

SMILE



COMMON DENTAL QUESTIONS



BY DR EDWARD TAY

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COMMON DENTAL QUESTIONS

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PREFACE

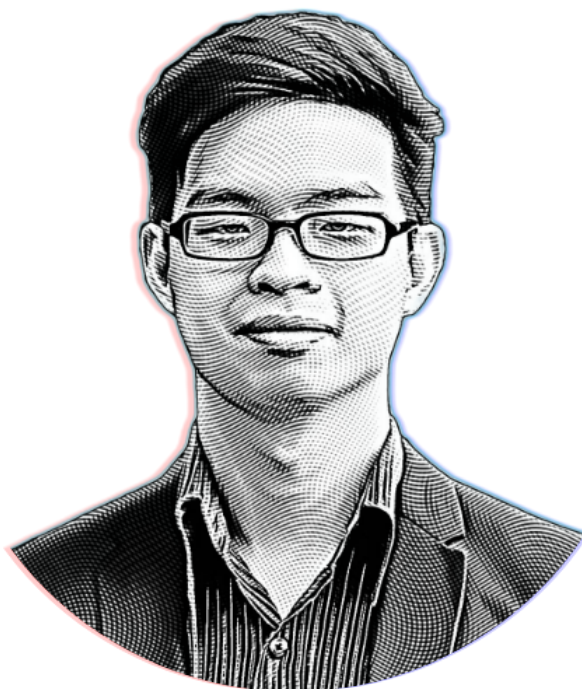
This book aims to provide concise and clear concepts on various oral care issues written in simple language by a qualified dental professional.

BIOGRAPHY

Dr Edward Tay is a general dentist from Penang. He holds a BDS degree from University of Malaya.

As a Chevening scholar, he pursued a Master's degree in Dental Technology at QueenMary University of London.

Dr Edward has a keen interest in digital healthcare applications and has been educating the public about oral care since 2015.



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INTRODUCTION

The Malaysian Medical Gazette is an online hub for doctors, specialists and health care professionals to spread awareness and health education to members of the public in an easily accessible and reliable platform.

With the advent of social media and information technology, the public has unlimited access to information at the click of a mouse. Their enthusiasm to take an active part in their own health care management coupled with the ease of information sharing is unfortunately often at times detrimental due largely to the fact that they are unable to differentiate between valid sources of information and unreliable ones.



The
**Malaysian
Medical
Gazette**

mmgazette.com

In an effort to provide a more reliable source of medical and health related information, a group of doctors & healthcare professionals set up an online hub namely The Malaysian Medical Gazette (www.mmgazette.com).

Dr Edward Tay is a columnist for this publication and all content in this ebook is based on his MMG articles.

HOW IMPORTANT IS FLOSSING?



Has this ever happened to you?

Your dentist advises you to floss. You read about the benefits of flossing somewhere. You go back and try flossing. You find it to be quite hard. You give up.

If that has happened to you before, you are not alone. Truth be told, the vast majority of people find flossing a tough habit to cultivate. Many Malaysians today don't floss daily. In this chapter, you will find out the health benefits of flossing, the flossing tools available, and the technique that makes flossing much easier.

Health benefits of flossing

Some people might think, what's the big deal about flossing anyway? Isn't brushing my teeth enough? Flossing is just something extra, right?

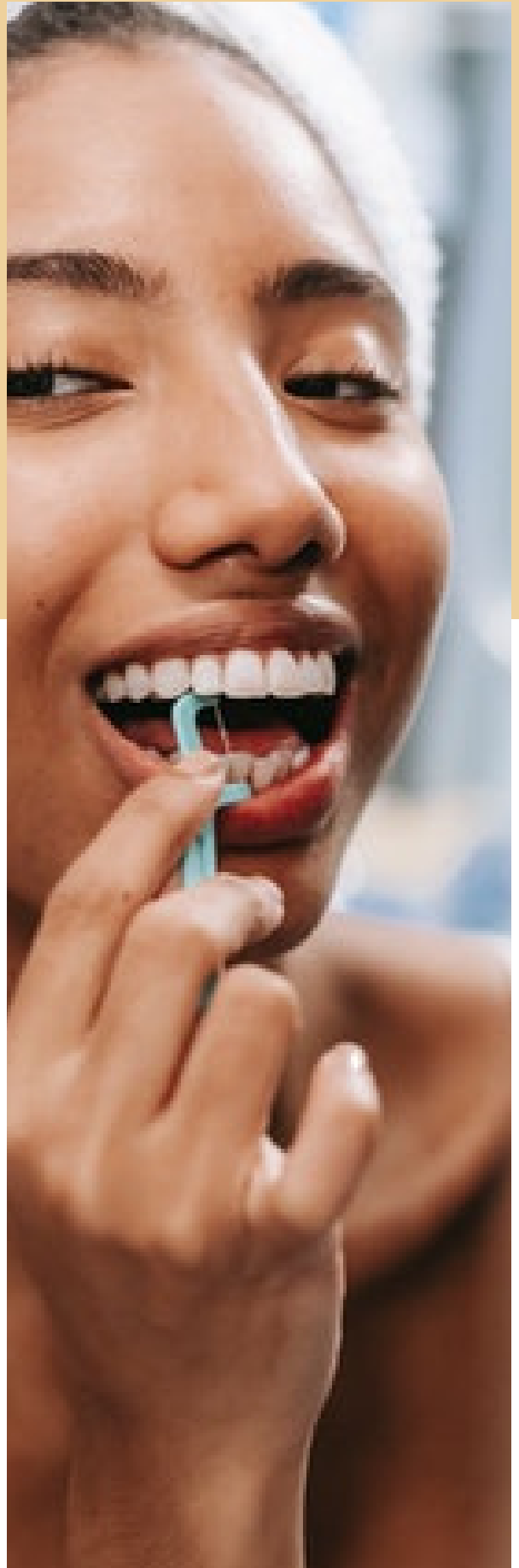
Wrong.

Flossing is not just something "extra". It is, in fact, just as important, perhaps even more so than toothbrushing.

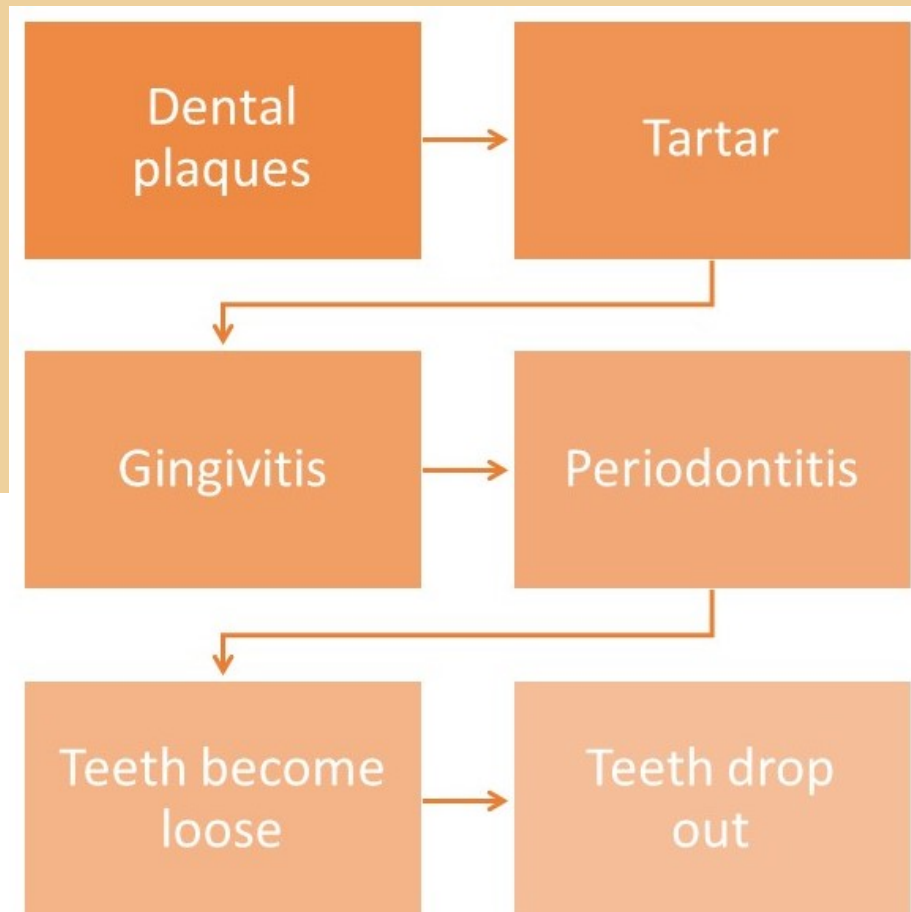
Due to the malalignment of our teeth, there will be areas where the bristles of the toothbrush cannot reach. When we eat, food gets stuck inside the nooks and crannies of your teeth.

