

## Fluoride and Tooth Decay

Tooth enamel is hard. It consists of many closely-packed rods made of minerals. When you eat, acid forms on the outside of the tooth and seeps into the enamel's rods. This demineralization process can produce a weak spot in the tooth's surface. If unchecked, the enamel can decay and create a cavity.

Fluoride helps prevent tooth decay by slowing the breakdown of enamel and speeding up the natural remineralisation process.

Common sources of fluoride are fluoridated drinking water, toothpaste and mouth rinse. Inform your dentist if your drinking water is not fluoridated. High concentration fluoride gels, mouth rinses, drops and tablets may be recommended by your dentist.

Your dentist may recommend at home fluoride treatments to reverse the decay process. If the weak spot is left unchecked, a cavity may form, necessitating a filling. If decay is allowed to spread, it may penetrate the root and enter the pulp (nerve) chamber, causing an abscess and requiring root canal treatment.

## Plaque and Tartar/Calculus

Patients often confuse plaque and tartar and how they are related to each other. Plaque is a sticky film that constantly forms on all areas of your teeth; it is composed of bacteria, by-products of bacteria and saliva. However, plaque that builds up along the gumline and between the teeth in hard to reach places can be harmful. Plaque is constantly forming on teeth after brushing which is why it is so important to brush twice a day and floss daily.

Tartar (also called calculus) forms when minerals deposit in plaque which is not removed by regular brushing and flossing. This crusty deposit creates a cohesive bond that can only be removed by a dentist or hygienist. The prevention of tartar buildup above the gumline has not been shown to have a therapeutic effect on gum disease.

“Did you know  
it takes 43  
muscles to  
frown, but only  
17 to smile :)”



## Oral Health Guide

This Form is intended to provide you with more information in regards to your Oral Health. Should you have any questions, please feel free to speak to one of your friendly Oral Health Professionals.

### Definition of Ideal Oral Health

- Absence of decay in teeth
- Gums that do not bleed
- Supportive joints, muscles and tissues that are also healthy and disease free
- Teeth that are functional and aesthetically pleasing



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# Proper Brushing

Proper brushing helps minimize the risk of tooth decay and gum disease, the major causes of tooth loss. Use a soft-bristle brush and a Canadian Dental Association approved fluoride toothpaste to remove plaque and food particles. Replace your brush every three months.



On outer and inner surfaces, brush at a 45-degree angle in short, half-tooth-wide strokes against the gumline.



On chewing surfaces, hold the brush flat and brush back and forth.



On inside surfaces of front teeth, tilt brush vertically and use gentle up and down strokes with toe of brush.



Brush the tongue in a back-to-front sweeping motion to remove food particles and freshen your mouth.



# Common Oral Diseases

Dental Caries (cavities); a bacterial infection

- The Mouth is a warm wet environment that is teeming with bacteria, due to the right type of environment and high rate of high quality food.
- Dental Decay – bacteria consume food that is left in the mouth (six carbon sugars) and the by-product of their metabolism is lactic acid which causes a demineralization of the tooth structure
- This loss of tooth structure then further creates a larger area for more bacteria to live, until you have a very large cavity.



Periodontal Conditions; Gingivitis and Periodontitis (loss of attachment, soft and hard tissue)

- Gum Disease (Periodontitis)– this is a process in which foreign bodies (food, bacteria, plaque, calculus) cause an inflammatory reaction in the gum tissue.
- Initially this is seen as inflammation in the gum tissue and bleeding is present, commonly referred to as gingivitis.
- Eventually, the inflammatory process causes a loss of the attachment of the tissue around the tooth and a resorption of the bone around the tooth resulting in pocket formation.
- This pocket makes keeping things clean even more difficult and the process becomes a self-perpetuating problem of increasing severity.

# Proper Flossing

You may experience sore or bleeding gums for the first several days you floss. If bleeding continues after the first week of flossing, call your dental professional. If you have trouble handling floss, ask your dentist about the use of a floss holder, or other types of interdental cleaning aids.



Wrap an 18-inch strand around your middle fingers and hold a one-inch section tightly.



Ease floss between teeth. Clean up and down several times while curving around teeth at the gumline.



Always floss behind the last tooth. Unwind clean floss as you proceed.



Flossing daily removes plaque and food particles between teeth and below the gumline.

## What Causes Sensitive Teeth?

In healthy teeth, porous tissue called dentin is protected by your gums and your teeth's hard enamel shell. When this protection is lost, microscopic holes in the dentin called tubules, allow heat, cold and other irritants to be transmitted back to the tooth nerve triggering pain. Dentin can be exposed by:

- Receding gums caused by improper brushing or gum disease.
- Fractured or chipped teeth.
- Clenching or grinding your teeth.
- Aging process.



# The Facts About Nursing Bottle Syndrome.



Whether they're drinking milk, juice or formula, children who bottle-feed can develop tooth cavities if they're allowed to fall asleep with the feeding nipple in their mouths. Watch for white or discoloured spots on their teeth – the first warning signs of decay. **Babies** may be all gummy smiles when they're born but their teeth have been developing the entire time they were in your stomach. Not surprisingly, your wellbeing and what you eat and drink during pregnancy has a direct impact on the smile of your developing child. Your dental health can also affect the baby in your body; mothers with periodontal disease are more likely to have premature babies.

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# Protect Your Athlete With A Mouthguard

Does your child engage in sports? We recommend a protective mouthguard to prevent traumatic injuries to your young athlete's teeth.

Talk to us today about an athletic mouthguard for your child – we make them right in our clinic.



# “Did you know it takes 43 muscles to frown, but only 17 to smile :)”



## Mom and Dads Corner

Here at Cataraqi Woods Dentistry, we help your children develop a positive attitude about going to the dentist.

We recommend bringing them in for their first dental visit when they are about two years old. This visit will likely not involve any treatment but will serve as an introduction to the world of dentistry.

Depending on what we see in your child's mouth, we may decide to take X-rays at this point but during this first visit, the focus is on getting acquainted, having fun, and starting our relationship off on a positive note.



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All children's teeth begin to form before a child is born. As early as 4 months after birth, the first primary, (baby teeth) to erupt through the gums are the lower central incisors, followed closely by the upper central incisors. Although all 20 primary teeth usually appear by age 3, the pace and order of their eruption varies.

Oral care should begin soon after a baby's birth. Gums should be cleaned after each feeding using a piece of gauze to clean the mouth of residual food (milk) and also to desensitize the child's mouth to having items to clean their mouth going into their mouth.

