



# The Rickmansworth Dental Centre Newsletter

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Welcome to the 29<sup>th</sup> 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 Summer 2008 Newsletter. It looks like it's going to be another typical English summer, but at least all the rain is good for the garden. In fact Autumn has arrived early at The Dental Centre. No it's not a seasonal anomaly in our part of the High Street, but the name of our new dental surgery assistant. Ashleigh our previous dental nurse successfully passed her professional exams and is now due to start a University course in September with the aim of becoming a dental hygienist. We wish her every success.

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.

## Happy Birthday To Us



We have just celebrated our 8<sup>th</sup> birthday at The Dental Centre. We are still continually updating and improving all areas of the practice to provide you with the best treatment possible. Hopefully we can continue to do this for many more years to come.

## Antibiotic Cover



In March The National Institute for Health and Clinical Excellence (NICE) recommended that antibiotic prophylaxis for infective endocarditis was no longer necessary. This means that patients who used to have to take antibiotics an hour before their appointment no longer have to.

More information can be found on the NICE website (<http://www.nice.org.uk/guidance/index.jsp?action=byID&o=11938>).

Three documents issued by NICE, explaining and giving the reasons for this decision, have also been placed on The Dental Centre's website ([www.thedentalcentre.org](http://www.thedentalcentre.org)). Just follow the 'Antibiotic Cover' links. Please do not hesitate to contact The Dental Centre if you require any further advice.



The Tooth Fairy and her evil twin, the Sweet-Tooth Fairy.

## Dental Hygienist

Both our hygienists are still at the practice, helping patients keep their teeth and gums healthy. Imran is here all day Monday and Thursday. He now also does occasional Tuesdays. Santok, on reception, can inform you of these when booking an appointment. Donna is here one Saturday morning a month. There is information about hygienists and what they do on the back of this newsletter.



## Focus On Dental Amalgam



Dental amalgam is the silver-coloured material used to restore (fill) teeth that have cavities. Dental amalgam has been used as a safe, durable, stable and cost effective restorative material for more than 150 years. Dental amalgam is made of two nearly equal parts: liquid mercury and a powder or alloy containing mainly silver and smaller amounts of tin, copper, zinc and other metals. The make up of the alloy gives the filling its' optimal characteristics. Mercury is unique in its ability to form solid amalgams with other metals. Thus amalgam remains a valuable tooth restorative material in dentistry for practical and realistic reasons. Other filling materials are available but amalgam is cost effective and durable material with predictable outcomes and is still a commonly used filling material in many countries. There has always been a certain amount of controversy surrounding the use of dental amalgam as a restorative material, because of the mercury it contains. This has increased over the past 25 years and there has been much research into the health

effects of amalgam over this time. Mercury in its raw form is toxic, however when used in dental amalgam, it binds to the other metals present and is therefore rendered inert. Chewing can release some mercury vapour but tests have shown this is very minimal. There have been concerns in the past of amalgam being associated with a variety of systemic conditions such as Alzheimer's, Parkinson's Disease, and Multiple Sclerosis. However, several major studies have failed to reveal such effects. A recent large scale medical study found that evidence for the role of dental amalgam in multiple sclerosis, Parkinson's disease and Alzheimer's disease was inconclusive. No evidence has been found that dental amalgam can be a causative factor for brain function disorders such as epilepsy, memory loss, or speech impairment, chronic fatigue syndrome and non-specific symptom complexes. The recent preliminary report by the Scientific Committee on Emerging and Newly Identified Health risks (SCENIHR) concluded that no increased risks of adverse systemic effects exist and they do not therefore consider that the current use of dental amalgam poses a risk of systemic disease. In fact the main source of human exposure to mercury is through the consumption of fish. The highest concentrations are found in long-lived predatory fish such as tuna, swordfish, shark and bass. Another common source of mercury is Thiomerosal, which has been used a vaccine preservative since 1930. Again this has been extensively tested and passed by The World Health Organization as safe for use in humans. Two recent studies on the health effects of dental amalgam in children concluded that it should remain a viable restorative treatment option for children. The first showed that there were no statistically significant differences in adverse behavioural or renal effects observed over the 5-year period in children whose cavities were restored using dental amalgam or white filling materials. The second indicated that children who received dental restorative treatment with amalgam did not, on average, have statistically significant differences in brain function or behaviour when compared with children who received other materials without amalgam. The SCENIHR preliminary report also

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concludes that the most recent studies have failed to find any association between the use of amalgam and development in children. Allergic reactions to mercury in dental amalgam have also been reported but these are very rare. The SCENIHR report recognises that some local adverse effects are occasionally seen with amalgam fillings, including allergic reactions, but the incidence is low (less than 4%) and normally readily managed. It is known that mercury can cross the placenta from mother to foetus – but there is no evidence of any link between amalgam use and birth defects or stillbirths. There is no available evidence to indicate that the placement or removal of dental amalgam fillings during pregnancy is harmful, but because of the theoretical risk of toxicity, dentists try to avoid treatment or delay it until after the birth of the baby. One indicator of the safety of amalgam is shown by studies on dentists. Dentists have far more mercury exposure than the general populations. Health and morbidity studies, however, have indicated that dentists have no unusual diseases and live longer than physician colleagues who generally are not exposed to mercury in the workplace (probably also due to the healthy clean living lives dentists lead!).

Dental amalgam has recently been banned in Scandinavia. This has nothing to do with worries about the health of the patient, but about emissions of mercury vapour during cremations. These emissions are forecast to decrease substantially anyway, without banning dental amalgam.

Apologies if the above piece contains a lot of scientific terminology, but it is quite a complex subject. Of course if you have any questions or worries we will be happy to address them for you. In conclusion though, no reputable controlled studies have found a connection between amalgam fillings and any medical problem. There are other filling materials available (see our 'Focus on White Fillings' in Newsletter issue 18 online at [www.thedentalcentre.org](http://www.thedentalcentre.org) in the newsletter section) and should you require a filling we will discuss all the treatment options with you.

### Visiting the Dental Hygienist

At The Dental Centre we have two dental hygienists. Imran is here on Mondays and Thursdays. Donna works one Saturday morning a month.

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 can carry out this type of work. However, the hygienist has also 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.

The 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 the 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.



*Hope you have a Sunny Summer.  
With Best Wishes from Adam Deitsch and all the staff at The Dental  
Centre. Don't forget you can find us online at*

