



# Oral health.

# good for life

When it comes to oral health knowledge, it pays to brush up.

It's a simple idea: You can't have a healthy body without a healthy mouth. But according to dental professionals, many Canadians still aren't getting the message. As a result, they're increasing their risk for oral cancer, cardiovascular problems and even pneumonia.

In an effort to change that, the Office of the Chief Dental Officer, Health Canada, the Canadian Dental Association (CDA) and the Dental Industry Association of Canada have partnered in a unique health-promotion awareness initiative.

"Our objectives are improving awareness of the benefits of sustained oral

hygiene, improved knowledge about the relationship between general and oral health, and improved knowledge about the risk factors and preventive behaviours that lower the risk of oral cancer," says Dr. Euan Swan, manager of dental programs at the CDA.

For years, says Dr. Swan, dental and medical care have been separated, but today, "there is a better understanding of the relationship between oral and general health. If you have chronic, low-grade inflammation of your gum tissue, for example, that inflammatory process contributes to ill health in other parts of the body. It can cause cardiovascular problems that contribute to

stroke; in frail seniors, oral bacteria can be inhaled into the lungs and contribute to respiratory pneumonia."

"Our focus is on keeping people well instead of waiting until they get sick and then trying to do something about it," says Dr. Peter Cooney, chief dental officer of Canada. "In North America, the number one chronic disease among [children] is dental decay. It is five times more prevalent than asthma and seven times more prevalent than hay fever. Yet this is a disease that is almost 100 per cent preventable with good oral hygiene, proper nutrition and access to fluorides, which help strengthen the enamel of the teeth."

In addition to appropriate brushing and flossing, new technologies such as dental sealants can help keep the mouth free of bacteria that can harm teeth and contribute to disease elsewhere in the body. "If you put a little sealant on a tooth, you don't run into the problems of needing a large filling down the road. It is very valuable in molars, particularly when children are young, because that's when they tend to be most susceptible to decay," says Dr. Cooney.

Neglecting regular dental checkups may mean that cavities and gum disease are overlooked until they become more serious and expensive to

treat – but there are even more dangerous potential consequences of ignoring the inside of your mouth.

"Oral cancer kills more people in Canada than melanoma," says Dr. Cooney. "More people are diagnosed with oral cancer each year than with cancer of the stomach, brain or ovaries. If you look in your mouth and see something unusual, you need to see your oral health professional to have it checked. If you catch it early, your dentist can do a fairly simple treatment that will remove it. If it starts to get invasive, it becomes difficult to cure."

Tobacco use (smoking and smokeless) is the leading risk factor for oral cancer, followed by excessive alcohol intake, says Dr. Swan. "If you're a smoker and abuse alcohol, your risk is increased greatly. When you see a dentist, he or she will ask you if you use tobacco and if you'd like to stop. If so, they can help you stop or refer you to other health professionals who can help. They will also examine the soft tissue in your mouth for any suspicious lesions that might be early signs of oral cancer."

The Dental Industry Association of Canada "is absolutely delighted to be part of this initiative, which aims to make Canadians fully aware of the connection between oral health and systemic health," says Bernie Teitelbaum, executive director.

The memory of a painful experience in childhood keeps some adults from visiting the dentist as often as recommended but, says Mr. Teitelbaum, pain during a dental procedure is a thing of the past. "Dentists are now using room-temperature anesthetics, nitrous oxide, lasers and other new technologies to make the dentist office experience completely painless."

Whatever the barriers, it's important that individuals overcome them. Regular oral hygiene and dental visits improve overall health and well-being. "Oral health contributes to the enjoyment of life," says Dr. Swan. "In previous generations, many people lost their teeth as they aged. Today, young Canadians have less tooth decay, so people are retaining teeth. If they practise good oral hygiene, those teeth will last a lifetime and contribute to their overall health." ■

## Celebrate Oral Health Month

It's always a good time for Canadians to pay closer attention to their oral health. While a pain in other parts of the body usually prompts a trip to the doctor, too many people ignore bleeding or tender gums.

