile is what is needed. In other cases, your cosmetic dentist plays with the way light reflects off of the contoured teeth giving the illusion of straighter teeth. Sometimes tooth contouring can be done in lieu of veneers or bonding.

**Gum Lift:** A gum lift is a procedure that reshapes the gum tissue to create the appearance of larger/longer teeth.

**Repair Chipped Teeth/Bonding:** Bonding is a process generally used for repairing chipped teeth. Composite bonding material is used to replace lost parts of the tooth. The color of modern bonding materials can be adjusted to any shade to perfectly match the surrounding teeth, resulting in a repair job that shows no signs of breakage and repair.

**Dental Implants:** An implant is a system that recreates the tooth root and connects directly to the jawbone. A crown is then connected to the implant to recreate the feel and look of a natural tooth.

**Tooth Colored Fillings:** Long-gone are the days of metal (amalgam) fillings. Today, dentists can use a composite resin material made of a blend of plastic and glass to fill the spaces left by cavities. Not only does the composite filling look more natural (can be color adjusted), it is also more pliable than metal fillings, helping you avoid tooth breakage.

**Porcelain Fixed Bridges:** A porcelain fixed bridge is used to replace or repair a single tooth or multiple teeth. The bridge uses the existing teeth as a foundation. The porcelain bridge looks, feels and functions like normal teeth.

While this list is not all encompassing, it is a starting point for a discussion with your cosmetic dentist as you begin the process of creating that smile you have always dreamed of having.

## **Text № 27**

### **Different Types of Fillings**

**By Lora Dodge**

#### **Dental Care Expert**

So, your dentist tells you that you have a cavity and need a filling. What exactly does that mean and what is a filling? When your tooth has decay present, that decay needs to be removed by the dentist. Once the decay is gone, the dentist will need to place a filling where the decay used to be. A filling is the most conservative way of restoring a tooth.

While the two most common types of fillings are the silver amalgam and tooth-colored composite, there are other options out there for you also.

Here's the scoop on the different types of fillings that are available along with their advantages and disadvantages. •

Silver amalgam is probably the most widely known filling material. Amalgam is made up of a mixture of silver, tin, zinc, copper, and mercury, with mercury being



nearly 50% of the mixture. The popularity of amalgam among dentists is due in part to its low cost as well as its strength and durability. And even though they are not aesthetically pleasing, these fillings can typically last 15 years or longer. These fillings are also fairly easy to place in the tooth and there is no concern about contamination from saliva or blood. The disadvantages of this material, is that it is prone to expansion and contraction and more likely to cause your tooth to crack. This fluctuation also creates open spaces between the filling and the tooth that allows food and bacteria to become trapped, enabling cavities to form. There is also the controversial mercury that is present in these fillings. •

Composite fillings are very popular because of the tooth-colored appearance that can be matched to the shade of your existing teeth. Your dentist, using a bright blue light (known as the curing light), which hardens the soft material, places composite fillings. Although they are not as durable or long lasting as its amalgam counterpart, composite fillings are becoming the most commonly used material in dental fillings. Composite fillings are made of a resin/plastic material which makes them more expensive than the silver amalgam fillings and they typically need to be replaced every 5 years or so. •

Ceramic fillings are made of porcelain and are both durable as well as aesthetically pleasing. The material is more expensive than the other filling materials, but ceramics are tooth-colored and more resistant to staining and abrasion than composite resin. The disadvantages of using ceramic is that it is more brittle than its composite counter-part and it needs to be large enough to prevent it from breaking, so the tooth must be reduced in size to make room for the extra bulk. These ceramic restorations are typically referred to as inlays or onlays. •

Glass ionomers are made of glass and acrylic and typically lasts less than 5 years. They are a good choice for children whose teeth are still changing. Glass ionomers release fluoride, which can help protect the tooth from further decay. The disadvantages of glass ionomer fillings are they are significantly weaker than composite resin and much more likely to wear or fracture. Traditional glass ionomer does not match your tooth color as precisely as composite resin. •

Gold fillings are not as commonly used and are an expensive alternative but the gold material is sturdy and non-corrosive. Although having the gold filling placed is not convenient (it takes more than 1 office visit to fit them properly), it can last for over 15 years. It may be difficult to find a dentist who offers gold foil as an option because it is being replaced by other materials that match the color of your teeth.

