

# VENEERS

**Q** What is a veneer?

**A** A veneer is a thin layer of porcelain made to fit over the front surface of a tooth, like a false fingernail fits over a nail. Sometimes a natural colour 'composite' material is used instead of porcelain.

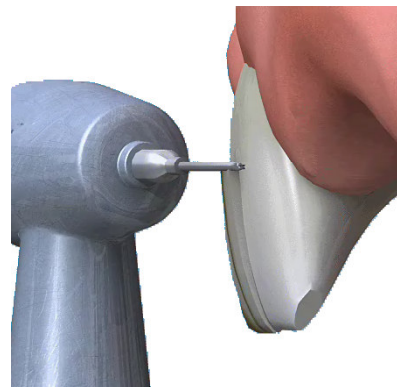
**Q** What are the advantages of veneers?

**A** Veneers make teeth look natural and healthy, and because they are very thin and are held in place by a special strong bond (rather like super-glue) very little preparation of the tooth is needed.



**Q** When would I need a veneer?

**A** Veneers can improve the colour, shape and position of teeth. A precise shade of porcelain can be chosen to give the right colour to improve a single discoloured or stained tooth or to lighten front teeth (usually the upper ones) generally. A veneer can make a chipped tooth look intact again. The porcelain covers the whole of the front of the tooth with a thicker section replacing the broken part. Veneers can also be used to close small gaps, when orthodontics (braces) are not suitable. If one tooth is slightly out of position, a veneer can sometimes be fitted to bring it into line with the others.



**Q** What about alternatives?

**A** A natural-coloured filling material can be used for minor repairs to front teeth. This is excellent where the tooth supports the filling, but may not work so well for broken tooth corners. There will always be a join between the tooth and the filling material.

Crowns are used for teeth that need to be strengthened – either because they have broken, have been weakened by a very large filling, or have had root canal treatment.

**Q** How long will a veneer last?

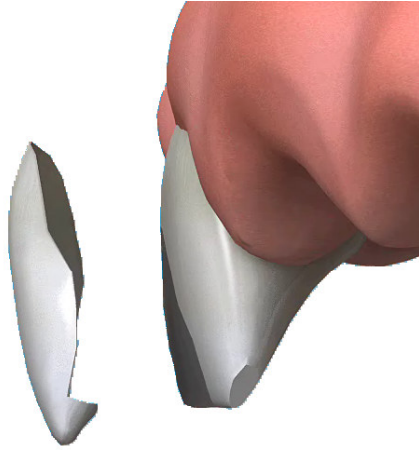
**A** Veneers should last for many years, but they can chip or break, just as your own teeth can. Your dentist will tell you how long each individual veneer should last. Small chips can be repaired, or a new veneer fitted if necessary.

**Q** How are teeth prepared for a veneer?

**A** Some of the shiny outer enamel surface of the tooth may be removed, to make sure that the



veneers can be bonded permanently in place later. The amount of enamel removed is tiny and will be the same as the thickness of the veneer



to be fitted, so that the tooth stays the same size. A local anaesthetic (injection) may be used to make sure that there is no discomfort, but often this is not necessary. Once the tooth has been prepared, the dentist will take an 'impression'. This will be given to the dental technician, along with any other information needed to make the veneer. The colour of the surrounding teeth is matched on a shade guide to make sure that the veneer will look entirely natural.

**Q How long will it take?**

**A** A veneer takes at least two visits; the first to prepare the tooth and to match the shade, and the second to fit it. Before bonding it in place, your dentist will show you the veneer on your tooth to make sure you are happy with it. Bonding a veneer in place is done with a special adhesive, which holds it firmly on the tooth.

**Q Will I need a temporary veneer between visits?**

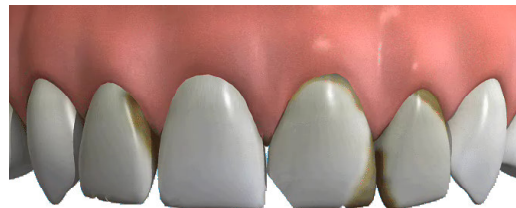
**A** Because the preparation of the tooth is so slight you will probably not need a temporary veneer. The tooth will look very much the same after preparation, but will feel slightly less smooth.

**Q What happens after the veneer is fitted?**

**A** Only minor adjustments can be made to the veneer after it is fitted. It is usually best to wait a little while to get used to it before any changes are made. Your dentist will probably want to check and polish it a week or so after it is fitted, and to make sure that you are happy with it.