But oral health problems can be an indication of a serious health problem. Research has established a link

between oral disease and diseases such as diabetes and pneumonia. While the research so far is not as conclusive, there may even be an association between oral diseases and heart disease and stroke, and premature and low birth-weight babies.

National Oral Health Month, which originated as part of the dental pro-

fession's commitment to promote oral health, provides an opportunity for all Canadians to learn about oral wellness and embrace the Canadian Dental Association's 5 steps to good oral health as part of a healthy lifestyle and to help reduce the risk of disease.

To learn more, visit [cda-adc.ca](http://cda-adc.ca).

To learn more, visit the Health Canada website, [healthcanada.gc.ca/oralhealth](http://healthcanada.gc.ca/oralhealth).

"In North America, the number one chronic disease among [children] is dental decay. It is five times more prevalent than asthma and seven times more prevalent than hay fever."

## KNOWLEDGE

## Canadian Health Measures Survey: National oral health data points the way to better care

Information gathered through household surveys and dental examinations of about 5,600 people across the country is providing the most comprehensive picture of Canadians' oral health in more than 30 years.

And the oral health data collected in the Canadian Health Measures Survey will be a rich source of knowledge for federal and provincial policy-makers, researchers and dental professionals for years to come, according to Dr. Peter Cooney, chief dental officer for Canada.

"In terms of health promotion and disease prevention, these oral health indicators will allow us, at the federal level, to target our efforts in public health," says Dr. Cooney. "In turn, it will allow the other stakeholders – provinces and territories, and dental professionals – to focus their efforts on the other part of the equation, treatment and preventive care."

Some information on the oral health indicators has been released, with more in-depth releases planned. There has been a growing recognition in recent years of the need for a current, comprehensive assessment of the oral health status of Canadians. Dr. Cooney's

See **Survey** CDA4

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## Dental health is connected to general health.

Tooth and gum disease may increase adult risk of heart disease and diabetes.



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# Good dental care starts early

Canadians might think they’re doing a reasonable job with their children’s oral hygiene, but dentists say myths and inadequate oral care practices continue to contribute to unacceptable levels of childhood tooth decay and other oral health concerns.

“I think people would be surprised by the number of children who have extensive decay in their teeth,” says Dr. Rosamund Harrison, professor and chair of the division of pediatric dentistry at the University of British Columbia. “The assumption tends to be that, in 2010, problems like toothaches and cavities are a thing of the past. But tooth decay affects about one out of five kindergarten-aged children. Often such young children require a general anesthetic to have their teeth repaired.”

Another prevalent myth is that baby teeth aren’t important, says Dr. Harrison. “Children are very resilient and often don’t complain if they have a problem. They adapt –

but they may be refusing healthy foods because such foods get stuck in the cavities in their teeth or their teeth are sore when they chew. If children cannot chew, they may resort to drinking liquids, such as juice, which can lead to further decay.”

Tooth pain may also affect a child’s disposition, ability to sleep and social interaction. Further, it may trigger problems that last a lifetime. “Starting life with serious dental problems can mean baby teeth need to be extracted, then the permanent teeth don’t come in as nicely, then the children may not look after their adult teeth as well as they should because they don’t like the way they look,” says Dr. Harrison.

Early intervention is essential to prevent these ongoing problems, says Dr. Felicity Hardwick, president, B.C. Society of Pediatric Dentists, and a member of the British Columbia Dental Association’s (BCDA) Early Childhood Caries Prevention Task Force. “Large numbers of children



**Tooth decay – a preventable disease – affects about one in five kindergarten-aged children. Dentists encourage parents to take their children’s oral care seriously, including by ensuring their child’s first checkup or dental clinic screening occurs between six months and one year of age.** PHOTO: ISTOCKPHOTO.COM

under three come in to see me with a lot of decay.”

