

Word_{OF} MOUTH

A SEMIANNUAL PUBLICATION OF THE MASSACHUSETTS DENTAL SOCIETY

Summer - Fall 2016

A close-up portrait of a young man with dark hair and eyes, looking directly at the camera. He has a lip piercing in his lower lip. The background is dark.

Oral Piercing

.....
An Oral Health
DON'T



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The Massachusetts Dental Society (MDS) is pleased to make this publication available to our member dentists as a way of communicating important oral health information to their patients.

Information in **WORD OF MOUTH** articles comes from dental health care professionals of the MDS and other leading professional dental organizations, including the American Dental Association. If you have any questions about specific content that may affect your oral health, please contact your dentist. For news regarding oral health, visit the "For the Public" section of the MDS website at massdental.org.

Your comments and suggestions regarding **WORD OF MOUTH** are always welcome. All correspondence and requests for additional copies may be forwarded to:

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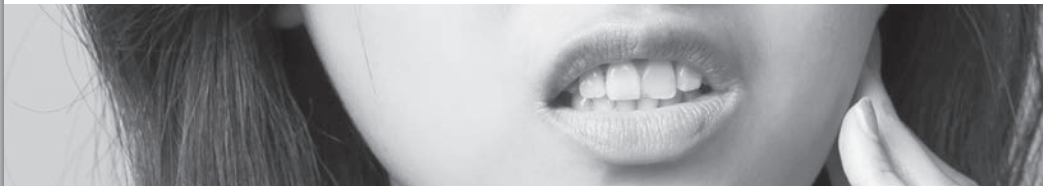
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Oral Piercing— An Oral Health **DON'T**

This fall saw multitudes of students returning to college at many of the Boston-area schools, but some may be returning home for Thanksgiving or winter break with more than just their laundry to be washed. While many consider having their ears pierced a rite of passage, today's teens and young adults are often turning to another type of piercing as a fashion statement—oral piercing.

In tongue piercing, a barbell-shaped piece of jewelry is placed through the thickness of the tongue with a needle. The end of the jewelry is then placed through the hole and a backing is screwed on. In lip and cheek piercing, a cork is positioned inside the mouth to support the tissue as it is pierced with a needle. The needle is inserted through the tissue and into the cork backing, and then replaced with jewelry and a backing that is screwed into place. Healing typically takes four to six weeks but can sometimes take months, and oral piercings are usually administered without anesthesia, which may be reason enough to avoid them for squeamish types.

Today, body piercing is seen as a fashion statement, worn as accessories, as innocuous as wearing a ring or a necklace. Some view it as art, while others view it as an expression of their identity. However, oral piercing, which involves the tongue, lips, or cheeks, has actually been implicated in a number of harmful dental conditions and could be a potential risk to your health.



Be aware of the risks involved:

- INFECTION** Nerve damage
- HEPATITIS** Gum recession
- EXCESSIVE BLEEDING**
- Speech impediments**

The Massachusetts Dental Society (MDS) discourages patients from getting oral piercings because of their serious oral health complications, including:

- **Redness and/or swelling** at the piercing site. In certain cases, swelling from a tongue piercing can be so severe that it actually closes off the airway and blocks breathing.
- **Infection.** The mouth is full of bacteria that can enter the piercing site and cause an infection. Handling the jewelry with unclean hands can also transmit bacteria, and food particles that accumulate around the jewelry can breed bacteria, as well.
- **Excessive bleeding** can occur at the piercing site from damaged blood vessels.
- **Nerve damage can develop** if the piercing is done incorrectly, resulting in numbness and change in perception of taste.
- **Gum recession can occur**, especially with barbell-type jewelry where there can be constant rubbing of the metal against the gum tissue.
- **Teeth can be damaged** when the metal jewelry that comes into contact with teeth causes breaks or cracks, especially while eating, talking, or sleeping, or if the wearer continuously “plays” with the jewelry.
- **Allergic reactions** to the metal can occur at the piercing site.
- If the jewelry comes loose, **it could be easily swallowed and pose a choking hazard.**

Other side effects have been reported, including scar-tissue formation and speech impediments due to an increase in saliva flow and/or from having a foreign object in the mouth. The National Institutes of Health has even linked hepatitis to oral piercing.