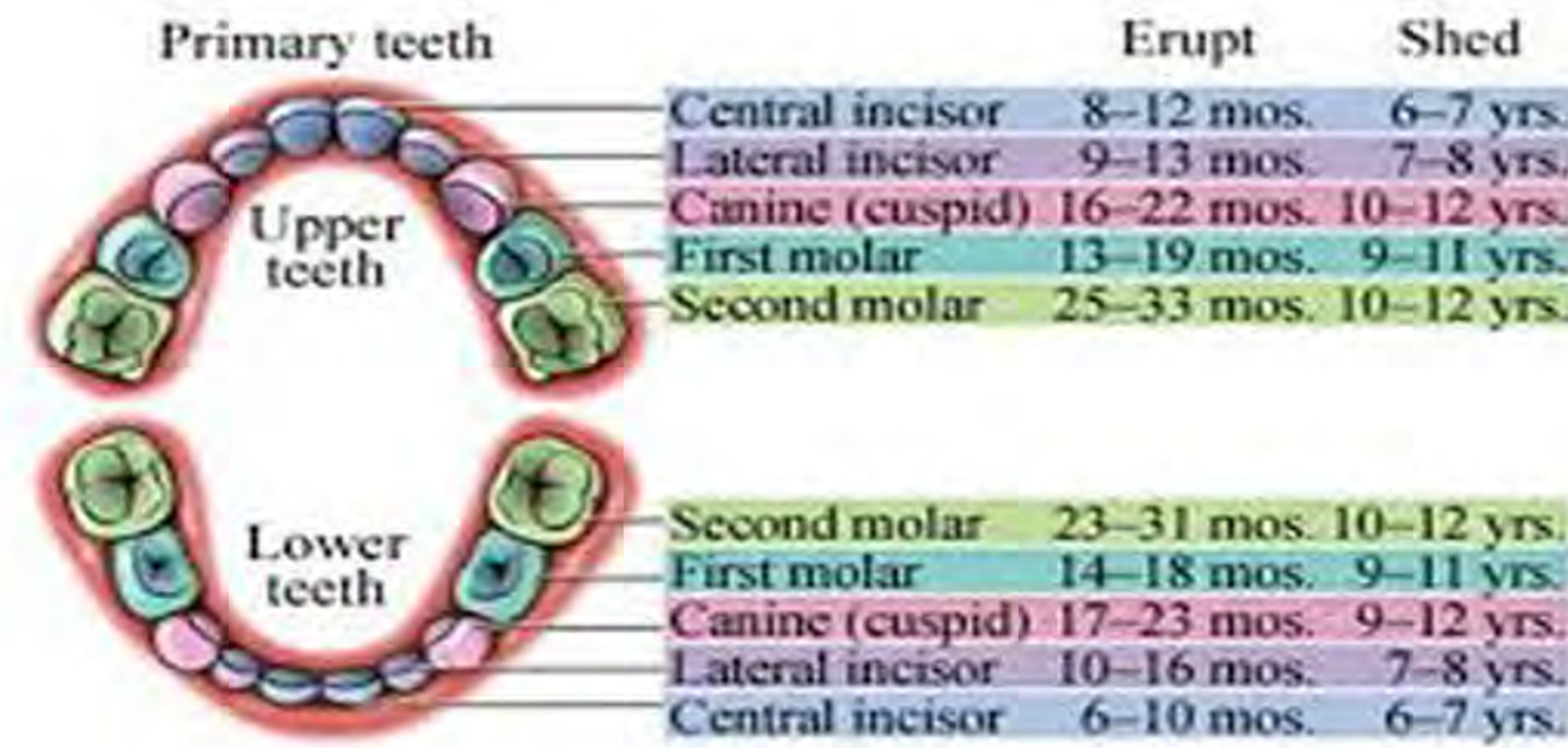
It will be a lot easier to introduce a toothbrush into a child's mouth when the teeth appear, if they have already been desensitized in this manner, you can begin brushing your child's teeth as soon as they appear with a child's toothbrush.

Permanent teeth begin appearing around age 6, starting with the first molars and lower central incisors. This process continues until approximately age 12-14 with the eruption of the second permanent molars. The final teeth to erupt into the mouth are the wisdom teeth, which can erupt anywhere from age 17-21. Adults have 28 permanent teeth, or up to 32 including the third molars (or wisdom teeth).



# Primary Teeth Eruption Chart

**Please note:** When you look at the tooth chart, you are looking into a person's mouth with the jaws open. You're facing the person, so their upper right jaw will be on the left of this image.



**Always clean your infant's gums after feedings.**

Wipe gums with a clean, damp cloth or gauze pad. Parents should brush children's teeth daily with a soft wet toothbrush and no more than a pea-sized amount of fluoride toothpaste.

Schedule a dental visit between 6-12 months of age. Brush at least once daily or as directed by a dentist or physician. **Do not allow** the child to swallow toothpaste - use no more than a pea-sized amount for children under six.

To prevent nursing bottle decay, if you must give your baby a bottle at nap or bed time, fill it with plain water- never with milk, formula or juice.

Your dentist may recommend regular fluoride treatments to strengthen the child's enamel and resist tooth decay. Whenever possible, drink fluoridated water and always use a CDA-accepted fluoridated toothpaste.



# Healthy Foods, Healthy Smiles

Proper nutrition is just as critical to dental health as good oral hygiene and regular dental visits.

As much as possible, limit your child's intake of refined sugar, such as those found in candy, soft drinks, and crackers.

Refined sugar sticks to teeth and reacts to the bacteria in plaque, producing an enzyme that affects the teeth's enamel.

Concentrated natural sugars found in dried fruits such as raisins also have a tendency to stick to teeth, which promotes decay. On the other hand, natural sugar found in fruits and vegetables usually clear the mouth before the sugar is converted.

To prevent decay, teach your child to brush after every meal. If this isn't always possible, then get your child to rinse his or her mouth after eating or taking vitamins or Aspirin, which has an acid base and contains sugar.