One of the most important things parents should know is that the best time for a child’s first checkup or dental clinic

screening is between six months and one year of age, Dr. Hardwick says. “It’s a proactive, preventive measure. They won’t get a cleaning, but a dental professional will look

at their teeth and make a referral if they see any potential problems. If there is a problem and parents wait until the child is older, they may need an extraction or root canal.”

A new educational video for parents, “How to Take Care of Your Child’s Teeth,” is available online at [bcdental.org](http://bcdental.org). It was created by BCDA’s Early Childhood Caries Prevention Task Force with funding from the Ministry of Healthy Living and Sport.

The video provides important advice, such as not putting babies to bed with a bottle of juice or milk or allowing toddlers to sip juice or milk out of a “sippy cup” except at

mealtimes, avoiding sugary snacks such as raisins and the importance of a healthy diet and hygiene.

“The bottom line is that parents should start cleaning the baby’s mouth as soon as the baby teeth emerge,” says Dr. Hardwick. “Trying to brush the teeth of a two-year-old can be like wrestling alligators. Parents aren’t always getting a good look in there, so it may be a question of having someone help them. And just as some children will scream when you wipe their face, some will scream when you brush or try to look inside their mouth. But with regular practice, it becomes part of normal daily hygiene.”

“Children are very resilient and often don’t complain if they have a problem. They adapt – but they may be refusing healthy foods because their teeth are sore when they chew.”

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## PROFESSIONAL GUIDANCE

# CDA Seal of Recognition – a symbol of confidence for consumers

Consumers trying to choose from an array of oral health care products – whether toothpaste, dental floss, manual and electric toothbrushes or sugar-free gum – can often look right on the package for some guidance from dental professionals.

The Canadian Dental Association (CDA) Seal of Recognition appears on a number of products sold in Canada and in advertising promoting them. The seal is designed to help consumers make informed choices, says Dr. Euan Swan, CDA manager, Dental Programs.

“When you see a statement of claim on a package and it is accompanied by the CDA Seal of Recognition, you can have confidence that the product does what it says it does,” says Dr. Swan. “For example, if the claim is that the product helps prevent tooth decay, the seal tells you that CDA recognizes the claim as legitimate.”

The CDA Seal was originally developed in 1971, “when not all toothpastes had fluoride in them,” Dr. Swan explains. “The profession saw the value of educating consumers about the therapeutic benefits of fluoride and to help them understand which toothpastes were effective.”



Today, there are far more oral care products on the shelves, with claims not only about cavity prevention, but about everything from hypersensitivity to teeth whitening. The CDA Seal of Recognition program is voluntary, but many manufacturers apply because they recognize the value; market research shows the symbol affects consumers’ choices.

To apply for the seal, manufacturers supply CDA with proof that Health Canada has approved the product for sale in Canada and documentation of the product’s effectiveness related to the claim, as well as information on their manufacturing processes, facilities and quality assurance programs.

“When we have all the information on a product, we send it for review by two independent consultants, who are practising dentists, and if both are satisfied, CDA recognizes the claim and awards the seal,” says Dr. Swan.

The manufacturers also provide CDA with advance copies of any advertising in which they use the seal, and must inform the association if they change any of their ingredients, processes or ads. That way, CDA helps ensure the value of the seal stands the test of time.



**The CDA Seal of Recognition on an oral health product’s packaging assures consumers that the product performs according to its claims.** PHOTO: ISTOCKPHOTO.COM



# Gums to Impress your Dentist & Hygienist

Simply brushing your teeth twice a day is not always enough to keep the dentist away. 'Lazy' brushing can allow gum disease to develop. However, brushing regularly and in the right way, helps keep teeth and gums in peak condition to maintain all-round oral health.

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## Healthy gums

"Brushing thoroughly and along the gum line is one of the key ways to ensure that plaque is cleaned away, preventing bacteria from damaging the gum tissue," explains Dr. Barbara J. Steinberg, Clinical Professor of Surgery at Drexel University in Philadelphia.

"Being aware of how healthy gums should look is the first step in the prevention of gum disease which can ultimately affect your teeth and smile," she adds. Dr. Steinberg pinpoints six key signs to help identify healthy gums.