Did You Know? Oral piercings are usually administered without anesthesia.

Still considering getting an oral piercing? The MDS wants you to be aware of the risks involved. But if you do decide to get an oral piercing, it's important that you do your research and choose a professional piercer who uses a fresh needle every time. Ensure that the equipment is properly sterilized and that the right type of metal is used—usually, surgical-grade, stainless-steel jewelry is less likely to cause an allergic reaction.

Already have an oral piercing? You will want to be sure to maintain the best oral hygiene possible to prevent infection at the piercing site. Use an antiseptic mouthwash after every meal, and brush the jewelry as you would your teeth to remove any food particles or bacteria. Once the piercing has healed, consider removing the jewelry before eating, sleeping, or any type of physical activity. Also, make sure to have regularly scheduled dental checkups, because your dentist will be able to spot any potential problems, such as soft-tissue damage or cracked teeth.

When it comes to making a fashion statement, oral piercings may look cool, but returning home from school with good grades and a healthy smile look so much better.



The Daily Grind Can Begin at Any Age

There are many reasons to be stressed these days: The 2016 presidential election, the Zika virus, and the economy, to name a few. As a result, this stress sometimes manifests itself in physical symptoms. One of them is teeth grinding, also known as **bruxism**, and kids are just as susceptible as adults.

Teeth grinding is an oral habit that involves clenching and grinding of the teeth. It can occur either during the day or at night and often goes unnoticed by the person doing it. Some common symptoms include waking up with a headache, toothache, or earache. You may also have tenderness in your face, jaw muscles, and/or your teeth or gums. During a dental visit, your dentist or hygienist may detect that your teeth, fillings, or crowns are worn down.

And while children may not have to worry about the same things adults do, they, too, can experience their own forms of stress. This means that they also can fall victim to bruxism, resulting in headaches, earaches, and in chronic cases, facial pain and temporomandibular joint (TMJ) disease. By being aware of the signs of bruxism, parents can be better prepared to help their children maintain optimum oral health, resulting in happier and healthier children.

Children, especially, are less in tune with their health and not always able to pinpoint where or why something is hurting them. And with a condition like bruxism, which often only occurs during sleep, parents need to pay extra attention to suss out the symptoms.

In the majority of cases, parents detect bruxism through the sound of their children's upper and lower teeth clenching together when they are sleeping. Although research has yet to attribute the cause of teeth grinding to any single factor, pain and discomfort from colds, ear infections, allergies, and other ailments may cause children to unwittingly grind their teeth. Problems in sleeping, an abnormal bite, and crooked or missing teeth are also thought to be causal factors in bruxism, according to the American Dental Association. Psychological factors, such as stress and anxiety, should not be overlooked. A change in routine (e.g., due to switching schools or the birth of a younger sibling) or worries about an upcoming test or soccer game can be very stressful for youngsters who have yet to develop healthy coping mechanisms. And this stress can result in teeth grinding, which can lead to oral health problems.

In children, bruxism can be considered a nervous habit similar to thumb sucking or lip biting. And like thumb sucking, teeth grinding can often be an unconscious occurrence, meaning that children aren't aware that they are grinding their teeth. Unfortunately, bruxism is also similar to thumb sucking in that prolonged grinding can result in damage to the teeth and jaws.

Damage to a child's primary dentition, or baby teeth, from teeth grinding can range from slight wear on the surface of the molars and/or incisors to severe wear of the entire dentition. In most cases, such wear is not painful to the child because the loss of tooth structure takes place over a relatively long period of time. However, in some severe bruxism cases, tooth sensitivity and even infection of the tooth's nerve may occur.