**Q How much will it cost?**

**A** Many dentists provide cosmetic treatment privately. It is important to discuss charges and treatment options with your dentist before starting treatment.



# IMPLANTS



**Q** What are dental implants?

**A** A dental implant is a titanium metal rod which is placed into the jawbone. It is used to support one or more false teeth. In practice, both the false teeth and their supporting rod are known as 'implants'.

**Q** Are implants safe? How long will they last?

**A** Implants are a well-established, tried-and-tested treatment. 90 per cent of modern implants last for at least 15 years.

**Q** I have some of my own teeth. Can I still have implants?

**A** Yes. You can have any number of teeth replaced with implants – from one single tooth to a complete set.

**Q** Can implants always be used to replace missing teeth?

**A** It depends on the state of the bone in your jaw. Your dentist will arrange for a number of special tests to assess the amount of bone still there. If there is not enough, or if it isn't healthy enough, it may not be possible to place implants without grafting bone into the area first.

**Q** Do implants hurt?

**A** Placing the implants requires a small operation. This can be carried out under local anaesthetic within the dental surgery setting.

You will not feel any pain at the time, but you may feel some discomfort during the week following the surgery. This is usually due to having stitches in place, and the normal healing process.

**Q** Can I have the new teeth straight away?

**A** No. The implants need to bond (integrate) with the bone after they have been placed. This can take up to 3 months in the lower jaw and 6 months in the upper jaw. If you are having one, two or three teeth replaced, you will have a temporary restoration in the meantime. If you have complete dentures, then you can wear them throughout the healing period once they have been adjusted after the surgery.

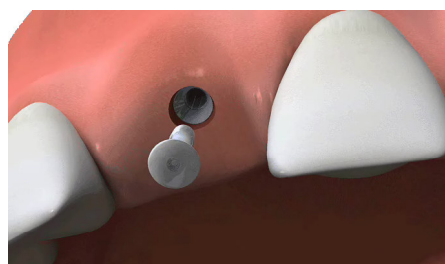
**Q** How long does treatment take?

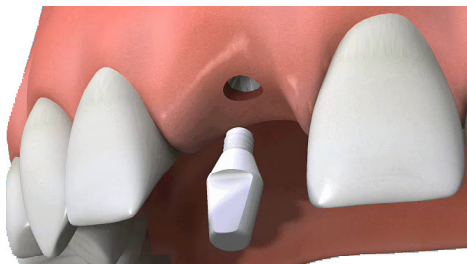
**A** It takes about 6-12 months from the initial assessment to the time when the artificial teeth or dentures are finally attached to the implants, depending on where the implants are placed.

A lot depends on how complicated your treatment is. Your dentist will be able to give you a timetable once the surgery has been done.

**Q** Are the teeth difficult to clean?

**A** Cleaning around the teeth attached to the implants is no more difficult than cleaning natural teeth. However, there may be areas that give you problems and you'll be shown methods to help.





**Q** If I had gum disease when I had my own teeth, will I get it with the teeth attached to the implants?

**A** Yes, if you don't care for them well enough. If you keep them clean, and don't smoke, then you should not have any problems.

**Q** Can I take the teeth out if they are fixed to implants?

**A** Most artificial teeth attached to implants can only be placed and removed by the dentist. However, if you have complete dentures fixed to the implants by bars, then you'll be able to take them out for cleaning.

**Q** Do the implants show?

**A** Your dentist will make sure that the implants won't show during all normal movements of the mouth and lips. You will need to be able to see them, so that you can clean them properly.

**Q** Do I have an implant for each missing tooth?

**A** No, unless you're only having a single tooth replaced. Normally, five or six implants are used to replace all the teeth in one jaw, as each implant can usually support two teeth. For a few missing teeth, two or three implants may be used.

**Q** What if I get hit in the face?

**A** Implants and the teeth they support can be damaged by an accident in the same way that natural teeth can. However, if the false teeth are damaged and the remnants are left in the bone then they may be more difficult to

remove than natural teeth would be. After healing, new false teeth can then be placed alongside the fragments.

**Q** What happens if the implant does not bond (integrate) with the bone?

**A** This happens very rarely. If the implant becomes loose during the healing period or just after, then it is easily removed and healing takes place in the normal way. Once the jaw has healed, another implant can be placed there. Or, the dentist can make a bridge, using the implanted false teeth that have 'taken'.