## **Text № 28**

### **Are There Side Effects From Whitening Your Teeth?**

**By Shawn Watson**

**Dental Care Expert**

Question: Are There Side Effects From Whitening Your



Teeth?

A whiter smile doesn't come without a list of possible side effects associated with tooth whitening products. Even though tooth whitening is considered to be a relatively safe procedure, this list of tooth whitening side effects should be considered before you make the decision to whiten your teeth.

Answer: Most people that use tooth whitening products experience little to no side effects and are satisfied with the results, but yes, there are many people that may encounter one or more of the following side effects associated with teeth whitening:

Tooth Sensitivity - Sensitive teeth may be noticed during the process of whitening and for a short period after the procedure. This is due to the exposure of the dentin layer during the whitening process. People with tooth sensitivity prior to whitening should consult their dentist before whitening their teeth for advice on what teeth whitening options are suitable for their situation, or a list of brands of whitening products that may help alleviate the increased level of sensitivity during the whitening process. •

Soft Tissue Irritation - Also known as a chemical burn, soft tissue irritation may occur if the whitening solution is exposed to the gum tissue during the whitening process.

When soft tissue irritation occurs, the tissue generally appears white immediately after it has come into contact with whitening solution, especially when exposed to professional in-office teeth whitening solution. The tissue does return to normal very shortly after exposure to the chemicals in the whitening product, but many patients are alarmed when they see their gums after an exposure to a high concentration of hydrogen peroxide or carbamide peroxide. A prolonged exposure to teeth whitening gels or solution on the gum tissue also may result in the inflammation and redness of the areas affected by the whitening solution. And in extreme cases of soft tissue irritation from whitening solution, bleeding and pain in the gum tissue may occur.

Connect With Your Friends Online. Join the Facebook Community - Free! •

Undesirable Results - Depending on the initial shade of the tooth, the results achieved after whitening your teeth may not be favorable. There are cases where people with heavy staining or internal tooth discoloration do not notice a change in the shade of their teeth after whitening their teeth. People who whiten their teeth too often may notice their teeth begin to appear gray or translucent, opposed to the creamy white shade everyone desires to see after whitening their teeth.

Before you decide to whiten your teeth, it is best to consult with your dentist. Your dentist will assess your teeth to see if you are an ideal candidate for tooth whitening procedures, and from there, you can choose whether or not you opt for professional

in-office whitening, professional take-home whitening, or over-the-counter tooth whitening options.

## **Text № 29**

### **What You Can and Can't Eat With Braces**

#### **Making The Best Food Choices While You Wear Braces**

**By Shawn Watson**

#### **Dental Care Expert**

Do you know what you can and can't eat with braces? Having braces doesn't mean that you will be living on pureed, bland foods during your treatment. Knowing what foods you can and can't eat with your braces will help you achieve the optimum results after your orthodontic treatment has been completed. Preventing damage to the archwires, bands, and brackets as well as keeping your teeth free from tooth decay during your treatment, should be your number one concern.

I have compiled this list of food that you can and can't eat with braces, to take the guesswork out for you, and keep your food choices enjoyable and



tasty.

**Fruits**

Fruit is an essential part of a healthy diet. It is recommended that children eat one to two cups of fruit daily. Even though fruit is a great choice for your health, how you choose to eat it is a challenge when you have braces.

Hard fruit, like an apple for example, can be very difficult to bite into, because of the brackets that are on the teeth. Unripe pears and peaches pose the same problem. Cut hard fruits into bite-sized pieces, so they can be chewed with the back teeth.

Soft fruits are easily bitten into for braces wearers, but when teeth are tender, especially after a wire change, even the softest fruit can be a nightmare. Choose fruit such as blueberries, raspberries, and blackberries for days when your teeth are tender.



## **Vegetables**

Vegetables provide us with the vitamins and minerals that are essential for growing bodies. Children should consume one to two cups of vegetables daily. Like fruit, vegetables need to be prepared slightly differently for people that wear braces. Hard, raw vegetables, such as carrots, cauliflower, and broccoli are tough to bite into with braces and may even pop a bracket off the tooth. When preparing raw vegetables, cut them into bite-sized pieces that can be easily chewed with the back teeth.

Most vegetables may be enjoyed cooked -- which is a braces wearer's dream because cooking automatically softens the food. If you are having a problem eating your favorite vegetable raw, try seaming it until it's tender, or boil it until it's soft.