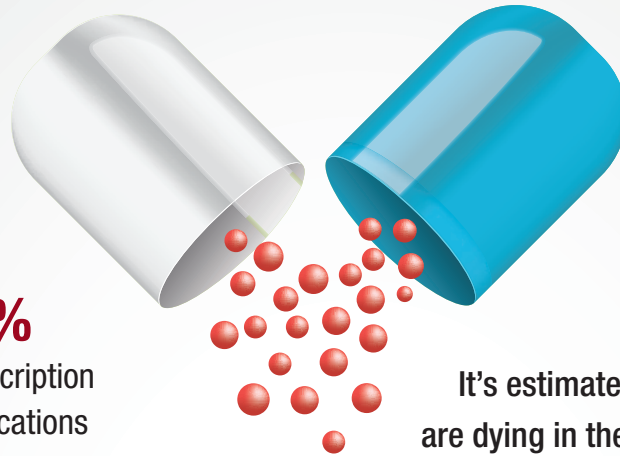
Fortunately, in the majority of cases of pediatric teeth grinding, the habit disappears as the child ages; however, parents who suspect their child is experiencing bruxism should be sure to contact their dentist for an evaluation. Based on the diagnosis, the dentist may recommend a custom-made nightguard to be worn during sleep. The nightguard fits over the teeth on one jaw and acts as a buffer between the upper and lower teeth, absorbing the pressure of biting and preventing further damage to the tooth surface.

If stress is considered to be a factor, parents should talk with the child to help allay his or her fears and encourage the child to adopt calming habits before bedtime, such as taking a warm bath, reading a book, or going for a relaxing walk.

YOU Can Help Reduce Opioid Abuse

OVERDOSE DEATHS
now surpass deaths from
car accidents.

MORE THAN 80%
of people who misuse prescription
drugs are using pain medications
prescribed to someone else.*



This crisis touches EVERY COMMUNITY
and claims victims of
all ages, genders, races, and
economic backgrounds.

It's estimated that **FOUR PEOPLE**
are dying in the state **EVERY DAY** from
overdoses related to opioid abuse.

*Source: U.S. Centers for Disease Control and Prevention

In 2016, **Massachusetts**
set a law that, for the first time,
limits opioid prescriptions
to a **seven-day supply.**

*Massachusetts is the
« first state in the nation to
adopt this legislation.*

WHAT YOU CAN DO TO HELP KEEP YOUR MEDICATIONS SAFE:

- **Monitor how many pills** are in each of your prescription bottles and keep track of your refills.
- **Secure your prescriptions** in the same way you would other valuable items. Keep medications in a safe place that only you know about.
- **Do not allow children** to manage their own medications. Make sure to either oversee them taking their medicine or give it to them directly.
- **Discard expired unused medications.** Unless otherwise instructed, do not flush medications down the toilet. Instead, mix them with things such as used coffee grounds or kitty litter and discard them in an empty can or bag in your household trash.
- To protect your privacy and prevent unauthorized refills, **scratch out all personal information** on prescription labels from empty pill bottles before discarding them.
- **Check for medication take-back programs** with your local police or fire department.



Don't Toss The Floss

Earlier this summer, oral hygiene found itself in the middle of a debate after news reports questioned whether flossing teeth was a waste of time. After reading a headline or hearing a sound bite on the radio, patients wondered whether this meant they could toss their floss, leading to dentists everywhere shaking their heads in exasperation. The reporters came to this conclusion because existing scientific research didn't support the oral health benefits of flossing. But the fact is, a lack of strong evidence does not equate to a lack of effectiveness, according to the American Dental Association (ADA), which represents 159,000 dentists from across the country and which has advocated for the public's health since 1859. Bottom line: Flossing is essential to helping you maintain healthy teeth and gums because it removes plaque that can lead to cavities or gum disease from the areas where a toothbrush can't reach. This is key in preventing cavities and/or gum disease.

The news stories also erroneously implied that the U.S. government had changed its stance on the importance of flossing because the 2015 U.S. Dietary Guidelines didn't include flossing. This could not be further from the truth, which is that the Dietary Guidelines Advisory Committee made a deliberate decision to focus on food and nutrient intake (i.e., added sugar) with its 2015 report. What's more, the U.S. Surgeon General, the U.S. Centers for Disease Control and Prevention (CDC), and other health agencies continue to promote their long-standing recommendation to clean between teeth daily. The U.S. Department of Health and Human Services (HHS) reaffirmed the importance of flossing in an August 4, 2016, statement to the ADA:

"Flossing is an important oral hygiene practice. Tooth decay and gum disease can develop when plaque is allowed to build up on teeth and along the gum line. Professional cleaning, tooth brushing, and cleaning between teeth [flossing and the use of other tools such as interdental brushes] have been shown to disrupt and remove plaque. At HHS, the National Institute of Health's National Institute of Dental and Craniofacial Research [NIDCR], CDC's Division of Oral Health, and Healthy People 2020 have additional information and resources about efforts to address and improve oral health."