Not even the best toothbrush can do the job of the floss. There is plaque trapped under the gums that is not visible to the naked eye and needs to be removed.

Those are the areas prone to developing tooth decay.



The gums and the alveolar bone make up the foundation that supports the teeth. So don't neglect this aspect of the oral hygiene routine if you want your teeth to last long.



It is not just for the sake of the oral cavity, for studies have shown the link of periodontal diseases to other health issues, such as:

- Chronic obstructive pulmonary disease
- Low birth rates in newborns
- Inflammatory bowel diseases

For the elderly, more teeth and better dental health behaviour are related to increased longevity. That means if you want to add years to your life, floss!

Flossing tools

Floss was once made from silk fibres twisted to form a long strand. In our modern times, floss is usually made from nylon filaments or plastic monofilaments. It is totally safe for the teeth and gums when used correctly. Step into any pharmacy or supermarket and you'll notice numerous types of floss.

Waxed vs. Unwaxed

The wax coating helps the floss glide through your teeth a little easier. It is up to your personal preference. If you have tight spaces between your teeth or have braces, then waxed floss might move a little easier through the areas.

Flavoured vs. Unflavoured

Most floss have a minty scent. Popular flavours of floss include wintergreen and cinnamon.

Handle vs. No handle

Some people prefer the handle for one-handed flossing without the mess, and it might be easier to reach up to the back teeth.

Dental tapes

Preferable if you have "wider than average" spaces between your teeth or if you have bridgework.



Super Floss

This is an orthodontic floss with a dental floss threader that is ideal for cleaning braces, bridges and wide gaps between teeth.

Water Flosser

This innovation delivers a water pressure that dislodges plaque. It is also able to remove bacteria deep between teeth and below the gumline for better oral health. The downside is it can be costly and bulky, which makes it inconvenient for traveling.

How to floss

The one-minute flossing technique by Dr Carlos Meulener is shown in this video (<http://bit.ly/OneMinuteFlossing>).

Once you master the skill, you will be able to clean the interdental spaces effectively and quickly. Hence, it is possible to make flossing a habit, no matter how busy you are. 60 seconds is all it takes.

You may experience soreness or gums bleeding during the first few days of flossing. This is normal. If the bleeding continues after a week of flossing, consult your dentist.

I only started flossing during my 3rd year of dental school, mainly after seeing the effects of sub-par oral hygiene of my patients which resulted in dental problems and loose teeth. Whenever I don't floss over a period of time, my gums become swollen, which is a sign of gingival inflammation.

Many of my patients have benefited from the habit of flossing. It just takes a bit of motivation, diligence and discipline for a vast improvement in oral cleanliness.



The mouth is the dirtiest part of the body. There are many bacteria that exist in the oral cavity. If the hygiene is not taken care of, it invites oral problems such as dental caries and gum disease.

According to the World Health Organization (WHO), 60–90% of school children and nearly 100% of adults have dental cavities worldwide.

Kickstarting the habit can potentially save you hundreds, even thousands of Ringgit on dental treatment fees due to poor oral hygiene. As they say, prevention is better than cure!

Many dental problems are preventable, the power of a disease-free mouth is in your hands.

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- <http://www.ada.org/en/science-research/ada-seal-of-acceptance/product-category-information/floss-and-other-interdental-cleaners>
- <http://www.myhealth.gov.my/en/flossing/>

DENTAL AMALGAMS: OK OR NOT OK?



Take a look at your mouth in the mirror. Do you see any gray or silver fillings in your back teeth? These dental fillings are dental amalgam, which is 50% mercury.

You're probably thinking, "Mercury! Isn't that the toxic heavy metal that pollutes the environment and makes us cautious about certain kinds of seafood?" If you're starting to panic, don't!

This chapter will hopefully answer the following questions:

1. Are dental amalgams safe?
2. What should you do if you have dental amalgams?
3. What should you consider when getting any future tooth fillings?

Before we dive into those questions, let's explore a little history.

Dental amalgam fillings are not a new innovation in dentistry. They might have been first used by the Chinese as early as 659 AD. In Europe, they were likely in use by the 16th century.

Modern dentists have been using it for more than 150 years.

Throughout history, there have been “amalgam wars” and ongoing controversy over the use of mercury, but there are reasons why it has consistently been used.

Its reliability in load bearing situations and low cost is unmatched by other forms of dental restorative material. It was the no.1 choice for patching the back teeth.



Are dental amalgams safe?

In recent years, there has been research suggesting that mercury vapor is released from silver fillings.

However, do they pose an actual health risk? Does enough mercury escape from amalgam restorations to cause adverse health effects?

Up till now, there is insufficient evidence to label amalgam as hazardous to the human body and halt its use.

Here are three facts that support the use of amalgam:

- After the dentist places the filling and the reaction is complete, only a tiny amount of mercury is released, which is far below the current health standards.
- Mercury does not collect in human tissues. It takes an average of 55 days for mercury to move through the body to the point of excretion.
- Mercury acts as a bacteriostatic agent. Since there are many bacteria in the oral cavity, this is a desirable characteristic as it stops current decay and prevents future decay.

Reputable regulatory bodies such as the U.S. Food and Drug Administration (FDA), American Dental Association (ADA) and Malaysian Dental Council (MDC) also back the use of dental amalgams.



- “The scientific evidence supports the position that amalgam is a valuable, viable and safe choice for dental patients.”



- “While elemental mercury has been associated with adverse health effects at high exposures, the levels released by dental amalgam fillings are not high enough to cause harm in patients.”



- “The Malaysian Dental Council (MDC) continues to support dental amalgam as a restorative material especially in load-bearing areas of the mouth such as for posterior permanent teeth.”

What should you do if you have dental amalgams?

Some people in the “holistic dentistry” circle have successfully convinced a number of individuals with perfectly good amalgam fillings to have them removed and replaced with composites. There is actually no need to remove those fillings as the process of removal may release more mercury vapour.


Removal is not recommended unless there is a true hypersensitivity to mercury. Mercury allergy is rare but may cause skin rash or dermatitis. This affects a tiny subset of the population. So don't rush to remove any existing amalgam fillings unless you are confirmed to be allergic to mercury.

What should you consider when getting any future tooth fillings?

We live in an age of choices, therefore it's best to start with knowing what kind of options we have.