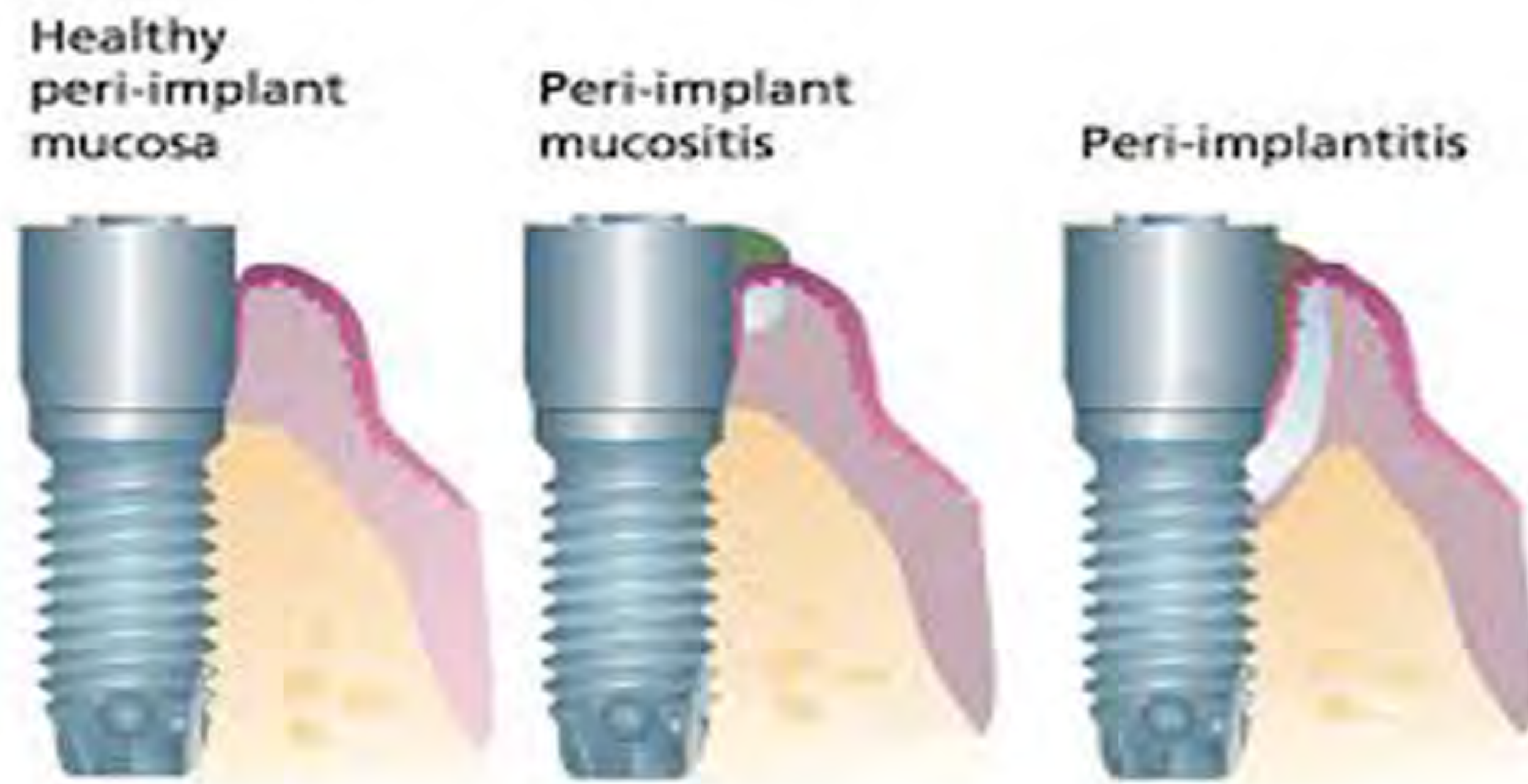
**G**ive your children a head start with good oral hygiene by brushing their teeth even when they're still very young.

No toothpaste should be used at this stage. Even when your child is ready to use toothpaste, squeeze just a tiny drop onto the toothbrush. It is also important to teach your child to spit out excess toothpaste and rinse their mouth with water after brushing.



# Dental Implants

Inadequate oral hygiene can lead to the loss of implants. If oral hygiene is inadequate, bacteria can multiply on the surface of the implant to harmful levels. This will result in inflammation of the gums, which is called mucositis. If left untreated, bone loss around the implant may result, leading to peri-implantitis.



**Peri-implantitis** (inflammation around the implant with loss of bone) can be compared to periodontitis. The two diseases are caused by similar bacteria. This is why untreated periodontitis can increase the risk of failure of an implant. Like periodontitis, peri-implantitis leads to a breakdown of the jawbone. This causes the implant to lose its anchorage and become loose. Peri-implantitis is one of the most common causes of implant failure.

Mucositis and peri-implantitis can develop without any obvious symptoms. This is another reason why regular check-ups with your dentist are important. Mucositis and peri-implantitis do not usually cause pain,. As such, patients often fail to notice the development of these diseases.



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## Dental Implants Post-Op Care



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## Dental Implant Care

You have spent a lot of time and money on your dental implants. It's important to practice good oral hygiene and implant care to avoid complications that could lead to implant failure. Here are some helpful tips so that your implants can last a lifetime:

**Smoking** - This is one of the greatest risks for implant-related complications. You should therefore try to quit smoking.

**Denture Adhesive** - The chemical make up of denture adhesive can cause chronic inflammation in the tissue, which interferes with the healing process of the implants and should not be used at any time.

**Oral Hygiene** - Thoroughly cleaning and caring for the implant during all steps of the treatment is extremely important. Careful attention to your oral hygiene every day is important for the survival of your implant.

**Maintenance** - Visiting your dental practice for regular check-ups (recalls), is just as important. You and your dental team have to decide how often these visits should take place, but they are usually at intervals of three to six months. At these visits, your implants, teeth and gums are checked and professionally cleaned. Especially areas which you cannot reach with home care.

**Dentures** - To allow your tissues to breath and prevent gum disease, it is advised for dentures to be removed at night. This allows your saliva to wash around your mouth naturally cleaning your gums.

## Dentures with Implants Maintenance Costs



**Locator Attachment** - The "gold" structure that attaches to the implant and sits above the gums for the denture to attach to. With normal wear-and-tear it is recommended to be replaced every 5 years. The locator attachment cost \$150.00 each.



**Rubber Insert** - Sits inside the denture and attaches to the locator attachment. There are different colours to represent the weight level of the insert. With normal wear-and-tear it is recommended to be replaced every 6 months to 1 year. The rubber insert costs \$50.00 per insert.



**Hygiene Maintenance** - Caring for dental implants is just like caring for your natural teeth: brush, floss and maintain regular dental cleanings and check-ups, as scheduled. Plaque and calculus accumulate around the locator attachments like a normal tooth, and so it is recommended to come in for a hygiene visit once a year. This hygiene visit is usually around \$55.00.



## Dental Aids Suggested For Implant Care

It's important that you remove plaque from your implants every day through effective tooth brushing and flossing. You must thoroughly clean around both teeth and implants.

Immediately following surgical placement of the implant, the wound is often sensitive, so you may not be able to use a toothbrush in that part of your mouth. You can prevent plaque build-up by using antibacterial mouth rinses and/or gels as recommended by your dentist.

**Toothbrush** - Always brush 2-3 times daily with a soft or extra soft brush, avoid hard brushes as they can scratch and damage the abutment. An **Interdental Brush** allows focus on one implant / tooth at a time.

**Interdental Brush** - Can be found in cone or cylinder shape. Make sure to use the Nylon coated wires not the conventional metal wires and discard when nylon coating is worn down to metal. Use once daily.

**Toothpaste** - Never use toothpaste with whitening or baking soda. It is too abrasive and can cause alteration of the abutment surface.

**Dental Floss** - Place floss around implant, x-crossed and pulled in shoe shining motion. Floss threaders can be used to allow easy access through tight areas.

**Rubber Tip** - Use once daily to stimulate and massage peri-implant tissue. This will also help remove debris accumulation from all surfaces.

**Antimicrobial Agent** - A rinse that can be used after surgery for 30 seconds, twice daily. This will help control plaque formation. Do not use Chlorhexidine rinse more than one month as it can cause staining of natural teeth.