**Q** Is the treatment expensive?

**A** Unfortunately, yes. However, in many situations, the cost of the treatment is only a little more than the cost of more conventional treatment with crowns and bridges.

There are advantages to it, too. An implant to replace a single tooth avoids the need to cut down the teeth either side for crowns to support a bridge. Normal dentures often mean you can't eat or speak well, due to the dentures moving about. But teeth attached to an implant don't cause this problem.

**Q** Where do I get this treatment?

**A** Talk to your dentist, so you can be referred to a specialist for assessment and treatment. Your dentist may already carry out some or all of this type of treatment and will give you the advice you need.



# CROWNS

## Q What is a crown?

A Crowns are an ideal way to rebuild teeth which have been broken, or have been weakened by decay or a very large filling. The crown fits right over the remaining part of the tooth, making it strong and giving it the shape and contour of a natural tooth. Crowns are sometimes also known as 'caps'. An 'Anterior Crown' is a crown fitted to the front eight teeth.

## Q Why would I need a crown?

A There are a number of reasons. For instance:

- the tooth may have been weakened by having a very large filling
- you may have discoloured fillings and would like to improve the appearance of the tooth
- you may have had a root filling which will need a crown to protect it
- you may have had an accident and damaged the tooth
- it may help hold a bridge or denture firmly in place.

## Q What are crowns made of?

A Crowns are made of a variety of materials and new materials are being introduced all the time. Here are some of the options available at present:

- Porcelain bonded to precious metal: this is what most crowns are made from. A precious metal base is made and layers of porcelain are then applied over it.
- Porcelain: these crowns are not as strong as bonded crowns but they can look very natural and are most often used for front teeth.
- Porcelain and composite: porcelain and composite resin materials can sometimes look the most natural. However, these



crowns are not as strong as bonded metal crowns.

- Glass: these crowns look very natural and are used on both front and back teeth.
- Precious metal (gold and palladium): these crowns are very strong and hard-wearing, but are not usually used at the front of the mouth, where they are highly visible.

## Q How is a tooth prepared for a crown?

A The dentist will prepare the tooth to the ideal shape for the crown. This will mean removing most of the outer surface, and leaving a strong inner 'core'. The amount of the tooth removed will be the same as the thickness of the crown to be fitted. Once the tooth is shaped, the dentist will take an impression of the prepared tooth, one of the opposite jaw and possibly another to mark the way you bite together. The impressions will be given to the technician, along with any other information they need to make the crown.

## Q Who makes the crown?

A The impressions and information about the shade of your teeth will be given to a dental technician who will be skilled in making crowns. They will make models of your mouth and make the crown on these to be sure that the crown fits perfectly.



**Q Will the crown be noticeable?**

**A** No. The crown will be made to match your other teeth exactly. The shade of the neighbouring teeth will be recorded, to make sure that the colour looks natural and matches the surrounding teeth. A temporary crown, usually made in plastic, will be fitted at the end of the first appointment to last until the permanent one is ready. These temporary crowns may be more noticeable, but they are only in place for about two weeks.

**Q How long does the treatment take?**

**A** You will need to have at least two visits: the first for the preparation, impression, shade taking and fitting the temporary crown, and the second to fit the permanent crown.

**Q Does it hurt to have a tooth prepared for a crown?**

**A** No. A local anaesthetic is used and the preparation should feel no different from a filling. If the tooth does not have a nerve, and a post crown is being prepared, then local anaesthetic may not be needed.

**Q Are post crowns different?**

**A** Post crowns may be used when the tooth has been root filled. The weakened crown of the tooth is

drilled off at the level of the gum. The dentist makes a double-ended 'post' to fit into the root canal. This can be either prefabricated stainless steel or custom made of gold. One end of the post is cemented into the root canal, and the other end holds the crown firmly in place.

**Q Are there any alternatives to post crowns for root-filled teeth?**

**A** If a root-filled tooth is not completely broken down, it may be possible to build it up again using filling material. This 'core' is then prepared in the same way as a natural tooth and the impressions are taken.

**Q How long will a crown last?**

**A** The life of a crown will depend on how well it is looked after. The crown itself cannot decay, but decay can start where the edge of the crown joins the tooth. It is very important to keep this area as clean as your other teeth, or decay could endanger the crown. Properly cared for crowns will last for many years – your dentist will be able to tell you how long.

**Q**      **How are crowns fixed to teeth?**

**A**      Once the fit and appearance of the crown has been checked – and approved by you – it will be cemented in place with special dental cement. The cement also forms a seal to help hold it firmly in place.