For optimum oral health, you should floss once a day for two to three minutes, taking the time to floss between every tooth. Flossing properly can be tricky, however, so don't be afraid to ask your dentist or dental hygienist to demonstrate the correct technique for you to get the most benefit. You'll also want to be aware that timing is everything when it comes to flossing. According to the ADA, if you floss before you brush your teeth, the fluoride from the toothpaste has a better chance of reaching between the teeth.

When it comes to healthy teeth and gums, go to the best source for oral health information: your dentist and dental professionals like the ADA and the Massachusetts Dental Society.

Bottom Line:

Flossing is essential to helping you maintain healthy teeth and gums because it removes plaque that can lead to cavities or gum disease from the areas where a toothbrush can't reach.



SMOKELESS TOBACCO

Taken **OUT** of the Ballgame in Boston

You may have noticed something a bit different at **Fenway Park** this year. No, it's not that the Red Sox were actually winning more games than they had in the last couple of seasons . . . although that was a nice change. It's that you probably didn't see players openly chewing tobacco, because Boston became the second city in the United States, behind San Francisco, to ban smokeless tobacco at ballparks. The ban, which went into effect in April with the start of the 2016 baseball season, prohibits the use of smokeless tobacco in any of the city's baseball parks and other sports locations.

The impetus behind the new law is that despite a decline in cigarette smoking nationally, the use of smokeless tobacco continues to be popular, especially among younger Americans. A recent report by the U.S. Centers for Disease Control and Prevention showed that high school athletes are using smokeless tobacco products at nearly twice the rate of those who don't play school sports. According to the study, 5.5% of high school students reported chewing tobacco and nearly 2% of middle school students admitted that they use the product.

The use of smokeless tobacco has been associated with oral cancer. According to the Oral Cancer Foundation (OCF), 100 new cases of oral cancer are diagnosed in the United States every day, and every hour one person dies from the disease. Tobacco use is responsible for 75% of oral cancers, according to the OCF.

Furthermore, a survey by the Massachusetts Departments of Public Health and Elementary and Secondary Education found that the use of smokeless tobacco among high school students is higher than the rate of cigarette smoking.

Pain is rarely an early symptom of oral cancer. For this reason, it's important to visit your dentist regularly. Chances for a cure are best if oral cancer is detected early. But you should also pay attention to what's happening in your mouth. The early warning signs of oral cancer include:

- A sore in your mouth that bleeds easily and doesn't heal
- A lump or thickening anywhere in your mouth or neck
- Soreness or swelling that doesn't go away
- A red or white patch that doesn't go away
- Trouble chewing, swallowing, or moving your tongue or jaw

To prevent the risk of oral cancer, it's important to avoid tobacco products in the first place. And since many young people tend to want to emulate baseball players, not seeing them chew tobacco on the field or in the dugout or bullpen is a big first step. So while the Red Sox didn't make it to the World Series this year and David "Big Papi" Ortiz retired from the Red Sox, this means there's still something to cheer about at Fenway Park.



Attention Athletes

Don't pay a penalty for **NOT WEARING** a MOUTHGUARD



A CUSTOM MOUTHGUARD

is the **best** mouthguard in terms of fit, comfort, and protection. Consult your dentist.



Athletes are **60 TIMES** more likely to suffer damage **to the mouth** when **not** wearing a **mouthguard**.



The cost to repair a **knocked-out tooth** and follow-up dental treatment can cost **THOUSANDS OF DOLLARS**—many times greater than the price of a **MOUTHGUARD**.

DO NOT wear a **retainer** or other removable appliance while participating in any contact sports.



More than 5 MILLION TEETH

are **knocked out** each year through sports injury, accident, or play.



Even athletes who use **HELMETS** or **FACE MASKS** should wear **MOUTHGUARDS**.



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