Although amalgam is hardly harmful, there are benefits of using other materials. These days, the focus is on aesthetic dentistry and the use of tooth-coloured fillings is on the rise. In fact, it is the benchmark for most developed countries.

If your dentist can offer an excellent quality tooth-colored filling to ensure long-term sustainability, go for it. If not, there is good old-fashioned amalgam.



With many improvements in other dental materials like composites, they are a viable option to be considered especially if fillings can be seen when you smile or talk.

They are great aesthetically – matching and mimicking teeth shade to the extent that it cannot be identified as restoration.

There will always be people with opposing views when it comes to dental fillings. Those against amalgam are usually “naturalist” and “holistic”. However, the scientific community as a whole still believes in the use of silver fillings.

Fact is, large amalgam fillings will probably last for more than 20 years and cost less than ½ of a crown. They may not look pretty, but patients can chew with confidence. The peace of mind of having a restored tooth to safely eat your favourite food is priceless!

In the end, though some people have the misconception that dental amalgam is toxic, evidence has shown otherwise. They are safe and practical. That’s how we know it will stand the test of time for many, many years to come.

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- <http://www.ada.org/en/about-the-ada/ada-positions-policies-and-statements/statement-on-dental-amalgam>

WHY ARE MY TEETH YELLOW?



In today's culture, many people dream of the 'Hollywood smile' just like celebrities. We're not just referring to perfect symmetrical dentition, but sparkling white teeth. Is that achievable, or worth achieving?

Slightly yellow teeth are natural, bright yellow teeth can be a bit annoying. But freakishly white teeth? To me, those are as off-putting as bright yellow teeth, and it requires bleaching to reach that level.

Understand that the yellow shade of teeth has always been that way throughout 200,000 years of evolution. Just like your hair and skin color, there are different colors for teeth too.

Our teeth generally yellow more as we age too.

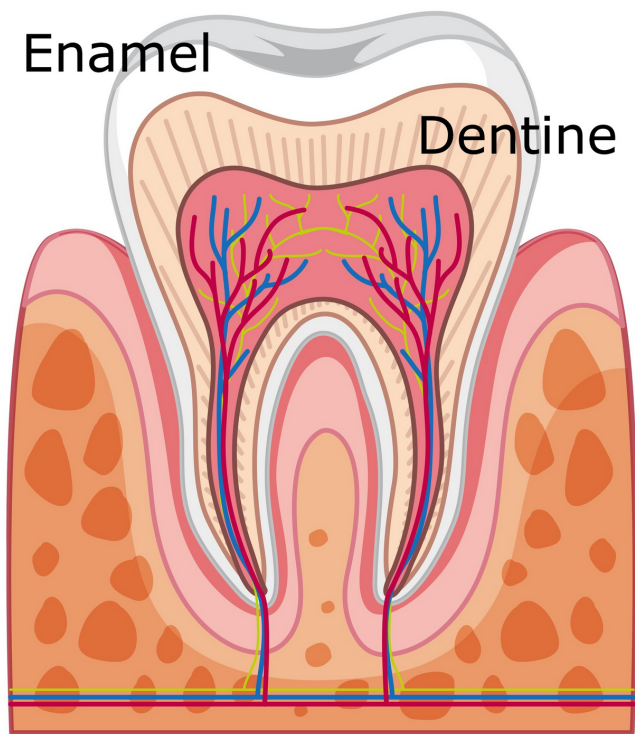


Image from Vecteezy.com

This is the anatomy of a tooth.

As you might notice, the dentine layer is yellow.

Dentin is a bone-like matrix that is porous and yellow-hued material.

The overlying enamel is translucent, therefore you can see through to the dentine, which makes teeth appear yellow.

Overall, the dentin contains fewer minerals and is less brittle or breakable than the outer enamel. Its serves to provide support to the enamel, and for transmitting impulses from the enamel or root to the dental pulp.

What makes teeth yellower than it should?

- Mouthwashes with higher % of chlorhexidine.
- Plaque buildup due to lack of oral hygiene.
- Tobacco is notorious for staining teeth.
- Too much exposure to fluoride during early childhood, e.g. swallowing toothpaste as a kid.
- Antibiotics (tetracycline) when teeth are in development.
- Certain beverages such as coffee, tea, soda, and red wine.
- Dentinogenesis imperfecta, a rare dental condition, can even cause gray, amber, or purple discolorations of the teeth.
- Have pale skin? Teeth will appear yellow. Have dark lipstick? Teeth will suddenly appear white.

Some people have this misconception, but yellow teeth don't equal bad teeth!

If you are worried about the yellowness of your teeth, you are only concerned about appearances. The color does not influence the health of the tooth for the most part.


Next time you're at the dentist's clinic, ask them to show you what shade your teeth are by comparing to a shade guide. The matching of teeth to restorative materials is done manually and visually via this tool.

Shade guides can be arranged from dark to light, and you can observe where you're at on the spectrum.

With regards to teeth whitening/bleaching, it depends on how they got yellow and how they got white.

If you bleached your teeth or used treatments to get them white then teeth that just yellowed naturally over time would be preferable.





Throughout the years, I've had patients ask me about whitening, and their teeth are already a very light shade.

I tell them they don't need it. It's unfortunate what television and marketing do to some people's perception of normal.

I've never quite personally understood why people think that stripping the enamel off the surface of their teeth so that they looked whiter was a good idea in the first place.

You risk having sensitive teeth later and the whitening effect will fade away over time.

Well then, is teeth bleaching bad? No! Nothing wrong with getting teeth whitened. Having white teeth can appear very impressive, especially on social media. If you're into aesthetics, go for it.

Do you know what's more impressive though?

Zero cavities, fresh breath, no gum disease!

Don't forget, we all have yellow teeth. It's just a matter of what shade. Genetics might have something to do with it, but your diet can as well.



If you're still feeling anxiety because of your teeth, seek professional help from the dentist or try over the counter whitening kits first.

Do them consistently and daily as per instructions. Most of the time they fail because patients quit in the middle.

Professional whitening kits get great results because they're stronger.

Prevention is better than cure. Brushing your teeth after meals will help to prevent some stains.

Dentists recommend that you rinse your mouth with water after having wine, coffee, or other drinks or foods that can cause teeth staining.

Regular cleanings also will help to remove surface stains.

ORAL CANCER: KNOW IT TO PREVENT IT



Photograph by Welleschik, distributed under a CC BY-SA 3.0 license

Quick question - What is the cancer that is:

- The sixth most common in the world?
- Highly associated with tobacco smoking, betel quid chewing and excessive alcohol consumption?
- The third most common cancer among the Malaysian Indian community in Malaysian Ministry of Health Hospitals?

Yes, you guessed it! The answer is oral cancer.

Oral cancer is an abnormal growth found in the mouth region.

Why should you care about oral cancer? It's because you probably fall into one of these 3 types of people:

1. You know somebody who has it.
2. You suspect you have it.
3. You don't think you have it.

Let's look at things from each perspective.

You know somebody with oral cancer

Heard of a relative or friend with cancer that needed to have their tongue removed?

Oral cancer patients are referred to oral cancer centers from general medical or dental practice, with typical signs and symptoms such as white or red patches in the mouth, persistent sores, and bleeding.

The primary treatment modality is surgery, with or without post-operative radiotherapy/chemotherapy.

Surgery is performed to remove only the tumor or the entire organ. Radiotherapy is an additional therapy following surgery to destroy residual microscopic cancer cells. Chemotherapy drugs are administered by injection and require the patient to stay in the ward.