**Q**      **Will the crown feel different?**

**A**      Because the shape of the crown will be slightly different from the shape of your tooth before it was crowned, you may be aware of it to begin with. Within a few days it should feel fine, and you will not notice it. The crown may need some adjustment if it feels higher than the surrounding teeth. If it is at all uncomfortable ask your dentist to check and adjust it.



**Q**      **Is there an alternative to a crown?**

**A**      A veneer may be an alternative to having an anterior crown. Your dentist will advise you of any suitable alternatives.

# WHITE FILLINGS

**Q** Why should I consider white fillings?

**A** Most people have fillings of one sort or another in their mouths. Nowadays fillings are not only functional, but can be natural looking as well. Many people don't want silver fillings that show when they laugh or smile because they are more conscious about the way they look.

**Q** Are they expensive?

**A** Costs can vary quite a lot from dentist to dentist. Costs usually depend on the size and type of white filling used and the time it takes to complete the treatment. Costs may also vary from region to region. As a guide, white fillings start from around £40 each, but your dentist will be able to give you an idea of the cost before you agree to treatment.

**Q** Are they as good as silver amalgam fillings?

**A** White fillings used to be considered less long lasting than silver amalgam fillings. But there are now new materials available with properties comparable to silver amalgam, and these are proving to be very successful. The life expectancy of a white filling can depend greatly on where it is in your mouth and how heavily your teeth come together when you bite. Your dentist can advise you on the life expectancy of your fillings.

**Q** Is it worth replacing my amalgam fillings with white ones?

**A** It is usually best to change fillings only when your dentist decides that an old filling needs replacing. If so you can ask to have it replaced in a tooth-coloured material. However old metal fillings can be replaced to improve cosmetics and your smile. Your dentist can assess how risky this

might be and advise you on what treatment to follow.

**Q** What are tooth-coloured fillings made of?

**A** This can vary, but they are mainly made of glass particles, synthetic resin and a setting ingredient. Your dentist should be able to give you more information about the particular material that they use.

**Q** Where can I get them done?

**A** Most dental practices offer white fillings as a normal part of the treatment they give you. However, white fillings are classed as a 'cosmetic' treatment, and you can therefore only have them if you pay for them.

**Q** Are there alternatives to fillings?

There are alternatives such as crowns and inlays although they can cost a lot more. Veneers can be used on front teeth instead of crowns or fillings. A discussion with your dentist will ensure the right treatment is undertaken.

# BRIDGES

**Q Why should I replace missing teeth?**

**A** Your appearance is one reason. Another is that the gap left by a missing tooth can mean greater strain on the teeth at either side. A gap can also mean your 'bite' is affected, because the teeth next to the space can lean into the gap and alter the way the upper and lower teeth bite together. This can then lead to food getting packed into the gap, which causes both decay and gum disease.

**Q How are missing teeth replaced?**

**A** This depends on the number of teeth missing and on where they are in the mouth. The condition of the other teeth also affects the decision.



There are two main two ways to replace the missing teeth. The first is with a removable false tooth or teeth – a partial denture. The second is with a fixed bridge. A bridge is usually used where there are fewer teeth to replace, or when the missing teeth are only on one side of the mouth, or if the idea of a removable denture is not appealing.

**Q Can I always have a bridge to replace missing teeth?**

**A** Yes, if you have enough strong teeth with good bone support. Your dentist will help you decide

the best way of replacing your missing teeth within your budget.

**Q What are bridges made of?**

**A** Bridges are usually made of a precious metal base. If the bridge will show, porcelain is then bonded to the base.

**Q Are bridges expensive?**

**A** Although a bridge may seem expensive it will last many years. It will also improve your appearance and bite. A bridge uses the considerable skill of the dentist and technician, and in this way, it's similar to ordering a piece of hand-made jewellery. The materials are also expensive so it's fair to say a bridge will not be the cheapest treatment you have ever had.

**Q How do I look after my bridge?**

**A** You need to clean your bridge every day, to prevent problems such as bad breath and gum disease. You also have to clean under the false tooth every day. Your dentist or hygienist will show you how to use a bridge needle or special floss, as a normal toothbrush cannot reach.

**Q Are there other methods for fixing false teeth?**

**A** There are other methods, such as using a combination of crowns and partial dentures that can keep the retaining clips out of sight.