## Superior cleaning

Delivering 31,000 strokes per minute, the Sonicare FlexCare+ provides a superior cleaning action for efficient plaque removal, driving fluid between the teeth and along the gums to help keep them in peak condition. Together with the right toothbrush, it is important to brush, particularly after meals to keep gums healthy and your dentist and hygienist impressed.

To find out more about Philips Sonicare FlexCare+, visit [www.sonicare.ca](http://www.sonicare.ca)

## a Signs of Healthy Gums

1. Healthy pink colour
2. No redness or puffiness
3. A smooth, tight contour around the teeth
4. No gaps between the teeth
5. No recession of gums
6. No deposits, plaque, tartar or stain on teeth



**John aged 39, Toronto** – I always brushed my teeth regularly with a manual toothbrush, but still had some gum health problems. After using FlexCare+ for several weeks, my teeth felt much cleaner and fresher, but most of all, my dentist commented on the improvement in my overall gum health.

**Sarah aged 42, Vancouver** – It's so easy to use the FlexCare+ as it helps me keep my teeth and gums clean and healthy with no hassle. The Gum Care mode really gives me the confidence that I'm looking after my teeth and gums properly.

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# Talk to your dentist before using whitening treatments

Almost anyone can now have a movie-star smile, thanks to the availability of affordable bleaching products and whitening toothpastes. In fact, the results of regular bleaching can be dazzling, says Dr. William Liebenberg, a dentist and researcher in North Vancouver, B.C. “It is so effective, you can’t believe it.”

But there are a few things you should know before you buy.

For example, while whitening toothpastes will gently remove stains caused by substances such as coffee and red wine, “they will not change the natural colour of the tooth,” says Dr. Benoit Soucy, director of clinical and scientific affairs at the Canadian Dental Association.

Bleaches, on the other hand, can. However, they also have limitations, as well as the potential to cause side effects. Since bleaches don’t whiten

fillings and crowns, or softer, exposed roots in the same way they do tooth enamel, “you can end up with a polka-dot smile,” Dr. Soucy notes. What’s worse, if applied to exposed roots and “leaking” or untreated cavities, bleach may seep into the pulp inside the tooth, which can sometimes lead to the need for a root canal.

Consequently, regardless of whether you’re considering having your teeth bleached

professionally or using a home kit, it’s a good idea to see your dentist first. He or she can check for cavities, point out potential problem areas, and tell you whether you’re likely to get the results you’re hoping for.

Of course, before you book your appointment, you’d be wise to learn the differences between do-it-yourself bleaching and the in-office variety. Price is the main plus of do-it-yourself bleaching: high-quality home kits cost roughly \$60 versus \$250 to \$400 for in-office whitening. Both professional bleaches and most drugstore brands are based on carbamide peroxide, which is thicker, and thus more apt to stay put, than straight hydrogen peroxide.

So what should you look for? Skip paint-on varnishes and plain hydrogen peroxide preparations, which tend to be less effective because they don’t stay on as long, and choose a product containing 10 per cent carbamide peroxide. “Research has shown that a concentration of 10 per cent will get the job done as effectively as the higher concentrations, with a lower potential for side-effects such as



Both at-home and in-clinic whitening treatments can deliver dazzling results, but dentists caution consumers to understand the limitations and possible side-effects. PHOTO: ISTOCKPHOTO.COM

increased sensitivity,” said Dr. Liebenberg.

In-office whitening has its advantages, though. The trays used to hold the bleach are custom-fit, which means they’re much more comfortable than their off-the-rack counterparts. And if you’re in a hurry, dentists have access to more concentrated bleaches than those available over the counter. (On the downside, these products can burn the lips and teeth

if used improperly.)