Patients with mouth cancer must be closely monitored to make sure that the cancer does not return. Survival rates have improved over the last 20 years and if the cancer is caught early it can be cured. With the right care, cancer patients can have a good quality of life.

You suspect you have oral cancer

There's been an ulcer going on in your mouth for past 2 weeks and it's now showing signs of healing.

Do you have the following issues recently?

- Persistent mouth sores
- Pain in mouth or ear
- Chronic hoarseness of voice
- Non-tender lump in neck
- Abnormal swallowing
- Peculiar sore throat

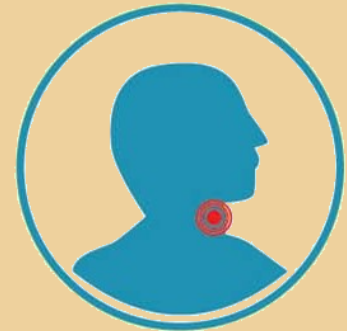


Image from Vecteezy.com

Go through the 6 steps of screening

Step 1: Tongue 'n' Gauze

Extend your tongue as far as it can go, examining the sides and underside for white and red patches, and feel your tongue for lumps.

*Note: This is the most common site of oral cancers in non-smokers.

Step 2: Lip & Cheek Roll

Feel for lumps or bumps, looking for white or red areas that should not be there.

Step 3: Double-Digit Probe

Examine the floor of your mouth from the top and bottom simultaneously for lumps, looking for white and red patches.

Step 4: Palate Tickle

Check the roof of your mouth for lumps and areas of softness on the hard palate, looking for white and red patches

Step 5: Neck Caress

Palpate your neck for enlarged lymph nodes a possible sign of infection or something more serious.

Step 6: Tonsil “Ahhhhhhh”

Depress your tongue with a dental mirror, examining your tonsils for symmetry, enlargement, redness, or unusual bumps.



You don't think you have oral cancer

That's great! Therefore, keep it that way by staying away from risk factors that would increase your chances of developing life-threatening oral cancer.

Risk factors include:

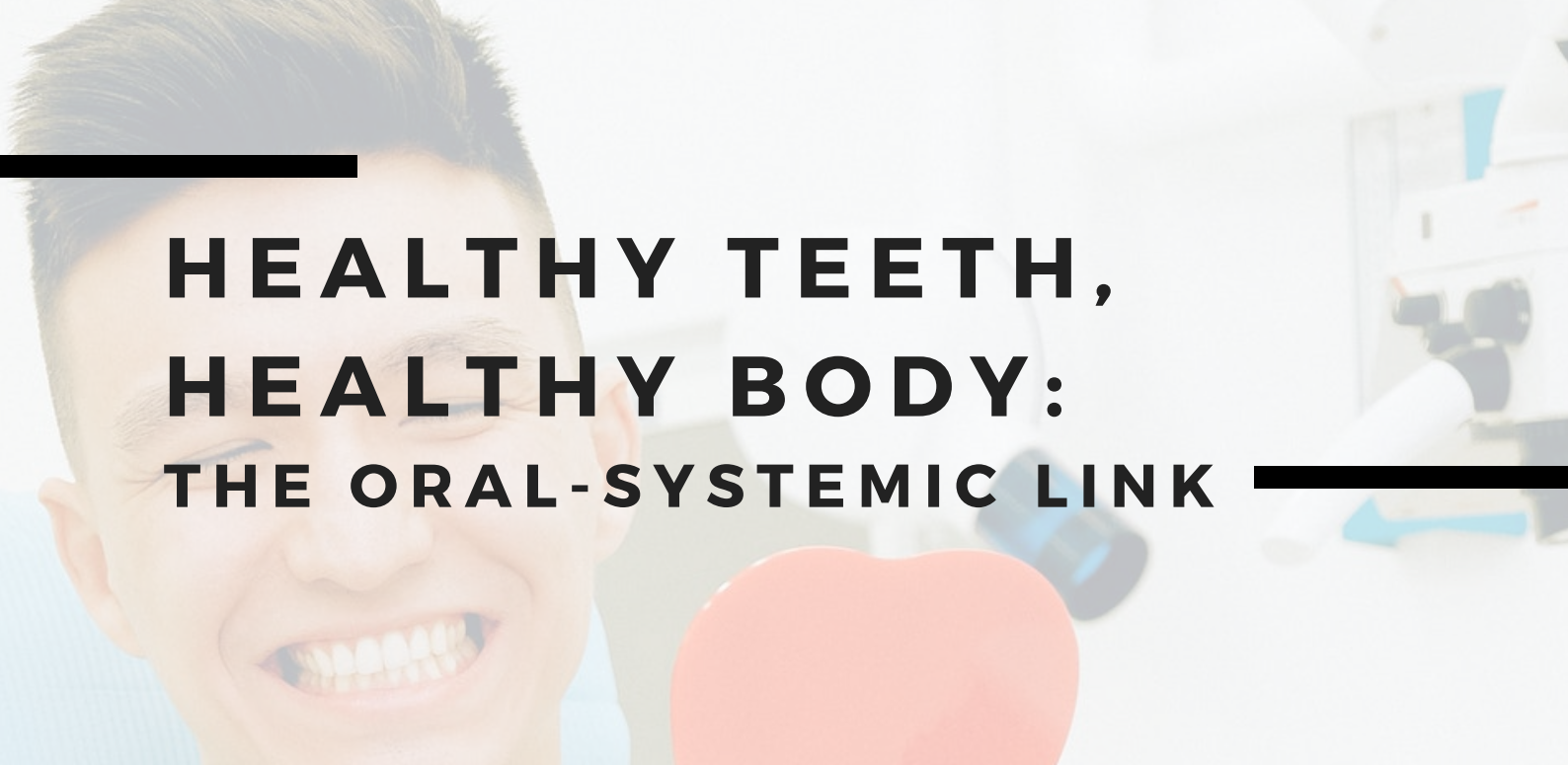
- Smoking - Do you smoke 3 boxes of cigarettes a day? Time to reconsider!
- Alcohol - A six-pack of beer daily? Why take the risk?
- Betel quid - Better off chewing gum instead!
- Pre-malignant lesions in the oral cavity such as lichen planus (white lines or ulceration in the oral cavity)
- Immunosuppression (e.g. HIV)

In a nutshell, let us Malaysians be educated in features of an early oral cancer lesion and recurrence and be encouraged to monitor for it regularly.

Seek a dentist if you suspect anything weird happening in your mouth, especially if it is a non-healing ulcer.

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HEALTHY TEETH, HEALTHY BODY: THE ORAL-SYSTEMIC LINK

Oral health is not something we think about regularly.

However, it's good to take a few minutes to ponder about that.

Fact: The health of your mouth affects the health of your body in many ways.

If you have dental caries, gum disease, bad breath, shaky teeth, recurrent ulcers in your mouth, this chapter is exactly for you.

Many epidemiological studies have suggested that oral infection, especially marginal and apical periodontitis may be a risk factor for systemic diseases.

What kind of diseases are we talking about here?

Diseases linked to oral health

Heart disease

The bacteria from inflammation of the gums and periodontal disease can enter your bloodstream, travel to the arteries in the heart and cause atherosclerosis (hardening of the arteries).

Atherosclerosis causes plaque to develop on the inner walls of arteries which then thicken. This decreases or may block blood flow through the body. It can cause an increased risk of heart attack or stroke.

The inner lining of the heart can also become infected and inflamed, a condition known as endocarditis. Also, poor dental status is shown to lead to a 2.6-fold increased risk of stroke!