## **Grains**

Grains provide us with fiber, iron, and many other nutrients that we require. Choosing whole grain products provides the optimum nutritional value for your buck. Grains are generally an easy food group for braces wearers, because most grain products are very soft and easily chewed. However, there are a few grain products braces wearers should be cautious of.

Eating hard crusted breads, such as a bagel, is difficult for someone with braces because it is very hard to bite into. Soften breads by warming them or break them into bite-sized pieces.

Unground whole grains are also a challenge because they become stuck in between the braces, attachments and the even the teeth, which makes them very hard to remove. Avoid small seeds and grains.

## **Dairy**

Strong bones and teeth rely on a diet that is rich in calcium. Dairy products provide us with calcium, vitamin D, potassium, even protein. Dairy products are an excellent choice for braces wearers, because most dairy products are soft and require very little chewing.

Select from a variety of of dairy products, such as low fat milk, low fat cheese, and low fat yogurt. If you are lactose intolerant, soy-based dairy products are a great dairy alternative that are also generally soft and easily consumed with braces.

When eating soft cheese, you may find that it becomes stuck between the braces and wires. Try to prepare bite-sized pieces of cheese, or purchase a cheese string product that is easily peeled apart.

## **Meat**

Meat supplies us with protein and iron -- both essential, especially for growing bodies. Meat, however, poses a problem for braces wearers because it's fibrous, making it hard to chew. Stringy meat will often become stuck in the braces, or between the teeth. Tough cuts can be so difficult to chew, they end up loosening the bands that surrounds the molars. Eating meat right from the bone, such as chicken wings and ribs, becomes dangerous for your braces because you risk popping off a bracket. Select lean, tender cuts of meat and cut them into bite-sized pieces before you eat it. Also, remove meat from the bone before eating. Some food choices include fish, chicken, and lean beef or pork. Tofu also is a good vegetarian option, since it's soft.

## **Nuts and Seeds**

Carefully selecting your choices from this vegetarian group will help keep your braces secure, because eating nuts and seeds can be very challenging for braces wearers.

Nuts and seeds are very hard, and they are very small -- two challenging aspects for someone that wears braces. Biting down on a hard nut or seed can easily

break a band or bracket off from the tooth. Nuts and seeds are also responsible for bending the archwires, even though they may not actually break anything off. A bent wire can actually move the teeth into a undesired position, setting you back valuable treatment time.

Select nut spreads, such as peanut butter or almond butter, or coarsely grind your favorite nuts and seeds, and use them as a topping for your yogurt.



### **Candy - The "Non" Food Group**

Candy isn't an official food group, but let's face it most people do enjoy the occasional candy from time to time. For someone that wears braces, eating candy can be very destructive to their braces, and possibly to the tooth's surface as well.

Candy can be broken into two groups: hard and sticky. Morsels of toffee will adhere to the brackets and bands, which can easily break them off. Hard chocolate covered nuts will do similar damage similar to its stick counterpart. Gummy candy will bend archwires and get stuck under your braces attachments.

Eating candy should be avoided during your orthodontic treatment. Teeth are more vulnerable to decay while in braces, therefore eliminating excessive sugar is very important during your treatment.

### **Bringing It Altogether - Enjoy the Variety**

Eating with braces doesn't have to be boring. Now that you know what you can and can't eat with braces, you are able to choose from a wide variety of braces friendly foods, that are readily available and easily prepared. Try to select a variety of foods -- from all of the food groups listed above. Ensuring that your diet remains healthy during your orthodontic treatment is just as important as your overall treatment's outcome.

If you are having a hard time connecting with your "inner chef", and you find your braces friendly foods are bland, and just plain boring, try searching for a braces friendly cookbook or recipes that will help bring the excitement back to your taste buds.

### **Text № 30**

#### **What are Braces?**

**By Shawn Watson**

**Dental Care Expert**



Brackets are a small square or round attachment placed on each tooth during specific stages of orthodontic treatment and are commonly known as braces. They may be made from:•

Nickle Titanium •

Silver •

Acrylic or porcelain

Gold.

Brackets are temporarily cemented to the front of your tooth with cement that contains fluoride to protect the tooth surface. If the bracket comes off the tooth, that specific tooth is no longer moving.

This may delay treatment time if its not replaced in a timely manner. Some instances that cause the bracket to "break off" are:•

Eating hard, crunchy, or sticky foods, and biting with your front teeth. •

Habits such as fingernail biting or chewing on pen or pencil.

