

The Rickmansworth Dental Centre

Newsletter

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Welcome to the sixteenth Rickmansworth Dental Centre Newsletter. Thank you for your positive feedback on previous issues. If you have any comments on our newsletter or anything you would like to see in it, please let us know.

Practice News

Welcome to our Spring 2005 Newsletter. We hope you had a good Winter - not long now before Summer is here (well, that's what I keep saying to myself as I watch the rain falling and wind blowing outside!).

The practice **Stair lift** is now up and running (or should that be running up and down?). If you feel you wish to use it to get up the stairs, please do not hesitate to ask Pam. She will be delighted to help you.

Remember, if there is anything you would like to see at the practice or if there is any way we can make your visit more pleasant, please let us know and we will try to oblige.

Opening Times

Our new opening times are proving very popular, so we have decided to implement them on a permanent basis.

To recap: we are starting half an hour earlier at 8.30am on Mondays, Tuesdays, Wednesdays and Thursdays. On Fridays we will continue to open at 8.00am. We will be finishing slightly earlier on Friday afternoon, because of the earlier start during the rest of the week. We apologise if this early finish on Friday causes any inconvenience, but we hope you find the early starts useful.

Holidays

With the holiday season approaching, a reminder that if Adam is away the practice will still be open and the phone manned during normal opening times. Arrangements will be made for patients with severe emergencies.

Outside normal working hours, including Bank Holidays, there is an emergency service available.

Details of this can be heard on the practice's answer phone message. With our new answer phone, to access the given options, on some phones you might have to press the required option number while the message is still playing.



Dental Hygienist

Donna, our dental hygienist has now been with us for three years. She is proving very popular and many patients are showing the benefits of her treatment.

There is information about the hygienist, what she does and how a visit with her differs from a visit with Adam, on the back of this newsletter.



Focus On Mouth Ulcers



A mouth ulcer is a painful sore inside the mouth on either the cheeks or gums. They usually appear red or yellow in colour. Mouth ulcers occur either singly or in clusters, causing a lot of discomfort or pain. They heal within 7 to 10 days. Mouth ulcers are different from cold sores that appear on the outer lips and are due to a viral infection.

There are different types of mouth ulcers. A single mouth ulcer is usually caused by damage to the mouth, like biting the cheek, or damage to the gum with a toothbrush or a sharp tooth or filling. They usually go away once the source of the problem is treated.

A recurrent ulcer is one that comes and goes, sometimes every few weeks.

There are three types:

- Minor ulcers are the most common. They can appear inside the cheeks, on the lips, tongue, gums and more rarely on the roof of the mouth. Most of these ulcers are the size of the top of a pencil and can sometimes come in clusters. You can get four to six at any one time.
- Large ulcers (major type) are more severe and can last for five to ten weeks. They may appear near the tonsils and can be very painful, especially when swallowing. You usually only get one at a time.

It is also possible to have up to 100 very small painful ulcers (herpetiform type), which last for one to two weeks. The last two varieties are very rare. Ulcers are very common. Most people will suffer from single ulcers at one time or another. Over 20% of the population have recurrent mouth ulcers at some time in their lives. Often they begin in childhood, but most people grow out of them by their late twenties. In many cases, several members of the family may suffer from these ulcers, which is due to a family tendency and not infection.

Symptoms

Mouth ulcers may be round or oval with shallow, white, grey or yellow spots with an inflamed border. They cause discomfort or pain, particularly with certain foods. The most painful stage lasts for three or four days and then the symptoms settle until the ulcers heal, usually without scarring, in seven to ten days.

In severe attacks you may feel sick and be slightly fevered. You may also have painful, enlarged lymph glands around your jaw in the upper part of your neck.

Causes

- Recurrent mouth ulcers may be due to:
- too little iron or a lack of vitamins in the diet, especially B12 and C,
 - hormonal changes – many women get ulcers at the time of their periods,
 - stress,
 - infections, particularly herpes simplex in children and some adults,
 - Behcet's disease, an auto-immune disease caused by the body attacking the cells lining the mouth,
 - bowel disease such as Cron's disease or ulcerative colitis, coeliac disease (gluten sensitivity),
 - skin diseases such as Lichen Planus, Herpes Simplex or Pemphigus.
- Some medicines can also cause mouth ulcers.

Recurrent mouth ulcers cannot be caught by kissing, or by sharing drinks and utensils, because they are not caused by an infection.

Diagnosis

You can normally diagnose mouth ulcers yourself from their appearance and the typical symptoms.