Neurocognitive disorder

The bacteria from gingivitis may enter the brain through either nerve channels in the head or through the bloodstream, which might even lead to the development of Alzheimer's disease.

Researchers from the UK discovered the presence of a bacterium called *Porphyromonas gingivalis* in the brains of patients who had dementia when they were alive. The bug is usually associated with chronic periodontal (gum) disease.



Diabetic complications

Inflammation of the gum tissue and periodontal disease can make it harder to control your blood sugar and make your diabetes symptoms worse.

It also works the other way, i.e., diabetes affecting oral health. People living with diabetes are also more susceptible to periodontal disease, making proper dental care even more important for those with this disease.

Respiratory infections

Many people don't know this, but gum disease could cause you to get infections in your lungs, including pneumonia. Take a second to think of what might happen from breathing in bacteria from infected teeth and gums over an extended period. Critically ill patients and institutionalized elderly persons frequently have bad mouth hygiene, which results in a substantial oral microbial burden, subsequent microbial aspiration, and resultant respiratory tract infections.



Poor nutrition

When infection from the teeth becomes untreatable, it has to be extracted. Hence, tooth loss. Evidence has shown that people with some or completely missing teeth change their eating habits. They may thereby avoid certain nutritious foods because of difficulty in chewing and select high-calorie, high-fat diet. When the meals cannot be well pulverized, this affects the internal absorption of nutrients.

How do we reduce the risks of getting those diseases?

Simple, just do what the dentists told us way back when we were in school:

- Brush and floss your teeth daily!
- Visit the dentist every 6 months
- Reduce sugary foods and drinks

It's simple, but not necessarily easy for some of us.

Start cultivating those good habits today for a lifetime of healthy smiles!

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HELP! IS THERE A DENTIST IN HERE?



Remember the last time you had a toothache?

When I say “toothache”, think unbearable pain radiating from your teeth. Pain that disturbs your sleep at night. That doesn’t go away no matter how many painkillers you take. Pain that drives you mad.

What do you do next? As with most people, you visit a dentist. But which dentist do you visit? If you know a decent dental clinic that you have been attending regularly for years, then good for you.

Unfortunately, some people face these two problems:

- 1.They don't know if there's a dentist nearby
- 2.They don't know if that dentist is credible and trustworthy

This is where technology can come to the rescue!

Imagine ready made solutions that enable you to search for best dentists near your area. Best of all, you can do that within seconds, right at your fingertips.

By the way, everyone's definition of "best dentist" may differ. Is it top service you're looking for? Best price? Convenience?

Regardless of what you're seeking, these 5 tools can help:

- 1.Ministry of Health Clinics Database
(<http://bit.ly/ministryofhealthmalaysia>)
- 2.Dentists Nearby (<http://dentistsnearby.com>)
- 3.BookDoc (<http://bit.ly/dentistrymy-bookdoc>)
- 4.GetDoc (<http://getdoc.com>)
- 5.Google



Ministry of Health Clinics Database

The screenshot shows the official website of the Ministry of Health, Malaysia. The header includes the national emblem, the text 'Portal Rasmi KEMENTERIAN KESIHATAN MALAYSIA', and the 'Bersama Hentikan Wabak COVID-19' logo. Navigation links include 'LAMAN UTAMA', 'INFO KORPORAT', 'DIREKTORI', 'PENERBITAN', 'KERJAYA', and 'ARKIB'. A search bar is visible with the text 'Bahasa Lain' and a magnifying glass icon. The main content area is titled 'Senarai Klinik Pergigian Kerajaan' and features a search box with 'Kedah' entered. Below the search box is a table listing 15 government dental clinics in Kedah, with columns for 'No.', 'Nama', 'Alamat 1', 'Bandar', and 'Negari'. Each row includes a small 'p' icon in the final column.

No.	Nama	Alamat 1	Bandar	Negeri
1	Klinik Pergigian Besar Baling	Klinik Pergigian Besar Baling,	Baling	Kedah
2	Klinik Pergigian Kg. Lalang	Klinik Pergigian Kg. Lalang,	Baling	Kedah
3	Klinik Pergigian Hospital Sg. Petani	Klinik Pergigian Hospital Sg. Petani,	Kuala Muda	Kedah
4	Klinik Pergigian Besar Sg. Petani	Klinik Pergigian Besar Sg. Petani,	Sg. Petani	Kedah
5	Klinik Pergigian Bedong	Klinik Pergigian Bedong,	Kuala Muda	Kedah
6	Klinik Pergigian Kota Kuala Muda	Klinik Pergigian Kota Kuala Muda,	Kuala Muda	Kedah
7	Klinik Pergigian Bukit Selambau	Klinik Pergigian Bukit Selambau,	Sg. Petani	Kedah
8	Klinik Pergigian Besar Jitra	Klinik Pergigian Besar Jitra,	Jitra	Kedah
9	Klinik Pergigian Kodiang	Klinik Pergigian Kodiang,	Koodiang	Kedah
10	Klinik Pergigian Changlön		Jitra	Kedah
11	Klinik Pergigian Air Hitam	Klinik Pergigian Air Hitam,	Alor Setar	Kedah
12	Klinik Pergigian Banai	Klinik Pergigian Banai,	Jitra	Kedah
13	Klinik Pergigian Kepala Batas	Klinik Pergigian Kepala Batas,	Kepala Batas,	Kedah
14	Klinik Pergigian Besar Simpang Kuala	Klinik Pergigian Besar Simpang Kuala,	Alor Setar	Kedah
15	Klinik Pergigian Besar Telok Wanjah	Klinik Pergigian Besar Telok Wanjah,	Alor Setar	Kedah

Did you know that you have access to the database of government clinics in Malaysia?

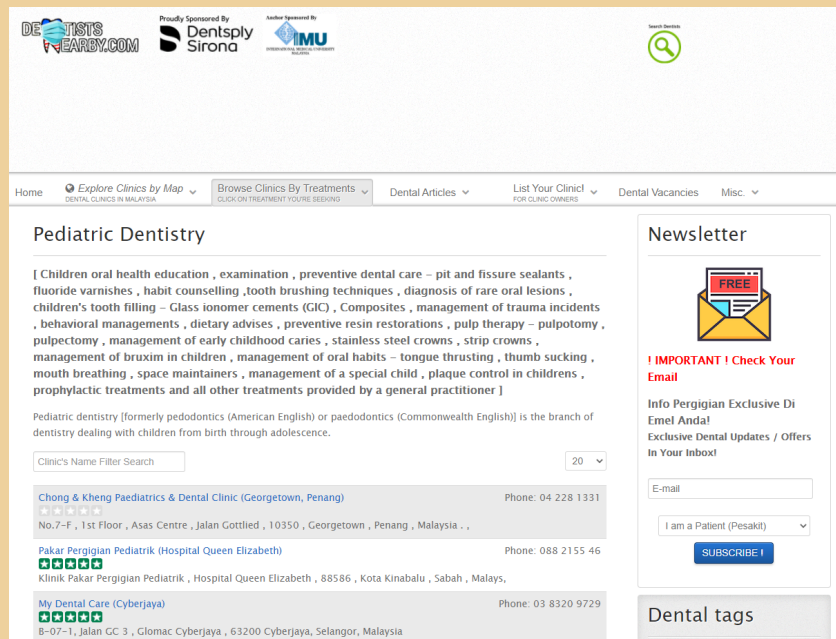
Yes! The information is out there.

If you are Kedahan and you are wondering "Hmm...how many government dental clinics are there in my hometown?" Wonder no more! Type "Kedah" in the search box. Seek and you shall find.