As you progress through your treatment, the way your teeth bite together may change. In some cases, this may also cause a bracket to “pop off.”



The bracket has a small space horizontally through the middle, to allow the archwire to fit into it. Some brackets may have an extra attachment called a ball hook to allow for the use of other elastics or attachments.

The archwire is secured to the brackets with little rubber elastics that are available in many colors, a continuous chain of elastics, or metal ties.

### **Text № 31**

#### **Myobrace: Alternative to Traditional Braces**

**By Jared Young, DDS**

MyoBrace is a natural approach to straightening teeth without the use of metal braces or other oral appliances. Using myofunctional orthodontic techniques to address the poor oral habits (known as myofunctional habits) MyoBrace attacks the underlying causes of crooked teeth and uses light, intermittent forces to align the teeth. Myofunctional orthodontic techniques have been practiced by Orthodontists and Dentists around the world for over 50 years.

Though the concept is not new, the system Myobrace is revolutionary in the treatment of aligning crooked teeth. Through a series of exercises and an appliance worn overnight and briefly during the day, MyoBrace can properly and naturally align teeth without using conventional brackets and wires or clear plastic aligners. The individual relearns healthy and proper jaw positions and breathing, thus helping the pallet to form natural, well-supported arch. The Myobrace appliance is convenient and easy to use with a flexible outer area and a rigid core that wearers typically adjust to within days.

#### **Braces Vs. Myobrace**

Traditional orthodontics often employ tooth extractions in order to make additional room in the jaw for the remaining teeth to align properly. Myobrace works to correct alignment of teeth and the jaw without painful extractions, without the uncomfortable wires and brackets that can abraid and cut the insides of the mouth.

The traditional orthodontia practice of using braces for proper tooth alignment still has a place in correcting misaligned teeth, but now there may be a better long term solution for a healthy natural alignment that will last.

Technology that resists extracting healthy adult teeth and allows opportunity for healthy development of mouth's natural potential to hold the teeth intended to fit in it. The technology used to develop Myobrace is focused on creating a foundation for proper tooth alignment using healthy and correct jaw placement, breathing, swallowing, and tongue placement through gentle promptings and practice.

By correcting improper jaw placement and oral habits teeth are less likely to drift after treatment as so often seen with traditional braces post treatment. The reason for most tooth movement after traditional braces can be linked to an unstable, underdeveloped arch. MyoBrace techniques work because rather than moving the teeth around through tugging, pushing and pulling with bands and wires the teeth are allowed to align naturally on an arch that is coaxed into proper development thereby allowing for a potentially better, long term solution to crooked teeth.

Also, because the force is gentle and intermittent, it has been shown to be less harmful to existing tooth structure, and it is certainly much less uncomfortable than traditional braces are. While the duration of treatment is comparable to that of metal braces, the Myobrace appliance is worn just one to two hours a day at the patient's convenience and while sleeping. From a cosmetic standpoint, the treatment is so discrete that no one even has to know you're getting it.

#### Additional Benefits

Poor myofunctional habits are also linked to other health issues such as asthma, allergies, and sleep apnea, so patients often report that the benefits of their MyoBrace treatment have extended well beyond straight teeth.

#### Check With a Qualified Dentist

As with most orthodontic methods and procedures, Myobrace is most effective when used in preteens and teens as development occurs. The lack of impractical headgear and lower risk of permanent damage, however, makes it an ideal

orthodontic option for grown patients, and there is a Myobrace line designed specifically for adults.

Though Myobrace is effective for many patients, in a broad range of situations, Myobrace may not be an effective alternative in every situation. Always consult with a dentist to determine the best course of treatment for you.

## **Text № 32**

### **Recovery After Oral Surgery**

#### **Guidelines to Follow After Oral Surgery**

**By Shawn Watson**

#### **Dental Care Expert**

Recovery should be your number one concern after oral surgery. Always follow post operative instruction provided by your surgeon or dentist, to prevent any risk of infection or trauma to the surgical site. Follow these general guidelines after oral surgery for rapid recovery and optimum healing.

#### **Bleeding After a Tooth Extraction**

Bleeding after a tooth extraction is normal and slight bleeding may be noticed for up to 24 hours after surgery. Use the gauze that was provided to you, and bite down with firm pressure for one hour. You should remove the gauze gently. It may be necessary to take a sip of water to moisten the gauze if it feels stuck to the tissue. Doing this will prevent the bleeding from reoccurring. If you continue to have bleeding in the surgical area, contact your dentist or surgeon. They may instruct you to bite on a moist black tea bag. The tannic acid in the tea has been shown to reduce bleeding and assist with clotting.