# Dental Implants



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Dental Implants



Cataraqui Woods  
Dental Implant Centre &  
Denture Centre

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## Dental Implant Cost

Our office realizes the value that dental implants present for patients. As such we are proud to use a cost-leadership strategy and excellent supply chain management to be able to provide you with low cost dental implant solutions.

Our fees start at \$1499 for the placement on a single implant and range to \$60000 for the provision of full mouth implants. We also do not charge for additional procedures which may be part of the surgical procedure. Detailed fees are listed below.

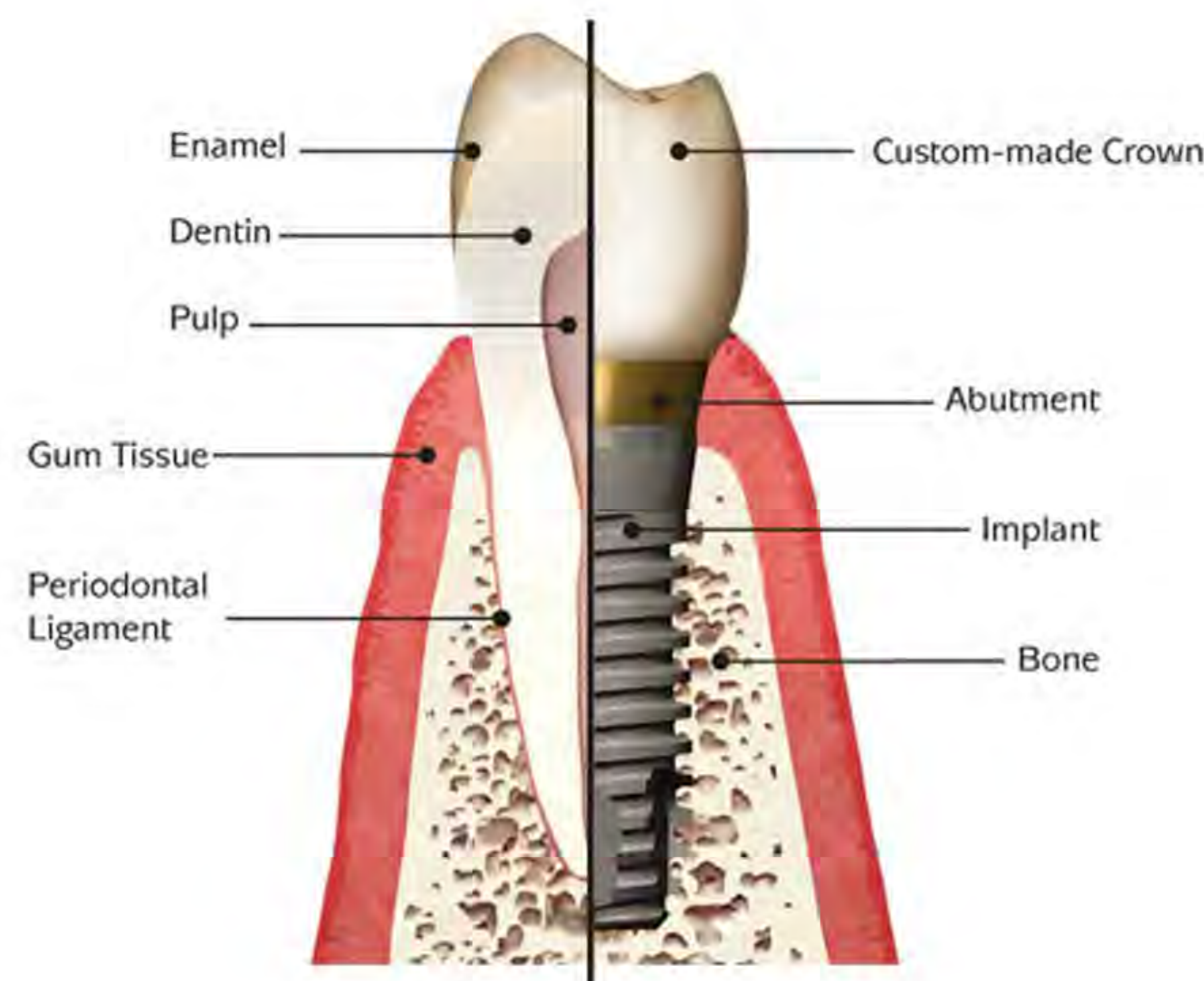
### Examples:

- 1) Single Dental Implant + Crown - **\$1499+\$1501**
- 2) Single Dental Implant + Sinus Lift/Bump/Bone Graft + Crown - **3499**
- 3) Two Dental Implants + Two Locators for your Denture - **\$2999**
- 4) Four Dental Implants + Four Locators for your Denture - **\$5999**
- 5) Five Dental Implants + Fixed Porcelain Upper Bridge - **\$19999 - 24999**
- 6) Ten Dental Implants + Fixed Upper and Lower Bridge - **\$39999 - \$49999**

Dr. Waji Khan has many years of experience in helping patients realize the benefits of replacement teeth that mimic the look and feel of natural teeth.

## About Dental Implants

A dental implant is made from titanium. It bonds to the jaw, much like the root of a natural tooth and permanently replaces a lost tooth. Dental implants are suitable to anyone in good general health. They are put in place during a simple, short surgical procedure done under local anesthetic.



### Dental Implants – They help to restore the look and feel of natural teeth.

The loss of one or more teeth can have a major impact on the function and shape of your mouth and the appearance of your smile:

- Missing teeth can change the shape of your mouth and the look of your face.
- Gaps in your teeth can impair your ability to eat certain foods.
- The spaces left by missing teeth can reduce the attractiveness of your smile and diminish your sense of self-confidence.

## Advantages of Dental Implants

**Improved appearance.** Dental implants look and feel like your own teeth. And because they are designed to integrate with bone, they become permanent.

**Improved speech.** With poor-fitting dentures, the teeth can slip within the mouth causing you to mumble or slur your words. Dental implants allow you to speak without the worry that teeth might slip.

**Improved comfort.** Because they become part of you, implants eliminate the discomfort of removable dentures.

**Easier eating.** Sliding dentures can make chewing difficult. Dental implants function like your own teeth, allowing you to eat your favorite foods with confidence and without pain.

**Improved self-esteem.** Dental implants can give you back your smile and help you feel better about yourself.

**Improved oral health.** Dental implants don't require reducing other teeth, as a tooth-supported bridge does. Because nearby teeth are not altered to support the implant, more of your own teeth are left intact, improving long-term oral health. Individual implants also allow easier access between teeth, improving oral hygiene.

**Durability.** Implants are very durable and will last many years. With good care, many implants last a lifetime.

**Convenience.** Removable dentures are just that; removable. Dental implants eliminate the embarrassing inconvenience of removing dentures, as well as the need for messy adhesives to keep them in place.



# Different Types Of Floss



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Orthodontic Guide



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## Proper Brushing is Vital to Oral Health



poor brushing can cause permanent damage to teeth



proper brushing helps keep teeth clean and healthy.