These are quite specialised dentures, so you should ask your dentist about them. You can also have teeth implanted, ask your dentist for more information.

Remember that it's as important to care for your remaining teeth as it is to replace the missing ones.



**Q** **Are there different types of bridge?**

**A** Yes, there are different types of bridge which use different fixing methods. Your dentist will choose the most effective and conservative bridge for your personal situation.

# ROOT CANAL TREATMENT

**Q** What is root canal treatment?

**A** Root canal treatment (also called endodontics) is needed when the blood or nerve supply of the tooth (known as the pulp) is infected through decay or injury.

**Q** Why is root canal treatment needed?

**A** If the pulp becomes infected, the infection may spread through the root canal system of the tooth. This may eventually lead to an abscess.

If root canal treatment (RCT) is not carried out, the infection will spread and the tooth may need to be taken out.



**Q** Does it hurt?

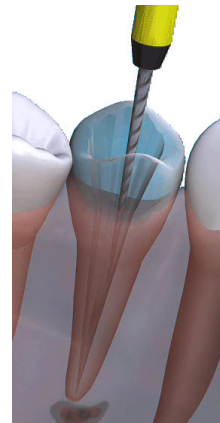
**A** No. A local anaesthetic is used and it should feel no different to having an ordinary filling done.

**Q** What does it involve?

**A** The aim of the treatment is to remove all infection from the root canal. The root is then cleaned and filled to prevent any further infection.

Root canal treatment is a skilled and time-consuming procedure. Most courses of treatment will involve two or more visits to your dentist.

At the first appointment, the infected pulp is removed. Any



abscesses, which may be present, can also be drained at this time. The root canal is then cleaned and shaped ready for the filling. A temporary filling is put in and the tooth

is left to settle.

The tooth is checked at a later visit and when all the infection has cleared, the tooth is permanently filled.

**Q** What will my tooth look like after treatment?

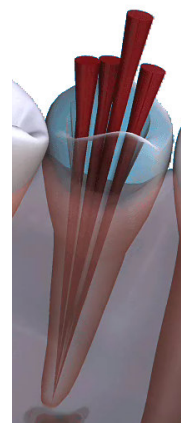
**A** In the past, a root filled tooth would often darken after treatment. However, with modern techniques this does not usually happen. If there is any discolouration, there are several treatments available to restore the natural appearance.

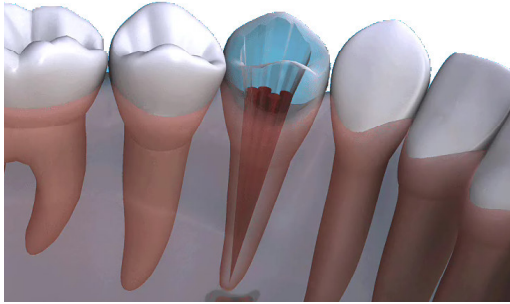
**Q** What if it happens again?

**A** Root canal treatment is usually very successful. However, if the infection comes back the treatment can be repeated.

**Q** Is it expensive?

**A** It can be due to the time it takes and the skill needed, and depending on which tooth needs treating. Generally, the back teeth have more nerves and are more difficult to treat thus they tend to be more expensive. Your dentist will be able to give you an estimate.





**Q** **What if I don't have the treatment?**

**A** The alternative is to have the tooth out. Once the pulp is destroyed, it can't heal and it is not recommended to leave an infected tooth in the mouth.

Although some people would prefer an extraction, it is usually best to keep as many natural teeth as possible.

**Q** **Will the tooth be safe after treatment?**

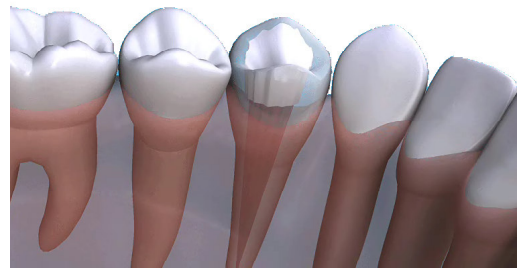
**A** Yes. However, it is better to restore the tooth with a crown to provide extra support and strength to the tooth.

**Q** **Where can this treatment be carried out?**

**A** Root canal treatment is a routine dental procedure, which your dentist will be happy to do for you. Very difficult cases, however, may need to be referred to a specialist.

**Q** **What about aftercare?**

**A** Root-treated teeth should be treated just the same as any other tooth. Remember to clean your teeth at least once a day, preferably with a fluoride toothpaste. Cut down on sugary snacks, and keep them only to mealtimes if possible. See your dentist for regular check-ups.