**Swelling** is a normal response after various types of surgery. Keep your head elevated with pillows as mentioned above. You may use an ice pack on the outside of your face for the first 24 hours after oral surgery. Swelling is usually completely gone within 7 to 10 days after oral surgery. Stiffness in the muscles of the face is also normal and may be noticed for up to 10 days after oral surgery. You may see slight bruising, typically if the surgery involved your lower wisdom teeth. If you have any

concerns about swelling, or swelling has not reduced after 7 to 10 days, contact your doctor.

### **Pain After Oral Surgery and Medications**

Pain after oral surgery varies depending on the extent of the procedure. Your dentist or surgeon will prescribe any necessary pain management medication. Follow the instructions for your medication carefully and always consult with your dentist or surgeon before taking any over-the-counter medications with your prescriptions. If you have been prescribed an antibiotic, always take all of the medication prescribed to you to prevent infection.

### **Rest and Recovery**

Rest for at least two days after oral surgery. Physical activity is not recommended for 2 to 3 days after your surgery. Typically, you should be able to resume normal daily activities within 48 hours after surgery.

### **Oral Hygiene After Oral Surgery**

Vigorous rinsing and spitting should be avoided for 24 hours. Brush gently and floss if able to open wide enough. Lightly rinse your mouth with water, avoiding mouthwash. Let the water fall out of your mouth on its own. After 24 hours, consider rinsing with a saline or salt water solution. This will naturally help keep the surgical site clean, aiding in the healing process. Prepare your saline solution by placing one tablespoon of salt in one cup of warm water. Do not swallow the saline solution. Repeat this as necessary throughout the day. If you have had an extraction, do not attempt to remove anything from the tooth socket (hole). Rinsing lightly will dislodge any food particles from the site.

### **Tobacco Use**

Do not smoke for at least 24 hours after oral surgery. Smoking delays healing, and may cause a very painful infection called a dry socket. This condition is a painful infection that will need to be treated by your dentist. Avoid the use of smokeless or chewing tobacco until complete healing has occurred. If you have had an extraction, the pieces from the tobacco may enter the extraction site, causing pain and discomfort in the socket.

## **Text № 33**

### **What is TMJ Disorder?**

**By Kristin Hayes, R.N.**

#### **Ear, Nose, & Throat Disorders Expert**

Question: What is TMJ Disorder?

Answer: The temporomandibular joint (TMJ) is the joint that joins your jaw to your skull. This joint is in front of the ears; you can easily locate it by opening and closing your mouth and feeling the joint with your fingers. When there is a problem with the joint, the muscles or the ligaments around this joint, the condition is called TMJ or TMJ disorder.

People who have TMJ disorder may have some of the following symptoms:•

facial pain

pain while chewing•

popping or clicking of the jaw•

headaches•

earaches•

difficulty opening and closing the mouth•

locked jaw•

generalized pain and tenderness around the joint•

tinnitus •

a history of poor sleep or a diagnosed sleep disorder

Who Gets TMJ?

TMJ disorders are more common in women than in men, and more common in white people than in African-Americans. Other disorders or conditions that have been associated with TMJ include:

•rheumatoid arthritis

•degenerative joint diseases•

•anxiety or other psychiatric disorders that lead to chronic jaw clenching or teeth grinding

dental malocclusion

- tongue tie (ankylosis)
- bruxism
- some birth defects

#### How Is TMJ Diagnosed?

TMJ disorder is usually diagnosed by an otolaryngologist (ENT). Many individuals seek the help of an ENT because pain from the jaw leads them to believe they have an ear infection. The doctor will perform a physical exam, which could include looking inside your mouth for signs of wear on your teeth from grinding and clenching; assessing your neck muscles for spasms; and signs of joint tenderness. The physician may also measure how far you are able to open your mouth. Sometimes, your doctor will request a CT or MRI scan to get a better look at any damage to the joint.

#### How Is TMJ Treated?

Treatment is based on the severity of the disorder. For minor cases, ice and rest may be the best bet, along with over-the-counter pain relievers such as ibuprofen and acetaminophen. People with a TMJ disorder should avoid chewing gum and, if possible, grinding their teeth and clenching their jaw. Sometimes a bite guard can help with this.