## Proper Brushing

Be sure to brush your teeth right after every meal and before you go to bed. To brush your teeth properly you must ...

Brush under, above, behind, around all surfaces of every tooth and bracket.

Remember to brush the inside and the outside of both the top and bottom gums.

Rinse your mouth very thoroughly after you have finished brushing.

Be sure to check after rinsing, and if your teeth and brackets are not clean and shining ... Brush again.

## Proper Flossing

Because your toothbrush won't reach between your teeth, brushing alone won't keep your teeth clean and healthy. Flossing can help.

A floss threader, Super-floss or floss Picks, helps you floss with braces on.

## Dietary Instructions

While you are wearing braces, you can eat almost all of your favourite foods. Just be careful with these four troublemakers:

Avoid **STICKY FOODS** like gum, toffee and caramels. These can bend or break your wires.

Cut **HARD FOODS** like apples and carrots into bite-sized pieces so you don't break your appliances.

Avoid **CRUNCHY FOODS** like corn chips, popcorn or nuts. They can snap your wires and brackets.

If you eat **SWEETS**, be sure to brush right away. Eating fewer sweets help reduce cavities.

### The purpose of this diet:

To provide foods (e.g. proteins, vitamins, minerals) essential to normal growth and development including formation of the teeth and their supporting structures.

To prevent cavities by reducing the sugar and starch content of the daily food. Braces provide excellent hiding places for such debris.

Orthodontic appliances are finely adjusted instruments. Foods which can bend, break or loosen the appliance lengthen time with brackets and complicate treatment and may damage the teeth or supporting tissues.



Examples of **GOOD SNACK** foods:

- White milk / cheese and crackers
- Fish / meat or egg sandwiches
- Yogurt / raw fruits and veggies



## Helpful Hints For Better Treatment

- Fluoride toothpaste and Floss daily
- Water pik: use twice daily (optional)
- Soft toothbrush (electronic toothbrush optional)
- Mouthwash with fluoride
- Brush 4 times a day (after breakfast, lunch, supper, after snacks, before bed)

### Teamwork For A Winning Smile

Be sure to keep all of your appointments so you will help speed your treatment along.

If an appliance breaks, call your office right away.

Have regular checkups with your dentist and hygienist to keep your teeth and gums healthy.



# Risk Factors for Periodontal Disease

A poor brushing routine that does not disrupt or remove plaque on a daily basis causes the most cases of periodontal disease. Other risk factors, especially when combined with poor brushing habits, may also cause the disease.

- Tobacco use, including cigars, cigarettes and chewing tobacco
- Alcohol abuse
- Genetics
- Systemic diseases such as diabetes
- Some types of medications such as steroids, some, types of anti-epilepsy drugs, cancer therapy drugs, some calcium channel blockers, sex hormones and oral contraceptives
- Crooked and overlapping teeth
- Fillings that have deteriorated or become defective
- Pregnancy
- Stress

## Atridox

### For the Treatment of Chronic Adult Periodontitis

ATRIDOX® (doxycycline hyclate) 10%, is an adjunctive treatment of periodontal disease. It is a locally applied antibiotic (LAA) that is placed gently below the gum line into periodontal pockets where bacteria thrive and cause infection.

Atridox then flows to the bottom of the periodontal pockets and fills the spaces between teeth and gums. After application, it hardens upon contact with saliva to a wax-like substance. The antibiotic is slowly released into surrounding infected tooth pocket.



“Did you know it takes 43 muscles to frown, but only 17 to smile :)”



### Periodontal (Gum) Disease

This Form is intended to educate you on the process of healing and stabilizing your gingival condition. Should you have any questions, please feel free to speak to one of your friendly Oral Health Professionals.



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# Gingivitis / Periodontitis



Patients often confuse plaque and tartar and how they are related to each other. Plaque is a sticky film that constantly forms on all areas of your teeth; it is composed of bacteria, by-products of bacteria and saliva. However, plaque that builds up along the gumline and between the teeth in hard to reach places can be harmful. Plaque is constantly forming on teeth after brushing which is why it is so important to brush twice a day and floss daily.

**Tartar** (also called calculus) forms when minerals deposit in plaque which is not removed by regular brushing and flossing. This hard deposit creates a tenacious adhesion that can only be removed by a dentist or hygienist. If it is not removed, the bacteria can cause inflammation of the gums (gingivitis) and lead into gum disease (periodontitis).

**Periodontal Conditions;** Gingivitis / Periodontitis (loss of attachment, soft and hard tissue)

- Gum Disease (Periodontitis)– this is a process in which foreign bodies (food, bacteria, plaque, calculus) cause an inflammatory reaction in the gum tissue.

- Initially this is seen as inflammation in the gum tissue and bleeding is present, commonly referred to as gingivitis.

- Eventually, the inflammatory process causes a loss of the attachment of the tissue around the tooth and a resorption of the bone around the tooth resulting in pocket formation.

- This pocket makes keeping things clean even more difficult and the process becomes a self-perpetuating problem of increasing severity.

# Stages Of Periodontal Disease

Periodontal disease can be prevented, and even reversed in the early stages, by keeping teeth and gums clean and healthy.

- Brush teeth twice a day
- Clean between teeth each day
- Use a tongue cleaner each day to remove bacteria
- Eat a balanced diet
- Visit a dentist regularly

| Healthy   |  |
|---|--|
|    | <ul style="list-style-type: none"> <li>• Gums have healthy pink color</li> <li>• Gum line hugs teeth tightly</li> <li>• No bleeding</li> </ul>   |
| Gingivitis  |  |
|   | <ul style="list-style-type: none"> <li>• Gums bleed easily when brushed or probed gently during examination</li> <li>• Gums are inflamed and sensitive to touch</li> <li>• Possible bad breath and bad taste</li> <li>• Gums between teeth may look bluish-red in color</li> </ul>   |
| Early Periodontitis   |  |
|  | <ul style="list-style-type: none"> <li>• Gums may pull away from the teeth</li> <li>• More pronounced bleeding, puffiness and inflammation</li> <li>• Bad breath and bad taste</li> <li>• Slight horizontal bone loss</li> <li>• Pockets of 4 mm between teeth and gums in one or more areas of the mouth</li> <li>• Periodontal abscesses may develop</li> <li>• Gums recede and teeth look longer</li> <li>• Front teeth may begin to drift, showing spaces</li> <li>• Bad breath and bad taste</li> <li>• Pockets from 4 to 6 mm deep between teeth and gums</li> </ul> |
| Moderate Periodontitis  |  |
|  | <ul style="list-style-type: none"> <li>• Periodontal abscesses may develop</li> <li>• Gums recede and teeth look longer</li> <li>• Front teeth may begin to drift, showing spaces</li> <li>• Bad breath and bad taste</li> <li>• Pockets from 4 to 6 mm deep between teeth and gums</li> </ul>   |
| Advanced Periodontitis  |  |
|  | <ul style="list-style-type: none"> <li>• Teeth may become mobile or loose</li> <li>• Bad breath and bad taste are constant</li> <li>• Roots may be exposed; sensitive to hot and cold</li> <li>• Severe horizontal and angular bone loss on X-ray</li> <li>• Pockets in excess of 6 mm deep between teeth and gums</li> </ul>  |

# Scaling and Root Planing

Scaling and Root Planing is indicated when periodontal pockets of 4mm or greater occur.