# GUM DISEASE

**Q** What is gum disease?

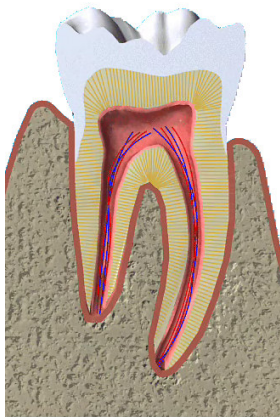
**A** Gum disease describes swelling, soreness or infection of the tissues supporting the teeth. There are two main forms of gum disease: gingivitis and periodontal disease.

**Q** What is gingivitis?

**A** Gingivitis means inflammation of the gums. This is when the gums around the teeth become very red and swollen. Often the swollen gums bleed when they are brushed during cleaning.

**Q** What is periodontal disease?

**A** Long-standing gingivitis can turn into periodontal disease. There are a number of types of periodontal disease and they all affect the tissues supporting the teeth. As the disease gets worse the bone anchoring the teeth in the jaw is lost, making the teeth loose. If this is not treated, the teeth may eventually fall out.

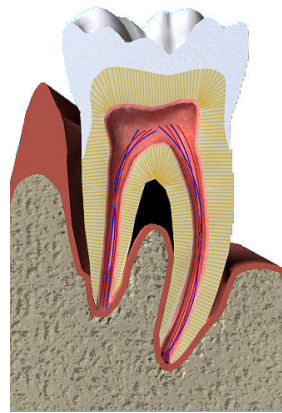


**Q** Am I likely to suffer from gum disease?

**A** Probably. Most people suffer from some form of gum disease, and it is the major cause of tooth loss in adults. However, the disease develops very slowly in most people, and it can be slowed down to a rate that should allow you to keep most of your teeth for life.

**Q** What is the cause of gum disease?

**A** All gum disease is caused by plaque. Plaque is a film of bacteria, which forms on the surface of the teeth and gums every day. Many of the bacteria in plaque are completely harmless, but



there are some that have been shown to be the main cause of gum disease. To prevent and treat gum disease, you need to make sure you remove all the plaque from your teeth every day. This is done by brushing and flossing.

**Q** What happens if gum disease is not treated?

**A** Unfortunately, gum disease progresses painlessly on the whole so that you do not notice the damage it is doing. However, the bacteria are sometimes more active and this makes your gums sore. This can lead to gum abscesses, and pus may ooze from around the teeth. Over a number of years, the bone supporting the teeth can be lost. If the disease is left untreated for a long time, treatment can become more difficult.

**Q** How do I know if I have gum disease?

**A** The first sign is blood on the toothbrush or in the rinsing water when you clean your teeth. Your gums may also bleed when you are eating, leaving a bad taste in your mouth. Your breath may also become unpleasant.

**Q** What do I do if I think I have gum disease?

**A** The first thing to do is visit your dentist for a thorough check-up of your teeth and gums. The dentist can measure the 'cuff' of gum around each tooth to see if there is any sign that periodontal disease has started. X-rays may also be needed to see the amount of bone that has been lost. This assessment is very important, so the correct treatment can be prescribed for you.

**Q** **What treatments are needed?**

**A** Your dentist will usually give your teeth a thorough clean. You'll also be shown how to remove plaque successfully yourself, cleaning all surfaces of your teeth thoroughly and effectively. This may take a number of sessions with the dentist or hygienist.

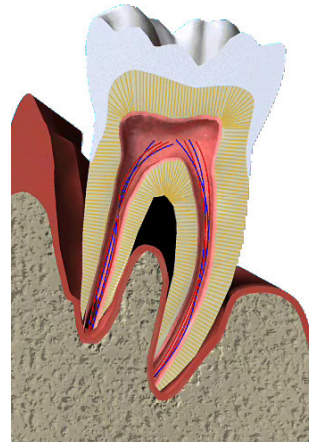
**Q** **What else may be needed?**

**A** Once your teeth are clean, your dentist may decide to carry out further cleaning of the roots of the teeth, to make sure that the last pockets of bacteria are removed.

You'll probably need the treatment area to be numbed before anything is done. Afterwards, you may feel some discomfort for up to 48 hours.

**Q** **Once I have had periodontal disease, can I get it again?**

**A** Periodontal disease is never cured. But as long as you keep up the home care you have been taught, any further loss of bone will be very slow and it may stop altogether. However, you must make sure you remove plaque every day, and go for regular check ups by the dentist and hygienist.