But while stronger bleach gets faster results, adding a special light does not speed the process further, Dr. Liebenberg stressed. “Manufacturers have convinced people – including many dentists – this method is superior, but it doesn’t work,” he says. The light simply dehydrates teeth temporarily, making them look whiter for a few hours – at an extra cost of approximately \$250 to \$350. ■

## Study driving evidence-based care

Survey  
cont'd from CDA1

appointment as chief dental officer in 2004 demonstrates the importance of the oral health agenda as part of the federal government’s broader focus on all aspects of health promotion and disease prevention, he notes.

“In the case of oral health, the two major diseases are dental decay and periodontal or gum disease, and both of these are almost 100 per cent preventable. So it is very important for us to know the exact status of these diseases in Canada and understand the best approaches to reducing them.”

The Canadian Health Measures Survey collected information on Canadians’ health in a number of key areas, including nutrition, smoking and alcohol use. Par-

ticipants ranging in age from six to 79 were interviewed in person by Statistics Canada, followed by examinations by a team of dentists from the Department of National Defence.

Adding the dental exams to the survey made the project more powerful, says Dr. Cooney. “Comparing people’s self-reporting to the clinical results is comprehensive and very valuable,” says the chief dental officer. “And we will also be able to compare oral health status with other health indicators – which is important, given our growing knowledge about the links between oral health and overall health.”

The release of the oral health survey results is exciting and significant for dental professionals says Dr. David Zaparinuk, a Victoria dentist and board member for British Columbia with the Canadian

Dental Association (CDA). He chairs the CDA Canadian Health Measures Survey working group, tasked with engaging stakeholders to improve access to oral health care.

“Our profession is based on science. The survey provides hard numbers and will foster further studies to drive evidence-based care,” he says.

The survey also assessed links between oral health and demographic factors, such as age, and socioeconomic factors, such as income. This information will allow the dental profession to focus on prevention and better care for at-risk groups, says Dr. Zaparinuk.

“The survey is helping dentistry raise awareness of oral health issues and giving us the tools to plan strategically to address gaps for specific populations within Canada.” ■

“Both professional bleaches and most drugstore brands are based on carbamide peroxide, which is thicker, and thus more apt to stay put.”



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**80% of Adults will suffer from gum disease in their lifetime.** One of the issues with gum disease is that it often develops slowly and without pain. When plaque (tartar) is allowed to accumulate, infection will occur at the gumline. The mildest form of gum disease is gingivitis. It causes the gums to become red, swollen and bleed easily. Fortunately, gingivitis is reversible with professional treatment and proper oral hygiene (brushing, flossing and custom care including the use of “Between-the-Teeth” Cleaners).

Brushing is fundamental for effective oral care. Toothbrushes are excellent at removing plaque from the tooth surface. However, there are areas of the tooth surface that are not easy for the toothbrush to reach and it is important to use other devices that complement brushing.

Your dental professional will invariably remind you to floss. This is because flossing is another oral care essential. Flossing helps keep gums healthy by cleaning teeth and reducing plaque below the gumline. However, for those individuals with spaces between their teeth, using “Between-the-Teeth” Brushes in addition to flossing is strongly recommended to maximize plaque removal. “Between-the-Teeth” Cleaners are also great for cleaning around crowns, bridges and implants.

To meet your individual needs, GUM® has developed “Between-the-Teeth” Cleaners for both home use (GUM® Proxabrush and GUM® Proxabrush Snap-Ons) and “on-the-go” use (GUM® Trav-Ler®). And because not all spaces between teeth are the same, GUM® has made it easier to select the size recommended by your dental professional. Look for the icons on the packaging for the optimal brush size for you. Green is for narrow and blue is for wider spaces.

For the orthodontic patient, look for GUM® Go-Betweens Angled Cleaners specifically, designed for cleaning around and through arches.

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# Collaborative approach needed to ensure equitable access to oral health care for Canadians

By Dr. Ronald G. Smith  
*President, Canadian Dental Association*

Canada has one of the best oral health care delivery systems in the world with care primarily delivered through private dental clinics.

However, access to fully equitable oral health care should not be limited to Canadians who work full time or benefit from comprehensive insurance plans. While most Canadians do have access to professional dental care and, as a result, have good oral health, this is not the case for everyone.