**Scaling Root Planing (SRP)** is one of the most effective ways to treat gum disease before it becomes severe. Root planing and scaling cleans between the gums and the teeth down to the roots.

Your dentist may need to use a local anesthetic to numb your gums and the roots of your teeth and the hygienist might use chlorhexidine (an antimicrobial rinse). Chlorhexidine works by decreasing the amount of bacteria in the mouth, helping to reduce swelling, redness and bleeding of the gums.

To make Scaling and Root Planing more comfortable, the hygiene appointment is split up into two appointments (right side of mouth followed by left side of mouth within two weeks of each other). Once Scaling and Root Planing is completed a 6 week re-evaluation of periodontal pockets and gingival tissue is required.

**If pocket depths have decreased** and there is improvement in the gingival tissue (gums) the hygienist may recommend 3 month hygiene appointments to maintain and continue improve and stabilize gingival health.

**If pocket depths do not improve** or increase and there appears to be no progress in condition, your friendly Dentist may recommend Atridox treatment or periodontal surgery.





## Telephone Calls

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Please tell the receptionist the nature of your call. Some matters can be handled through our office communications system, making a return call unnecessary. If necessary, the doctor will return your call as soon as possible.

**If your pain is not manageable, or you suspect there is complications (dry socket, fever/infection), then please call the office immediately for advice.**



**Dietary restrictions** include avoiding anything hard and small that may get trapped in the extraction site. Usually liquid, or semisolid diet is safe to eat for the first 2-3 days after surgery. List of recommended foods include: soup, pudding, protein shakes, Ensure, Boost, peanut butter, eggs, mashed potatoes, and pasta. Avoid foods such as nuts, and popcorn. These foods may get trapped under the surgical site, and an abscess (swelling) may appear weeks or even months after surgery. Food that are too spicy, or high in bacterial counts (probiotic yogurts) should also be avoided as a precaution.

**Nausea** - A small amount of carbonated 7-Up or ginger ale every hour for 5-6 hours will usually terminate nausea. Follow this with weak tea or clear broth, avoiding juices, or dairy products. If nausea persists, call the office.

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### Post-Operative Instructions Following Oral Surgery

Please read these instructions carefully as they will help you to understand the normal body reactions following surgery and help to keep you as comfortable as possible. Surgery of the mouth requires careful attention to post-operative instructions.







## Pain / Swelling

**Pain** - You may experience discomfort, especially during the first 12 to 24 hours. Take the medications prescribed as indicated on the prescription. It is not uncommon to still have the need to take sporadic pain medication up to a week or so after surgery. Not all patients will be given antibiotics. If you were given antibiotics, please be sure to take these as prescribed, till finish.

For mild discomfort, you may need only Advil, Tylenol, etc. When taking the pills, be sure to drink liquids, to help prevent an upset stomach. **If you develop rash or hives, stop all medications and call the office.**

**CAUTION:** The prescription may make you drowsy. Do not drive or operate mechanical equipment after taking pain medication. Antibiotics may inhibit the effectiveness of oral contraceptives.

**Swelling** - Some swelling is expected to develop, and it may be significant. It is not unusual for swelling to peak 3-4 days after surgery, and then slowly subside. Apply ice packs during the first 24 hours, 1 hour on and 1 hour off. After 24 hours, if swelling persists, use warm moist packs for 20 minutes every hour.

**DO NOT SMOKE** after your procedures. Smoking is detrimental to wound healing.

## You May Experience

- Swelling around the surgical site.
- Stiffness, causing difficulty in opening the mouth.
- A slight earache.
- Sore throat.
- Numbness of the lip or chin on the side from which the tooth was removed. (This is most often a temporary condition.)
- Pain in other teeth.
- Dryness or cracking of the lips. Keep them moist with Vaseline.
- Bruising on the face. This will slowly subside.
- A slight elevation of temperature.

**Bleeding** - It is normal to have some bleeding, pink or red saliva, or clot formation during the first 24 hours.

Light bleeding is expected and beneficial for the first 24 hours after surgery. You may wipe the excess blood from your mouth/tongue with paper towel, or simply swallow it, but do not rinse or spit for the first 24 hours after surgery. The blood clot needs to remain undisturbed in the extraction sites for proper healing to take place. Maintain the gauze packing for 1 hour with firm biting pressure after surgery.

Any chemical toxins (smoking, alcohol) or physical disturbance (multiple applications of gauze dressing, aggressive rinsing, use of straws) can disturb and dislodge the blood clot leading to a dry socket, and delayed painful healing.

**Oral Hygiene:** You may brush your teeth and tongue with just toothbrush and water (no tooth paste- to avoid rinsing) on the first night. You may brush normally using a toothpaste day after surgery. Be sure to brush your tongue as most of the bacteria in our mouths reside on the surface of the tongue. You may rinse gently with salt water 3-4 times a day, starting the day after surgery, for 5-7 days.

## Sinus Involvement Instructions

Due to the close relationship to the sinus, a communication will sometimes remain between the mouth and the sinus. This may have occurred in your case, therefore it is important to follow these instructions.

- 1) The prescriptions as directed.
- 2) Bite on the gauze pack that has been placed over the wound for at least two hours.
- 3) Do not blow your nose.
- 4) Do not sneeze through your nose. If the urge to sneeze arises, sneeze with your mouth open.
- 5) Do not use a straw or smoke a pipe.
- 6) DO NOT SMOKE for a minimum of 48 hours
- 7) Avoid swimming and strenuous exercise for at least one week.
- 8) Begin gently rinsing with a saline solution (1/2 teaspoon of salt in a 8 oz. glass of water.)
- 9) Maintain good oral hygiene.
- 10) It is not uncommon to have a slight amount of bleeding from the nose for several days.

**Other Medication:** Continue other medications which you may have been taking routinely before your treatment in our office (unless otherwise directed.) If antibiotics have been prescribed, please continue and complete the entire dosage.

**Rinsing:** if you were prescribed, you may use Peridex (Chlorhexidine) instead of salt water to rinse your mouth, 24 hours after surgery. Do not use any alcohol rinse such as Listerine, or Scope for at least a week after surgery. If you were given a Monojet syringe – use these with caution, and only once a day- starting on day 4 after surgery. Aggressive use of Monojets can dislodge the blood clot/new tissue, and do more harm than good.