You should ask your dentist for advice if:

- it is your first ulcer,
- the ulcer has an uneven discolouration and is deep,
- it is not causing you any pain or discomfort,
- you have had the ulcer for more than three weeks,
- it is bigger than 1 cm in diameter and is a single ulcer,
- you are taking any other medication, or
- you are pregnant.

If you also get ulcers in other parts of your body, such as the eyes or genital area, it is important that you tell your dentist about this.

Treatment

The exact treatment will depend on the cause of the ulcer. Sometimes all that is required is to remove the cause of the ulcer, such as a sharp tooth.

Continued Overleaf

The following self-care measures may help to reduce pain from mouth ulcers:

- keep your mouth clean at all times,
- avoid foods that are spicy, acidic, salty or particularly hot or cold, which can make the symptoms worse,
- eat a healthy diet that includes fresh fruit and vegetables,
- gargle with warm salt water,
- use a diluted chlorhexidine mouthwash (Corsodyl) once a day to help reduce the length of time the ulcers last.
- sprays and rinses are also available for pain relief.

You can also use special products that are available from your pharmacist:

- Adcortyl in Orabase. Dry the area first with a cotton wool bud and then use a wet finger or the back of a spoon to put the cream on the sore area. You can use it up to four times a day after meals. However, it is most effective to use this cream late at night as it stays there for longer. You may find it has a gritty feel in your mouth
- Corlan Pellets are small bitter tasting tablets that dissolve in your mouth releasing a drug that acts on the ulcer. Place them near the ulcer. You can use them four times a day.

There are many preparations that you can buy without prescription. However, you should consult your dentist in case you need additional medications or if the ulcers persist.

Complications

Most ulcers heal on their own. However, if the ulcer doesn't heal within three weeks you should visit your dentist. Your dentist will be able to examine your mouth to check that the problem is an ulcer and not something more serious.

If you suffer from ulcers that come and go frequently, you should visit your dentist to check that there is not an underlying medical cause.

Prevention

Try to avoid getting run down by making sure you eat a balanced diet, take regular exercise and learn to manage stress. Make sure your teeth are in good order by regular visits to your dentist.

Visiting the Dental Hygienist

At The Dental Centre we have a dental hygienist, Donna. She is here on Mondays and Thursdays.

Listed below are a few of the most frequently asked questions about hygienists and what a visit to the hygienist involves.

What is a hygienist?

Dental hygienists are specially trained to work with the dentist in providing care tailored to the patients' needs.

They play an important role in dental health care and are mainly concerned with gum health, education in correct home care and the application of preventive materials to the teeth and gums.

The hygienist's provides professional cleaning of the teeth for the patient. Most importantly they educate the patient in the best way to keep the teeth free of plaque.

Why is this treatment important?

Regular professional cleaning combined with your home care will help maintain a healthy mouth. A clean and healthy mouth will improve your appearance, help you keep your teeth and give you fresh breath.

Can a hygienist help prevent dental disease?

The training of the hygienist is centred on preventing dental disease. Carefully removing the deposits that build up on the teeth and teaching you how to prevent it reforming again, will go a long way to slowing the progress of gum disease. Anti-bacterial gels and solutions can be applied under the gum to kill the bacteria causing gum disease. By discussing your diet and recommending other preventive measures your decay rate can also be reduced.

Children can benefit from having their teeth polished. The hygienist can also apply fluoride gels and solutions to help prevent decay. The permanent back teeth can also benefit from having the fissures sealed.

Why doesn't the dentist do this work?

Dr. Deitsch will carry out this type of work. However, the hygienist has been specially trained to carry out scaling and polishing and can spend longer with you. They are also expert at teaching you how to look after your teeth and gums. Often the hygienist will spend a number of appointments getting the gums healthy ready for the dentist to do the more complex treatment.

Will the treatment hurt?

Scaling and polishing is usually pain-free. However, if you do experience some discomfort the hygienist can eliminate this with the use of topical anaesthetic creams or by giving you some local anaesthetic. It is important that you let the hygienist know at the time so that some pain control can be given.

What can I do to help the Hygienist?

You can do a great deal to help yourself and the hygienist as you are in control of your mouth between visits to the practice.

Your hygienist will have shown you how to remove plaque with a toothbrush and fluoride toothpaste. You will also have been shown how to clean between your teeth with floss, tape or little brushes. There are many products now available and your hygienist will recommend those that are appropriate for you.

Do I need to see the hygienist?

Following your routine examination Dr. Deitsch will advise you if you require a visit to the hygienist. If you feel you wish to see the hygienist anyway, please contact the surgery and this can be arranged for you.

If you have any queries or require further information, please do not hesitate to contact us.



*Have a good Spring
from Adam Deitsch and all the staff at The Dental Centre.
Don't forget you can find us online at www.thedentalcentre.org.*