Unless you're staying in a super rural area, there is bound to be a dental clinic not too far away. Go to the clinic, fix your teeth. No more suffering in silence. Problem solved.

- Tip: Not every day is an outpatient (OP) day where you can walk in. Some days are reserved for appointments. Contact the clinic to find out which day is their OP day before you go to avoid any disappointments.

Dentists Nearby



The screenshot shows the homepage of Dentists Nearby. At the top, there are logos for 'Dentists Nearby.com', 'Dentsply Sirona', and 'IMU'. Below the logos is a navigation bar with links for 'Home', 'Explore Clinics by Map', 'Browse Clinics By Treatments', 'Dental Articles', 'List Your Clinic', 'Dental Vacancies', and 'Misc.'. The main content area is titled 'Pediatric Dentistry' and contains a detailed list of services provided by pediatric dentists, such as oral health education, preventive care, and management of various dental conditions. Below the text is a search bar for clinics and a list of three dental clinics with their contact information and ratings. On the right side, there is a 'Newsletter' section with a 'FREE' email offer and a 'SUBSCRIBE' button. At the bottom right, there is a 'Dental tags' section.

Some people assume dentists are all the same. That's not entirely true.

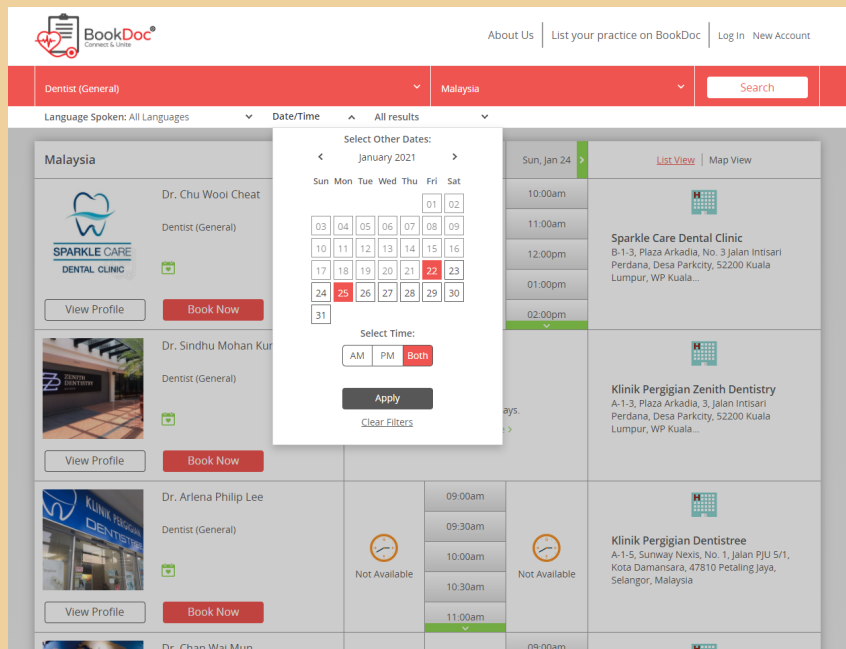
Although the general dentist can cover a wide range of treatments concerning the oral cavity, there are specialties in dentistry.

For example, if you are going to send your kid for a dental checkup, the expert for that form of dental service would be a pediatric dentist.

For root canal treatments, the endodontists are the ones equipped to handle complicated cases. It'll be a waste of time if you're seeking the treatment type that is not available at the clinic you're going.

Today, you can do due diligence and research before going to the clinic by checking out Dentists Nearby first.

BookDoc



Enter Bookdoc – one of the disruptive technologies in Malaysia’s healthcare scene. BookDoc is a complete, integrated, hassle-free way to seek health services locally, outstation, and abroad.

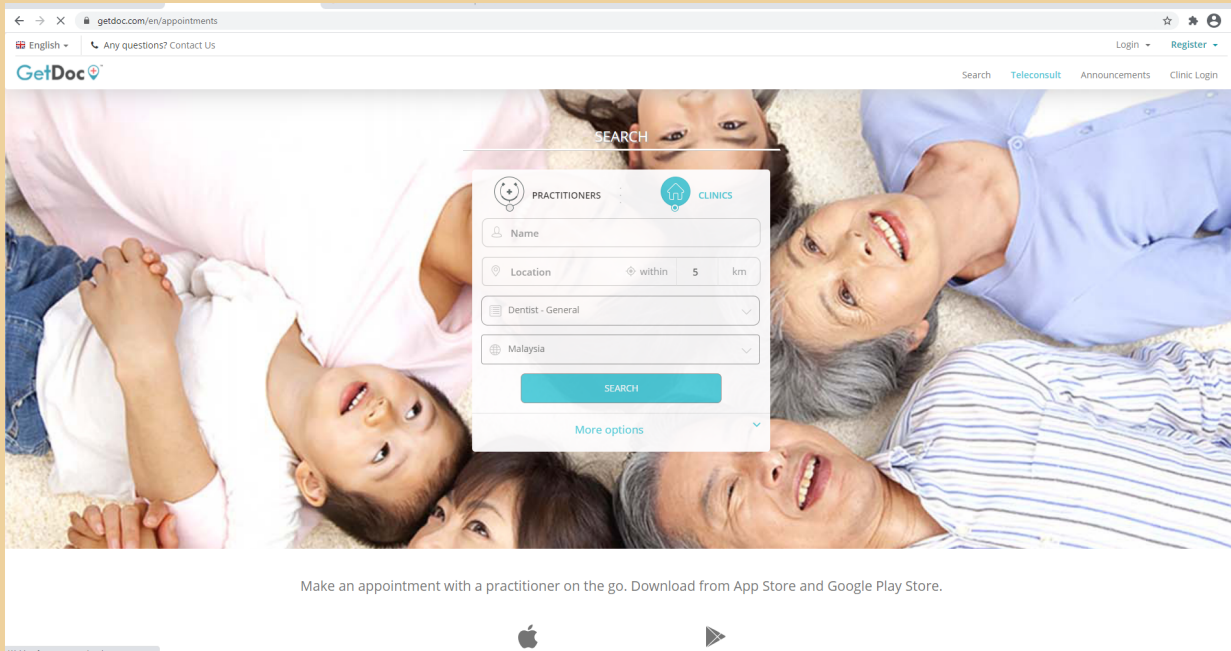
This website displays all the clinic and doctor info that you want to know as a patient on one simple-to-navigate, eye-catching dashboard.

Here are some benefits of BookDoc:

- 24/7 book online anytime, anywhere
- Appointment reminders
- Reduce waiting time

They have official endorsement from the Ministry of Tourism and Culture of Malaysia.

GetDoc

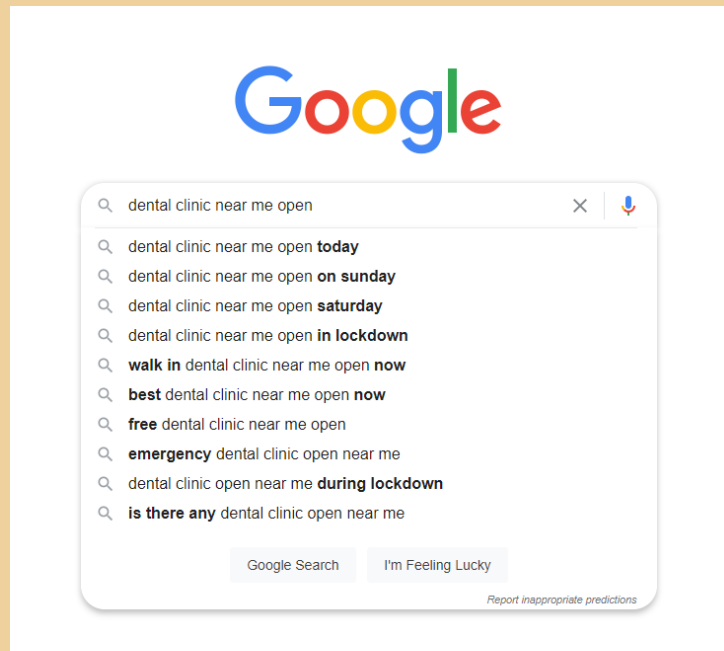


GetDoc is another tool to make an informed choice by selecting the right doctor with verified information.