**Sutures** (stitches) are resorbable and will disappear on their own after 3-4 days or more.

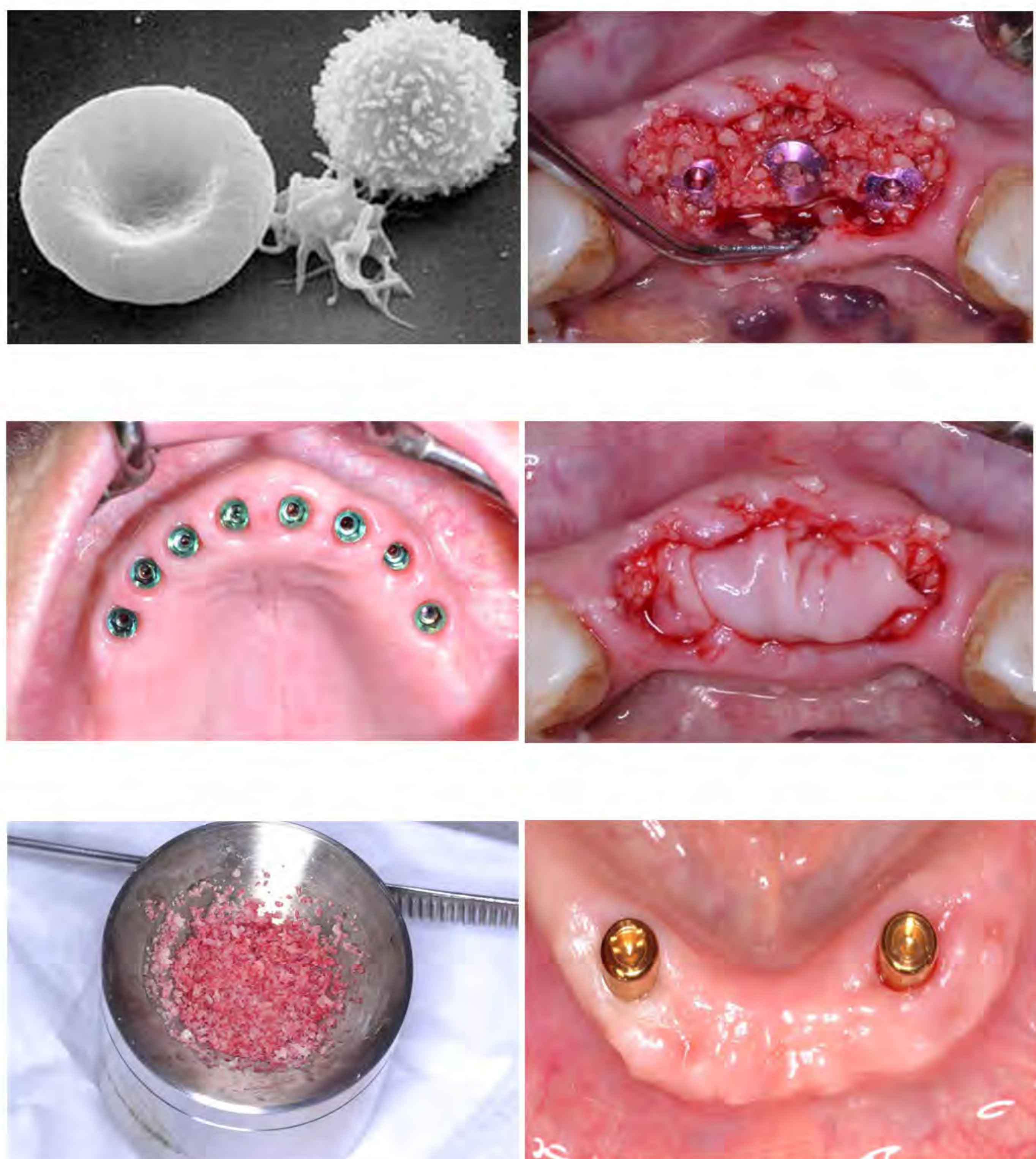


# Platelet Rich Fibrin

There are many different varieties of PRF that are being used in dentistry. You may hear of IPRF, aPRF, iPRF & sticky bone to name a few terms.

They all basically are a similar use of your blood to create a blood clot which can serve a variety of uses:

1. Guided Bone Regeneration.
2. Socket Grafting.
3. Sinus Perforation Treatment.
4. As a covering membrane.
5. As a GAP/JUMP Junction filler.
6. Wisdom Teeth Filler.
7. Dry Socket Therapy (fibrinolytic alveolitis).



PLEASE TALK TO YOUR DOCTOR  
IF YOU HAVE ANY QUESTIONS?

“Did you know  
it takes 43  
muscles to  
frown, but only  
17 to smile :)”



Phlebotomy  
for the fabrication of  
Concentrated  
Growth Factors

PATIENT INFORMATION

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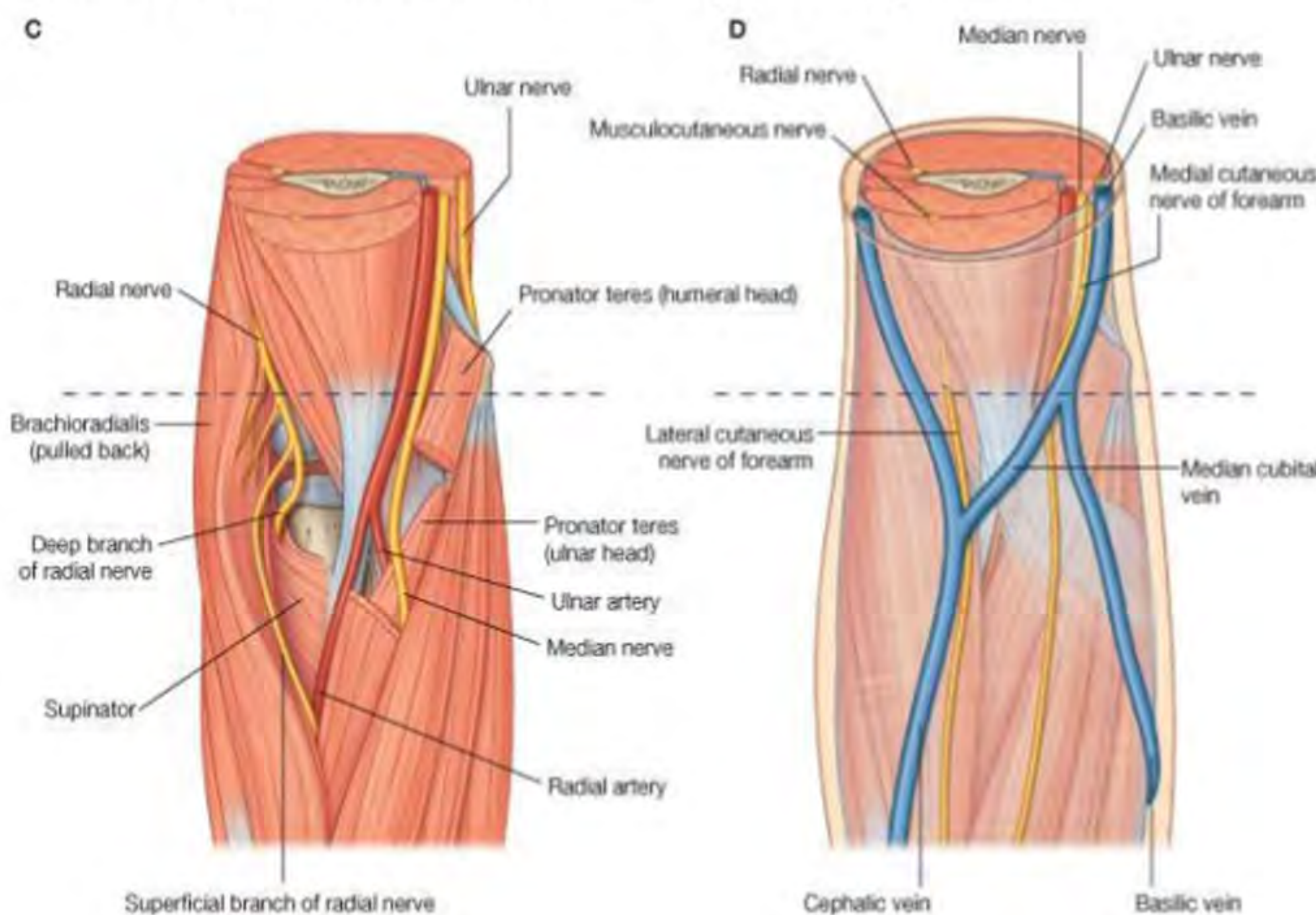
## Phlebotomy