Relaxation techniques at least 30 minutes a day can help. Some people may benefit from physical therapy, muscle relaxants, steroids, friction massage and ultrasonic treatment. In severe cases surgery may be necessary.

### **Text № 34**

#### **Can Adults Wear Braces?**

**By Shawn Watson**

#### **Dental Care Expert**

Question: Can Adults Wear Braces?

Orthodontic treatment isn't just for kids anymore, adults have been asking for years if they can wear braces too. Is adult orthodontic treatment possible?

Answer: Yes, most adults can wear braces. It is important to keep in mind that your dentist will need to assess your current oral health to determine whether or not you are an ideal candidate for braces.

When you are ready to investigate orthodontic treatment further, you will first need to book an appointment with an orthodontist for a consultation, or speak to your general dentist to see if he is willing to treat you orthodontically.

A consultation is a great opportunity ask questions about orthodontics and braces, voice any concerns or fears you may have about braces, and get a rough estimate of the cost associated with braces and orthodontic treatment.

During the consultation appointment, the dentist or orthodontist will give you a general assessment and a sense of whether or not wearing braces could be an option for you. If your dentist is confident that they can be, or he needs more information to determine your oral health, orthodontic records will be recommended as your next step.

If you decide to go ahead with the orthodontic records appointment, your dentist will be able to fully assess your malocclusion by studying both the cephalometric and panoramic radiographs, photos and study models that were made from the dental impressions taken during the records appointment.

Your dentist will put together a treatment plan for you to consider that is based on his findings. There are some cases where there may be more than one option for you to consider.

Some examples would be:

- Only treating the maxillary or mandibular teeth

- Using various appliances throughout your treatment

- Performing extractions, which might be necessary for your treatment to be successful

A final consultation will be scheduled between yourself and the dentist to solidify the treatment plan that you feel best suits your needs, and to discuss and select the type of orthodontic brackets you will be wearing. The final consultation appointment is also used to discuss the cost of your braces, make payment arrangements, and discuss dental insurance matters. A contract is generally signed to

complete the administrative process. Once all is said and done, your first treatment appointment will be scheduled, and your orthodontic journey will begin.

Adult braces and orthodontic treatment is becoming a growing trend. Many adults feel that braces are only for children, and they will look out-of-place or foolish with braces on their teeth. Celebrities such as Gwen Stefani, Tom Cruise, Danny Glover, and Nicholas Cage, have publicly worn braces, proving that even the biggest names in Hollywood are willing to proudly show off their "tin grins."

## **Text № 35**

### **Orthodontic Band - Definition of Orthodontic Band**

**By Shawn Watson**

**Dental Care Expert**

#### **Definition:**

Bands are used in orthodontics to anchor an appliance to the teeth or secure an archwire to the molars. Used on the molars and in some cases the premolars, bands are made from stainless steel and are very similar to a ring. Bands come in different sizes and are custom fit to the tooth using the appropriate dental instruments. They are temporally cemented on your teeth with cement designed specifically for the use with bands.

Bands have attachments similar to a hook to allow for the use of removable elastics or other attachments. The archwire slides into a small sleeve on the cheek side of the band. This allows for the movement or stabilization of the molars. Bands may become loose and this should be reported to the dentist or orthodontist as soon as possible. Some instances that cause bands to become loose are:•

Eating hard, crunchy, or sticky foods on your back teeth •

Habits such as chewing on a pen or pencil •

The cement becomes loose due to wear

Also Known As:Rings, Anchor Band, Ortho Band

## **Text № 36**

### **Why Are Wisdom Teeth Removed?**



**By Shawn Watson**

**Dental Care Expert**

Wisdom teeth are usually the last teeth that erupt -- usually around the age of 17 or 18. Not everyone has their wisdom teeth: most people require wisdom tooth extractions, for a number of reasons. A common misconception about wisdom teeth is they must be removed. Realistically, this is not the case.

Answer: Wisdom teeth are generally removed because:•

They are erupting in to an abnormal position -- tilted, sideways or twisted.

They are trapped below the gum line, or impacted, due to lack of space in the dental arch.

An infection, or pericoronitis, has developed from trapped food, plaque and bacteria.

The way the patient's teeth bite together has changed, causing malocclusion of the teeth and misalignment of the jaws.