# CARING FOR MY TEETH AND GUMS

## **Q** Why are my teeth so important?

**A** Your teeth vary in shape and size depending on their position within your mouth. These differences allow the teeth to do many different jobs. Teeth help us to chew and digest food. They help us to talk, and to pronounce different sounds clearly. Finally, teeth help to give our face its shape. A healthy smile can be a great asset and because this is so important, it makes sense to give your teeth the best care possible.

## **Q** What can go wrong?

**A** Tooth decay can lead to fillings, crowns or inlays. If tooth decay is not treated, the nerve of the tooth can become infected and die, causing an abscess. This may then need root canal treatment.

Gum disease is the largest cause of tooth loss in adults. Gum disease is a treatable, preventable condition and can be kept under control with regular check-ups, preventing further problems. If teeth are lost, it may be necessary to fill the gaps with bridges, dentures or implants.

## **Q** How do I keep my teeth and gums healthy?

**A** It is easy to get your mouth clean and healthy, and keep it that way. A simple routine of brushing and cleaning between the teeth, good eating habits and regular dental check-ups can help prevent most dental problems.

Although most people brush regularly, many don't clean between their teeth and some people don't have dental check-ups. A few small changes in your daily routine can make a big difference in the long run.

Your dentist or dental hygienist can remove any build-up on your teeth and treat any gum disease that has already appeared. But daily dental care is up to you, and the main weapons are the toothbrush and interdental cleaning. (Cleaning between the teeth)

## **Q** What is plaque?

**A** Plaque is a thin, sticky film of bacteria that constantly forms on your teeth. The plaque reacts with food, turning sugar into acid, which then dissolves the enamel on your teeth.

## **Q** Why is brushing important?

**A** Daily brushing and cleaning between your teeth is important because it removes plaque. If the plaque isn't removed, it continues to build up, feeding on the food debris left behind and causing tooth decay and gum disease.

## **Q** How can plaque cause decay?

**A** When you eat foods containing sugars and starches, the bacteria in plaque produce acids, which attack tooth enamel. The stickiness of the plaque keeps these acids in contact with teeth. After this happens many times, the tooth enamel breaks down forming a hole or cavity.

## **Q** How can plaque cause gum disease?

**A** Plaque can harden into something called calculus another name for it is 'tartar'. As calculus forms near the gumline, the plaque underneath releases toxins causing the gums to become irritated and inflamed. The gums begin to pull away from the teeth and the gaps become infected. If gum disease is not treated promptly, the bone supporting the teeth is destroyed and healthy

teeth may be lost. Gum disease is the biggest cause of tooth loss in adults and can lead to dentures, bridges or implants.

**Q How can I prevent gum disease?**

**A** It is important to remove plaque and food debris from around your teeth, as this will stop your gums from swelling and becoming infected. If you leave plaque on your teeth it can develop into tartar, which can only be removed by the dentist or hygienist. It is important to keep up your regular appointments so that your teeth can have a thorough cleaning if they need it.

**Q How do I know if I have gum disease?**

**A** Gum disease (gingivitis) will show itself as red, swollen gums that bleed when brushed or flossed. Many people are alarmed when they notice this bleeding and will then brush more gently, if at all. It is important that you continue to clean regularly and firmly in order to fight the condition.

**Q Which type of toothbrush should I use?**

**A** Your dentist or dental hygienist will be able to recommend a toothbrush to you. However, adults should choose a small to medium size brush with soft to medium multi-tufted, round-ended nylon bristles or 'filaments'. The head should be small enough to get into all parts of the mouth: especially the back of the mouth where cleaning can be difficult. Children need to use smaller brushes but with the same type of filaments.

You can now get more specialised toothbrushes. For instance, people with sensitive teeth can now use softer bristled brushes. There are also smaller headed toothbrushes for those people with crooked or irregular teeth.

Some people find it difficult to hold a toothbrush, for example because they have Parkinson's disease or a physical disability. There are now toothbrushes, which have large handles and angled heads to make them easier to use.

**Q How often should I change my toothbrush?**

**A** Worn-out toothbrushes cannot clean your teeth properly and may damage your gums. It is important to change your toothbrush every two to three months or sooner if the filaments become worn. When bristles become splayed, they do not clean properly.