Phlebotomy is the drawing of blood and has been practiced for centuries. It is still one of the most common invasive procedures in health care.

It is used for diagnosis and monitoring treatment, removal of blood for transfusion or therapeutic purposes like polycythemia and hemochromatosis and lastly for the production of Concentrated Growth Factors.

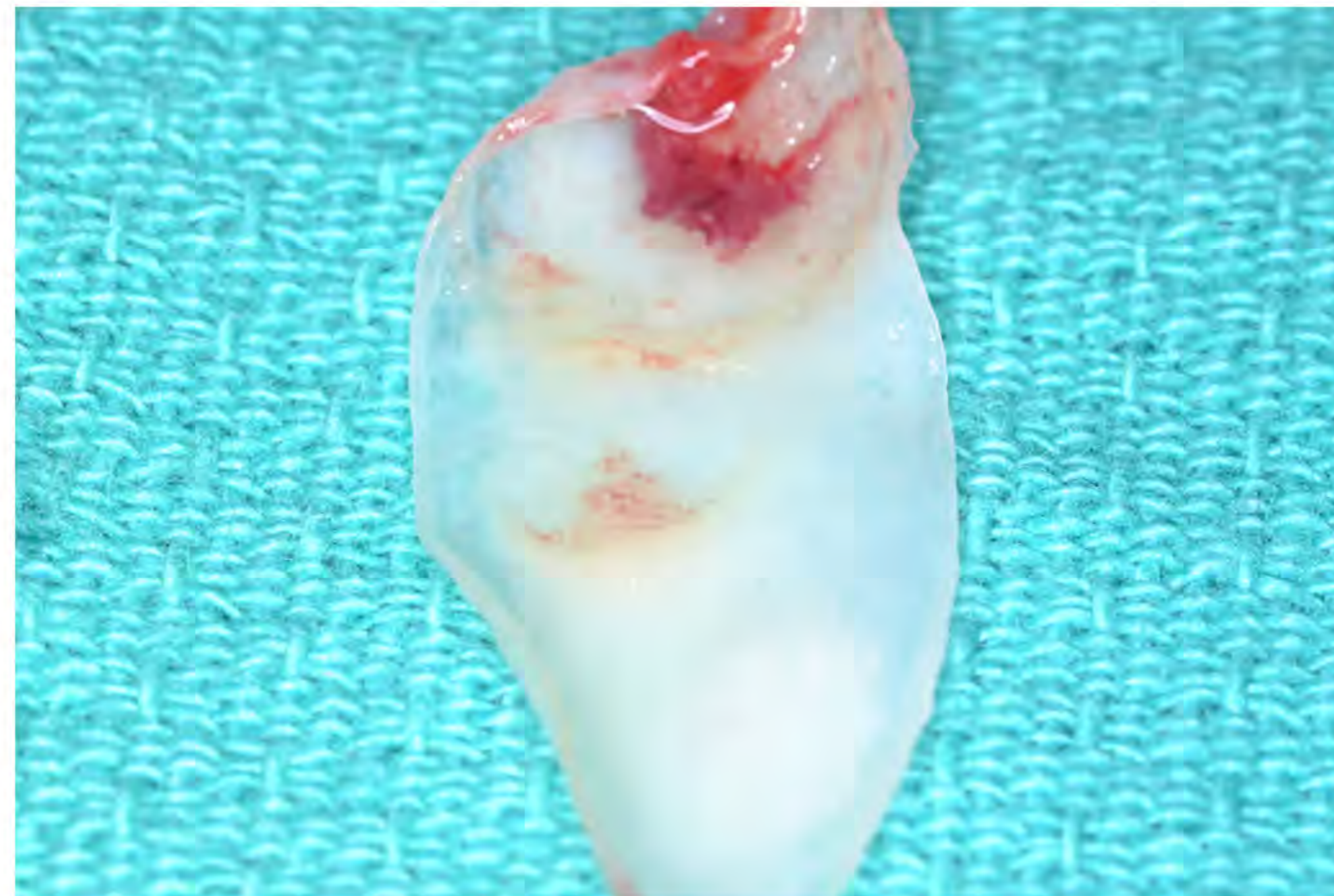
The procedure involves using a tourniquet on your arm and cleaning the skin before inserting a small needle into the arm which will be used to draw blood for use in your procedure.

After the procedure a bandage is applied.



## Concentrated Growth Factors in Dentistry

Concentrated Growth Factors have been used in dental surgery since 1998. The original uses were limited to Platelet Rich Plasma which was used in many bone grafting situations in order to improve the long term results. This later was added onto through the intro of Plasma Rich Growth Factor in 1999 and then finally the intro of Platelet Rich Fibrin in 2001. The advantage of using Platelet Rich Fibrin (PRF) was mainly that it did not require additional calcium or thrombin to work which was safer, it did not require heating and it was found to release growth factors for 7 days.



This leads to an autologous blood platelet/leukocyte concentrate derived without biochemical handling. The cells are trapped in a fibrin network which allows for a slow release of their cytokines and growth factors.

The benefits include a 65% increase in Leukocytes vs. whole blood. A better response to bacteria. A mediator for a better tissue response. Release of Bone Morpho Genetic Protein. Provision of an early naturally occurring clot which is a scaffold for healing, protective and a natural barrier for the body.

## PLATELET RICH FIBRIN BENEFITS

1. Predictable Wound Healing.
2. Decreased graft morbidity.
3. Increased graft stability.
4. Decreased perception of pain.
5. Predictable Osseointegration.
6. Lower incidence of infection.
7. A natural clot for fibrinolytic alveolitis (dry socket).