The erupted wisdom tooth lacks proper hygiene because it is hard to reach, resulting in tooth decay.

Oral and maxillofacial surgeons specialize in dental surgery. Your dentist may choose to refer you to see a surgeon for your wisdom tooth extractions, or he might perform the surgery in his dental office. The most common reason for a referral to an oral surgeon is because of where the wisdom teeth are positioned and the difficulty level of the extraction. If you request general anesthesia, or IV sedation, you will likely be referred to see an oral surgeon.

The thought of having your wisdom teeth removed can be intimidating. Keep in mind that this procedure is done in your best interest. Recovering from wisdom tooth removal is not as tough as you might think.

When followed accurately, the instructions given to you before your oral surgery and after your oral surgery will ensure that your recovery is as smooth as possible.

## Glossary

### Dental instruments (appliances)



dental drilling engine/machine	зубний двигун / машина для свердління
cotton swabs	бавовняні тампони
dental spoon	стоматологічна ложка
dental plier	стоматологічний
dentist's chair	стоматологічне крісло
smoother	праска
chisel	долото
instruments to remove tartar	інструменти для видалення зубного каменю
needle-holder	голка-держатель
root needle	коренева голка

gauze swabs	марлеві тампони
pulp extractor	пульпоекстрактор
dental tray	зубний лоток
salivary ejector	слиновий ежектор
dental mirror	стоматологічне дзеркало
universal dental unit /set	універсальний стомат. прилад / комплект
water (air) supplying device	пристрій подачі води (повітря)
stopfer / plugger	штопфер/плаггер
dental forceps/ denticeps	зубні щипці
elevator	підйомник
lateral elevator	латеральний підйомник
straight elevator	прямий підйомник

### **Special methods of investigation:**

artificial contrast study	штучне контрастне дослідження
cystography	цистографія
fistulography	фістулографія
sialography	слинографія
facial angiography	фаціальна ангиографія
intra-oral X-ray of teeth	внутрішньо-пероральний рентген зубів
morphologic investigation	морфологічне дослідження
radiologic( al) investigation	радіологічне дослідження
roentgenography/radiography	рентгенографія
electrorentgenography/ electroradiography	електрорентгенографія
facial skull tomography	фаціальна томографія черепу

orthopantomography

ортопантомографія

electroodontodiagnosis

електродіагностичний діагноз

### **Stomatological polyclinic:**

dispensary observation

амбулаторне спостереження

stomatological patients

стоматологічні пацієнти

Dental Health Service

стоматологічна охорона здоров'я

dental practice treatment/ dentistry

лікування зубів

Dental Orthopedics Laboratory

стоматологічна ортопедична лабораторія

dental surgery

стоматологічний кабінет

Dental Surgery Department

стоматологічне хірургічне відділення

Dental Therapy Department

стоматологічне терапевтичне відділення

Dental Orthopedics Department

стоматологічне ортопедичне відділення

### **Special dental terms:**



toothache/dentalgia

зубний біль

dental anomaly/abnormality

зубна аномалія

dental luxation

зубна люксація

dental bleaching

зубне відбілювання

dental fracture

зубний перелом

dental disorder	зубні захворювання
dental X-ray	зубна рентгенографія
dental health	стан зубів
dental care	догляд за зубами
dental fluorosis	зубний флюороз
dental sensitivity	чутливість зубів
dental calculus	зубний камінь
dental deposit	зубне відкладення
replacing dentin	замісний дентин
recurrent dental caries	рецидивний карієс зуба
arrested dental caries	відновлення каріозного зуба
veneer crown	захисна коронка зуба
root granuloma	коренева гранулема
tooth filling/ dental stopping	зубна пломба
root filling	коренева пломба
permanent filling	постійна пломба
filling materials	пломбуючі матеріали
removal/ extraction of pulp (depulpation)	видалення пульпи
pulp necrosis	некроз пульпи
root pulpitis	кореневий пульпіт
oral cavity sanation	санація ротової порожнини
occlusion/bite	оклюзія / укус
milk occlusion	молочна оклюзія
permanent occlusion	постійна оклюзія
occlusal rehabilitation	корекція прикусу
marked occlusion	виражена оклюзія