A daily regimen of brushing and flossing is an essential part of good oral health; access to professional dental care is equally important for prevention, diagnosis and treatment. Sadly, not all Canadians in need of care can access dental offices, suggesting that alternative models of care or funding should be explored.

The small minority of Canadians who experience poor oral health include children, seniors, low-income populations, people with special needs and Aboriginal people. These patient groups need the dental profession to advocate on their behalf for equitable access to oral health care.

We believe that broader access to care is possible through partnerships among the dental profession, other health professions, the federal and provincial governments and non-government community agencies. Finding solutions to the challenge is complex, and no one organization, government agency or community can be expected to



solely address the disparities. A collaborative approach among those who have the capacity to contribute to this challenge will lead to improved, equitable access to dental care ensuring better oral and general health for more Canadians. On behalf of Canadian dentists, we have the following recommendations.

- Where the ability to pay for dental care is a barrier to access, increased public funding is most appropriate.
- We support enhanced dental coverage for patients with special needs that recognizes and addresses their medically complex care requirements.
- We support establishing a baseline standard for all long-term care facilities to provide daily oral care for residents and access to annual professional oral health care.
- We support the inclusion of oral health education in school programs, outreach programs and community health centres as part of a larger collaborative approach with dental organizations, child poverty and advocacy agencies, non-dental health care providers and government. This includes supporting education programs that

are culturally appropriate and raising awareness in the community to help promote good oral health.

- We recommend the development of a national action plan to reduce the barriers to access to care, where these exist, and we suggest that several factors be considered in this collaborative approach.

The national oral health action plan should be based on the following principles and goals:

- oral health is an integral part of general health;
  - all Canadians have the right to good oral health;
  - tooth decay (dental caries) is a preventable disease;
  - a collaborative approach among oral health, medical and other health providers, provincial and federal health departments and educators; and
  - the creation of new minimum mandatory standards for Canadian dental public health programs with the resources to meet these standards.
- As oral health experts, dentists should play a primary role in planning and implementing any proposed oral health recommendations and initiatives, but we cannot do this alone. We strongly believe that we can achieve equitable access to oral health care for more Canadians with a collaborative approach to finding solutions where barriers to access to care exist. ■

The small minority of Canadians who experience poor oral health need the dental profession to advocate on their behalf for equitable access to oral health care.



## The dentist and your oral health: Advice from the Canadian Dental Association

Although our mouth is part of our body, we often think of it as something separate. In fact, what affects your mouth affects your whole body.

Dentists have a wealth of oral health knowledge to help you stay healthy and have a healthy-looking smile. With a dentist's help, you can enjoy good oral and general health.

It's important to see your dentist regularly, because there are many oral health conditions that a dentist can see, but you might not. He or she will look for more than just cavities – these health professionals will recognize gum disease and infection. Dentists can also pick up on

the signs and symptoms of diabetes, spot precancerous or cancerous lesions (oral cancer) and signs of other problems that could affect your general health. It is also important to keep your dentist informed of any changes in your overall health. This includes any medications you are taking, allergies and any specific advice given by your physician. This information will help your dentist determine a treatment plan that suits your individual needs, to better manage your oral and overall health.

Keeping a healthy mouth is an important part of leading a healthy life. As the leader of the dental team, your dentist can guide you there.



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# Clinic offers care to less fortunate

Vancouver's Downtown Eastside is well known as the country's poorest postal code. Many of its residents suffer from multiple health conditions: Mental illness and addiction are common, as are high rates of diabetes and HIV.

In this environment, a bad cavity or abscessed tooth can cause enormous suffering. For the past five years, however, a group of dentists, hygienists and dental students have volunteered their time to provide relief and ensure that care is available.

The Eastside Walk-in Dental Clinic, located at the Vancouver Native Health Society, is open all day Monday and Friday for dentistry and on Wednesday for dental hygiene, says Dr. Bruce Ward, clinic director. "We welcome donations, but we don't have any requirements for residency or payment."