Innovations like this redefine the way people access healthcare services around the world with improved information flow, accessibility, and convenience.

You can use it either on the website or mobile app.

Google



Last but not least, the big-G. How can we forget Google when it comes to searching? As the search engine gets more sophisticated, we can get search results tailored to geolocation.

With a quick search, we can find the nearby clinics with basic contact details (contact number, email, website etc). How convenient to know the distance from your location to the clinic so you can plan your trip around your busy schedule!

I hope these 5 tools are a huge time saver in helping to locate the most suitable dental service for your needs. Instead of relying on word of mouth from friends and relatives, you have technology on your side. Leveraging technology in today's world is the way forward.

10 DENTAL MYTHS: DEBUNKED!

#1 - Myth: White teeth is the standard



Truth: Teeth are naturally yellow due to the dentine layer just under the enamel.

Some people just have more yellow teeth. They are not a symptom of a medical problem. Yellow teeth can be as healthy as white ones.

Yellowing is not only a common side-effect of stains from food and beverages (coffee, wine) but also a natural part of the aging process. Besides, beauty is subjective. It's all about the perception, complexion and color contrast.

This myth about yellow teeth is discussed in further detail in Chapter 3 of this book ("Why Are My Teeth Yellow?").

#2 - Myth: Stop flossing when gums bleed



Truth: Bleeding is a sign of sick gums and you should continue flossing.

Keep flossing, and you will notice the bleeding get less and less until one day it stops completely. Congratulations! You now have healthy gums!

Flossing not only gets rid of dental plaque build-up but it also prevents tartar (calculus), which is a plaque layer that has bonded itself to your teeth.

I know you hate it. I hate it. Your mom hates it. Floss hates itself. But there is no replacement that is as effective as floss.

For more information about flossing, see Chapter 1 ("How Important is Flossing?").

#3 - Myth: Fluoride is toxic

Truth: Fluoride occurs naturally in water but is also adjusted to an optimal level to prevent dental problems.

Fluoride is an example of everyday products fortified to improve our health. Other examples are iodine added to salt; folic acid added to bread and cereals; and Vitamin D added to milk.

Water fluoridation is done to adjust fluoride to an optimal level, which is 0.7 mg per liter of water.

Consider these 3 points:

- Fluoridated drinking water is one of the 10 significant public health achievements of the 20th century.
- Children who drink fluoridated water have stronger teeth that resist decay better over their lifetime.
- Evidence shows that for most cities, every \$1 invested in fluoridation saves \$38 in costs to treat dental problems.

Too much fluoride can lead to fluorosis, which appears as tooth discoloration or enamel spots. Nearly all cases of fluorosis are mild. Most occur due to children ingesting toothpaste that affects the teeth development. So parents, make sure your kids don't swallow that toothpaste!

Taking into account the pros and cons, public health experts around the world have given a go-ahead to fluoridate water and endorse the use of fluoride in dentifrices aka toothpaste.

#4 - Myth: All cavities are visible



Truth: There are some cavities that are difficult to see with the naked eye.

Regardless of how good you are at dental care, 6-monthly visits to your dentist should be included in your routine. Why? Because some cavities are under the surface and can only be detected by X-ray.

Types of caries that cannot be easily seen by untrained eyes:

- White spot lesions – These are localized areas of enamel demineralization, which is the earliest sign of caries. In these cases, dental professionals might apply fluoride varnish or other non-invasive methods to remineralize the affected regions.

If left unchecked, the caries will become larger and larger and eventually be cavitated, leaving holes in the teeth.

- Sub-gingival caries – Decay under the gums that can occur beneath old fillings done many years ago.
- Interdental caries – Gaps between teeth where food gets stuck are prone to decay. One of the earliest signs of tooth decay is sensitivity to hot, cold, and sweet food. When your tooth is sensitive, it's your body signaling to you that something is wrong.

As dentists working in the government sector, we see many patients requiring teeth extraction as the decay is discovered way too late.

Things in your mouth are as inexpensive as they are ever going to be right now. The longer you wait to take care of a situation, the more it will cost you in pain, time lost from school or work and dollars from your bank account.



#5 - Myth: Cavities are caused by sugar



Truth: Cavities are caused by acid

However, sugar does indirectly cause cavities.

Cavities do not occur because of sugar particles in your mouth. They happen when bacteria in your mouth produce acids that harm your enamel.

Bacteria digests sugars in the mouth and produce an acid that combines with saliva to form that nasty stuff your dentist warned you about: plaque.

Plaque starts building up after every meal and if it isn't brushed away, it can erode the hard, outer enamel of a tooth, resulting in tiny holes in the tooth surface. These holes mark the initial stage of cavity formation.

Did you know that frequent snacking is ten times worse than taking a big dessert all at once?

How often you eat sugary food matters more than how much you eat.

For example, sipping on soda or acidic drinks throughout the day is worse for your teeth than gulping them down.

This has to do with the pH balance in your mouth and how long it is an acidic environment before your saliva buffers it back to normal.

This is why sipping on lemon juice throughout the day might be good for your body, but you'll risk eroding your teeth. Do your teeth a favour and drink that lemon juice in moderation, alright?



#6 - Myth: Avoid dental checkups during pregnancy



Truth: Increased levels of pregnancy hormones make a woman more susceptible to gum diseases, so a routine checkup is recommended even during pregnancy to screen for abnormalities.

All pregnant women attending government maternity clinics (Klinik Kesihatan Ibu & Anak or KKIA) and hospitals are given an in-house dental checkup. This oral health program is aimed at creating awareness.

The safest period for the interceptive dental treatment is from the end of the first trimester to the first week of the third trimester.

The second trimester of pregnancy (week 13 to week 27) is considered safest of all.

What about dental X-rays? The dose of radiation in dental X-rays is so low that there's virtually no risk to the unborn baby.

The dose of radiation in X-rays is measured in milligrays (mGy). With most dental X-rays, the dose the unborn baby may receive is up to about 1 mGy, so low that it's deemed negligible.

The American College of Obstetricians and Gynecologists Committee on Health Care for Underserved Women reaffirmed its committee opinion in 2015: "Patients often need reassurance that prevention, diagnosis, and treatment of oral conditions, including dental X-rays (with shielding of the abdomen and thyroid) ... [is] safe during pregnancy."

Local anesthetics (LA) and X-rays are safe, although they are to be done only when necessary.



#7 - Myth: Teeth becomes loose after scaling



Photograph by Walter Seigmund, distributed under a CC BY-SA 3.0 license

Truth: Loose teeth can be caused by many factors but are mostly due to complications of poor oral health.

Scaling is indicated when there is calculus deposition or gum disease. Hence, the gums are already 'sick' to begin with.

Some people with poor oral hygiene consider themselves to have healthy, firm teeth, but take one glance and you'll notice the teeth are covered by a thick wall of calculus!