edentulous jaw

беззуба щелепа

glossal inflammation/glossitis

запалення язика, глосит

compact-osteotomy of the jaw

компактна остеотомія щелепи

prognathia/progenia

прогнатія, прогенія

retrognathia/retrogenia

ретрогнатія, ретрогенія

### **Dental prosthesis/ dentures:**



dentomaxillofacial prosthesis

зубощелепно-лицевий протез

combined prosthesis

комбінований протез

dental bridge/Pontic

зубний міст

fixed prosthesis

фіксований протез

laminar dental prosthesis

пластинчате зубне протезування

plastic prosthesis

пластиковий протез

whole piece prosthesis

цілий штучний протез

removable denture

знімний протез

rocking denture

шарнірний протез

dental inlays

стоматологічні вкладки

dental clammers

зубні кламери

artificial crowns

штучні коронки

splitting of mobile prosthesis

шинування мобільних протезів

myotherapy

міотерапія

dental correction

зубна корекція

migration of the teeth/ mandibular dentitions

міграція зубів

tooth separation

сепарація зубів

expansion of dentitions

розширення зубних рядів

## RECOMMENDED LITERATURE

### *Basic*

1. Аврахова Л. Я. English for Dentists : навч. посіб. для студ.-стоматологів вищ. мед. навч. закл. III-IV рівня акредитації / Л.Я. Аврахова, Ю.Е. Лавриш. - Київ : Асканія, 2008. - 366 р.

### *Additional:*

1. Bases of Dentistry : учебник / ed. V. O. Malanchuk. - Vinnytsia : Nova Knyha, 2012. - 606 p.
2. Bases of Dentistry: Textbook for Students [Text] : учебное пособие / ed. V. O. Malanchuk. - Vinnytsia : Nova Knyha, 2012. - 609 p.
3. Английский язык. English in dentistry / Берзегова Л.Ю., Ковшило Д.Ф., Кузнецова О.В. - М. : ГЭОТАР-Медиа, 2009.

### Informative resources:

1. Iannelli, Vincent. Understanding the Five Food Groups // Verywell Family. August 03, 2017. URL : <https://www.verywellfamily.com/food-groups-child-nutrition-2633922>
2. Watson Shawn. What to Do About a Loose Orthodontic Band // Verywell Health. 2017. URL : <https://www.verywell.com/my-orthodontic-band-is-loose-what-should-i-do-1059350>
3. Health A-Z. Dental Health // Verywell Health. URL : <https://www.verywell.com/dental-care-4014738>
4. Health A-Z. Dental Conditions // Verywell Health. URL : <https://www.verywell.com/dental-conditions-4013724>
5. Davenport Tammy. What to Expect During a Root Canal. Root Canal Treatments // Verywell Health. 2016. URL : <https://www.verywell.com/what-to-expect-during-a-root-canal-1059014>
6. Watson Shawn. Canker Sore Remedies That Actually Work. Home Treatments and When to See the Dentist // Verywell Health. 2017. URL : <https://www.verywell.com/canker-sore-remedies-that-actually-work-1058925>



7. Dilantin (Phenytoin) Gingival Overgrowth Side Effect. Side Effects on Your Gum Tissue // Verywell Health. URL : <https://www.verywell.com/dilantin-oral-side-effects-1059294>
8. Reasons for Braces and Orthodontic Treatment. How They Improve Your Oral Health // Verywell Health. URL : <https://www.verywell.com/braces-and-orthodontic-treatment-1059330>
9. Watson Shawn. Warning Signs of Gingivitis // Verywell Health. 2017. URL : <https://www.verywell.com/what-is-gingivitis-1058927>
10. Watson Shawn. Recovery After Oral Surgery. Guidelines to Follow After Oral Surgery // Verywell Health. November 06, 2017. URL : <https://www.verywell.com/recovery-after-oral-surgery-1059383>
11. Watson Shawn. Reasons for Braces and Orthodontic Treatment. How They Improve Your Oral Health // Verywell Health. December 06, 2017. URL : <https://www.verywell.com/braces-and-orthodontic-treatment-1059330>
12. Watson Shawn. Root Canal Myths and Half-Truths. Don't let these 5 myths keep you from having the procedure // Verywell Health. August 30, 2017. URL : <https://www.verywell.com/root-canal-myths-1059386>

Навчальне видання  
(англійською мовою)

**ТРЕГУБ Світлана Євгенівна**

**Англійська мова**

**Практикум**

**з реферування фахових текстів з англійської мови для  
студентів 1 курсу медичних факультетів  
(спеціальність «Стоматологія»)**