Before the dental clinic opened, the medical clinic that operates in the same building had nowhere to refer patients with dental pain, he says. "It's taken a lot of pressure off the medical clinic, and gives resi-

dents with acute dental problems a place to come for help."

Residents from Vancouver General Hospital's Department of Dentistry provide care for acute issues each Monday, and UBC dental students (in their final year before graduating) staff monthly Saturday clinics, providing regular dental care such as fillings and root canals.

"There are a lot of people who don't have access to care," says Dr. Charles Shuler, dean of UBC's Faculty of Dentistry. "Our goal is to instill the concepts of social responsibili-

ty in our students and to help less-fortunate people receive oral health care they otherwise wouldn't receive."

Students are initially a bit overwhelmed by the nature of the care that is required, he says, but soon develop a renewed sense of being "in a good place in their lives; there are people a lot worse off. Then, because many of these patients have huge levels of neglect, the students begin to focus on the fact that they are required to provide dental therapies they might not otherwise see."



At the Eastside Walk-in Dental Clinic, located at the Vancouver Native Health Society, Dr. Bruce Ward and his team provide services free of charge to the city's less fortunate. The clinic is supported, in part, by volunteer dentists and hygienists, residents from Vancouver General Hospital and students from the UBC Faculty of Dentistry. PHOTO: LYNN FALCONER

## 5 Steps to Good Oral Health

As part of a healthy lifestyle and to help reduce the risk of oral disease, the Canadian Dental Association recommends following these steps to good oral health.

1.

See your dentist regularly: Regular checkups and professional cleanings are the best way to prevent problems or to stop small problems from getting worse, and your dentist will look for signs of oral disease. Oral diseases often go unnoticed and may lead to or be a sign of serious health problems in other parts of the body.
2.

Keep your mouth clean: Brush your teeth and tongue at least twice a day with a soft-bristle toothbrush and fluoride toothpaste to remove plaque and bacteria that cause cavities and periodontal disease (gum disease). And floss every
3.

Eat, drink, but be wary: Healthy food is good for your general health and your oral health. Limit foods and beverages that contain sugar or are high in acid.
4.

Check your mouth regularly for the signs of periodontal disease, tooth decay and oral cancer, and report any warning signs to your dentist: Look for red, shiny, puffy, sore or
5.

sensitive gums; bleeding when you brush or floss; bad breath that won't go away; and sensitivity to hot, cold, sweetness or pressure. The warning signs of oral cancer include unexplained bleeding, sores that don't heal within 7 to 10 days, white or red patches, numbness or tingling, small lumps and thickening on the sides or bottom of your tongue, the floor or roof of your mouth, the inside of your cheeks or on your gums.
5.

Avoid all tobacco products.
- Adapted with permission from cda-adc.ca.

The UBC initiative is expanding beyond the clinic environment to other communities with limited access to dental care, says Dr. Shuler. "This summer, students are taking equipment to Kupfer Island, where there is a First Nations community. As interest grows within the dental community, there are likely to be more dentists who volunteer to help supervise the patient care, and I think this initiative will become even broader. So far, there's been a fantastic response from UBC alumni."

Access to dental care is a serious issue that is often overlooked, he says. "If you have a medical problem, there's a place to go, but for bad dental problems there are far fewer options. We see people neglecting problems until they become quite serious."

"It isn't just people living on the streets, but low-income families. We see moms bringing in kids who have never seen a dentist, and when it gets to that point, you really have a lot more trouble making sure they receive good care."

For the volunteers, the experience is profoundly rewarding. The patients of the Eastside clinic are a cross-section of the working poor, senior citizens and immigrants, says Dr. Ward. "They all have serious problems and they're very grateful for the assistance we can give them."

### Putting your child to bed with milk or juice is the same as this.

There's a lot you may not know about your child's oral health, which is where a dentist can help. Visiting a dentist by your child's first birthday and helping them brush properly are simple things you can do to ensure the well-being of your youngster. After all, a healthy body starts with a healthy mouth.

See your dentist.



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