There may be a temporary increase in tooth mobility which is due to the damage already done by dental plaque. Eventually teeth can get firmer as plaque removal prevents further progress of gum diseases and dental caries.

A deep dental cleaning will stop further damage, and your teeth will eventually start to feel firmer.

In severe gum diseases with the extensive bone loss, the teeth may become so loose that they are only held together by the tartar. So, it's natural that the calculus removal will increase mobility of the teeth.

Gum disease is one of the leading causes of loose teeth. It creates pockets of infection between the teeth and gums, and as a result, the gums recede and cause loose teeth.

By performing a deep cleaning, your dentist clears the infection, giving your gums a chance to heal. As the gums improve, they should 'tighten' the grip on the loose tooth.



Photograph by Onetimeuseaccount, distributed under a CC BY-SA 3.0 license

#8 - Myth: Enamel can be regrown



Truth: Enamel is non-living hard tissue which cannot be regrown (for now).

If enamel is destroyed, the body does not make more to replace it and it is gone forever. Unlike other parts of the body – like bones, for example – enamel does not contain any living cells, so it cannot regenerate. Therefore we need to protect it by maintaining good oral hygiene.

Dentine, which lies beneath the enamel and is the inner core of the tooth, protects the soft tissue or pulp underneath it. It is alive with nerves and gives the tooth its sensation. It can regenerate slightly.

Unfortunately the dentin-forming cells in the pulp can't grow outwards, just inwards, which shrinks the pulp chamber. This is a normal response to stress from decay, bruxism (habitual teeth clenching), trauma, and aging.

#9 - Myth: Colour eye marks on a toothpaste tube indicates its ingredients



Truth: An eye mark is used in manufacturing of packaging and has nothing to do with ingredients in toothpaste.

An eye mark is a printed rectangular mark most often found along the edge of web stock that can be identified by an electric "eye". The target defines a point on the web where an individual package is to be cut. As each pack is supplied on a continuous reel, they would all have the eye mark which eventually creates the tubes for the packaging that we purchase - be it a facial wash, body gel, hand creams and so on.

The best way to ascertain the composition of a given brand of toothpaste is by reading the ingredients information printed on the toothpaste box and tube. It is important to make sure that adult toothpaste contains fluoride to prevent dental disease.

#10 - Myth: Hard toothbrush bristles are better

Truth: Hard bristles or brushing too hard can injure gums and teeth.

Some people buy hard brushes on the belief that it can 'scrape away the plaque much easier'.

Sadly, they actually damage their gums by brushing too hard and scraping 'downward' on them.

Hard brushes can also cause abrasion cavity, which results in the neck of the tooth being scraped off, causing hypersensitivity (sharp pain especially on consuming cold drinks)

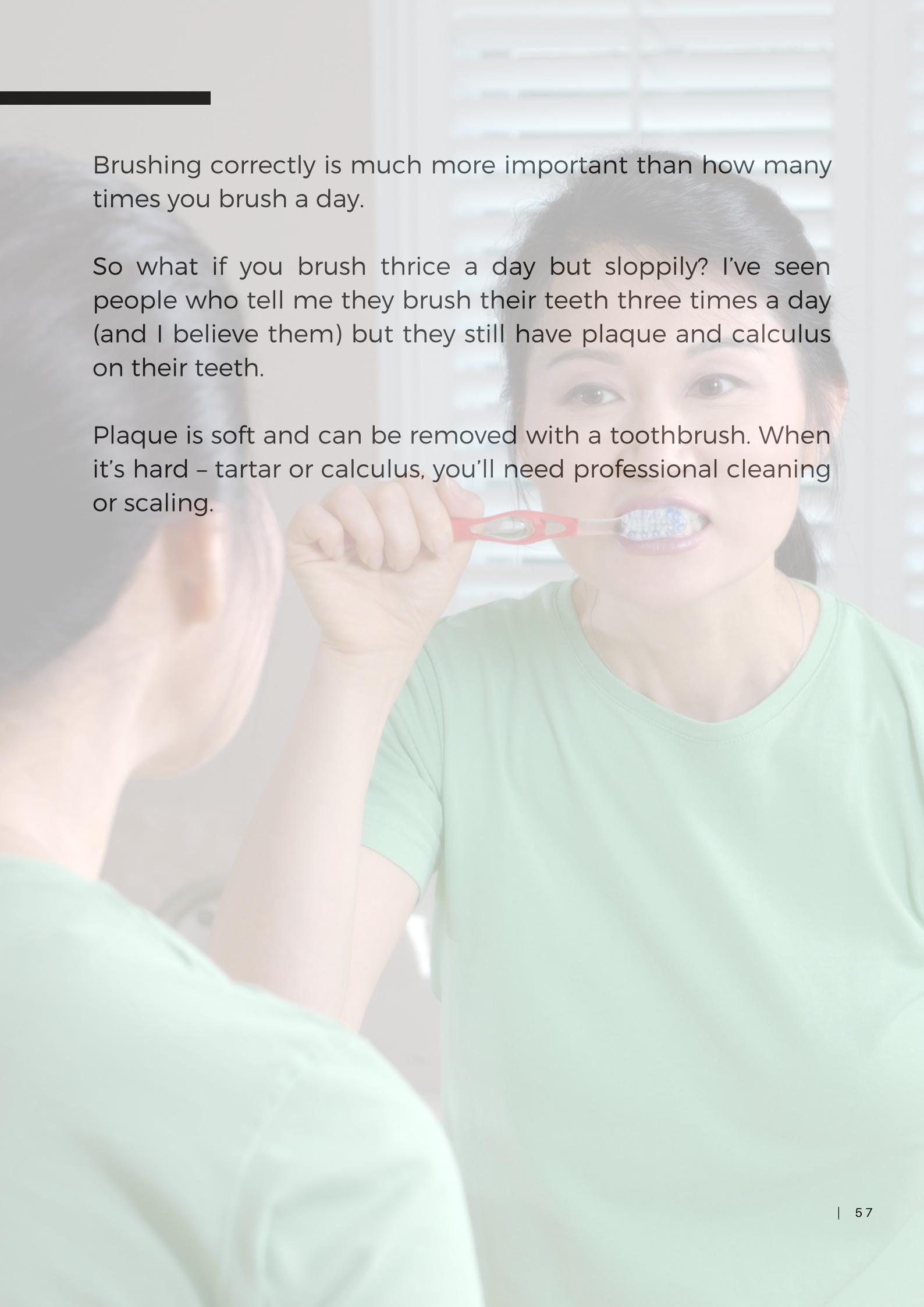
Two things to know about toothbrushing:

- Use a soft toothbrush (literally labeled "soft")
- Brush all teeth surfaces, firmly but never aggressively.

You should pretend you're polishing a tomato to determine how hard to press. If you don't know how to polish a tomato, get one from the market and give it a try.

Okay, you don't actually need to do it, but you get the point!



A woman with dark hair, wearing a light green t-shirt, is brushing her teeth with a red and white toothbrush. She is looking towards the camera. In the foreground, the back of a person's head and shoulder, also wearing a light green t-shirt, is visible, suggesting a dental or medical setting. The background shows a window with white blinds. The overall lighting is soft and natural.

Brushing correctly is much more important than how many times you brush a day.

So what if you brush thrice a day but sloppily? I've seen people who tell me they brush their teeth three times a day (and I believe them) but they still have plaque and calculus on their teeth.

Plaque is soft and can be removed with a toothbrush. When it's hard – tartar or calculus, you'll need professional cleaning or scaling.

This book aims to provide concise and clear concepts on various oral care issues written in simple language by a qualified dental professional.

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