**Q How should I brush?**

**A** Brushing removes plaque and food particles from the inner, outer and biting surfaces of your teeth.

Here is one method of removing plaque:

- Place the head of your toothbrush against your teeth, and then tilt the bristle tips to a 45 degree angle against the gumline. Move the brush in small circular movements, several times, on all the surfaces of every tooth.
- Brush the outer surfaces of each tooth, upper and lower, keeping the bristles angled against the gumline.
- Use the same method on the inside surfaces of all your teeth.
- Brush the chewing surfaces of the teeth.
- To clean the inside surfaces of the front teeth, tilt the brush vertically and make several small circular strokes with the toe (the front part) of the brush.
- Brushing your tongue will help freshen your breath and will

clean your mouth by removing bacteria.

**Q** **How often should I brush my teeth?**

**A** Be sure to brush thoroughly with a fluoride toothpaste at least twice a day, more often if your dentist recommends it. If you keep getting discomfort or bleeding after brushing go to see your dentist about it.

**Q** **How should I clean between my teeth?**

**A** One way to clean between your teeth is with dental floss or tape. Flossing removes plaque and food particles from between your teeth and under the gumline, areas a toothbrush can't reach. Your dentist or hygienist can show you proper flossing techniques.

The following suggestions may help:

- Break off about 18 inches of floss, and wind most of it around one of your middle fingers. Wind the remaining floss around the same finger of the other hand. As you use the floss, you will take up the used section with this finger.
- Hold the floss tightly between your thumb and forefingers, with about an inch of floss between them, leaving no slack. Use a gentle 'rocking' motion to guide the floss between your teeth. Do not jerk the floss or snap the floss into the gums.
- When the floss reaches the gumline, curve it into a C-shape against one tooth until you feel resistance.
- Hold the floss against the tooth. Gently scrape the side of the tooth, moving the floss away from the gum. Repeat on the other side of the gap, along the side of the next tooth

- Don't forget the back of your last tooth.
- When flossing, keep to a regular pattern. Start at the top and work from left to right, then move to the bottom and again work from the left to right. This way you're less likely to miss any teeth.

It is also very important to clean around the edges of any crowns, bridges or implants. This can be difficult to do effectively using traditional floss and there are now specialist flosses to do the job thoroughly (such as super floss and specialist floss threaders). Ask your dentist or hygienist on how to use these properly and which method you should use.

**Q** **Should my gums bleed when I floss?**

**A** Your gums may bleed or be sore for the first five or six days that you floss. This should stop once the plaque is broken up and the bacteria has gone. If the bleeding does not stop, tell your dentist. It may be that you are not flossing correctly or your teeth and gums need a more thorough clean by your dentist or hygienist.

**Q** **What do I do if I have difficulty using floss?**

**A** If you have trouble using floss you can use a floss holder or an interdental cleaning aid. Interdental cleaning aids include woodsticks or small interdental brushes used to remove plaque from between the teeth. Your dentist or hygienist can explain how to use these properly.

**Q** **How do electric toothbrushes work?**

**A** An electric brush often has rotating or vibrating head, which provides a large amount of cleaning action with very little movement needed from the user.

**Q** **Do electric toothbrushes clean better?**

**A** Tests have proved that certain electric toothbrushes are better at removing plaque. They are particularly useful for people with limited movement, such as disabled or elderly people, who often find that using a normal toothbrush does not allow them to clean thoroughly.

Electric toothbrushes can also be better for children as they may be more inclined to brush regularly because of the novelty of using an electric toothbrush. Discuss the idea with your dentist or hygienist to find out if you would benefit from using an electric toothbrush.

**Q** **Are oral irrigators useful?**

**A** Oral irrigation devices use a stream of water to remove food particles from around the teeth. These devices can be particularly helpful for people wearing orthodontic appliances or fixed bridges.

**Q** **What sort of toothpaste should I use?**

**A** As well as regular family toothpastes, there are many specialist toothpastes. These include tartar control for people who are prone to tartar build-up, and ones for people with sensitive teeth. Total care toothpastes include ingredients to help fight gum disease, freshen breath and help reduce plaque build-up.

Whitening toothpastes are good at removing staining, but are not strong enough to change the natural shade of the teeth.

Children's toothpastes have about half the level of fluoride that adult toothpastes have. They still provide extra protection for the teeth, but as children have a tendency to 'eat' their toothpaste,

there is less risk of them taking in too much fluoride.

To have a clean and healthy mouth you need to use the correct dental care products. Ask your dentist or hygienist to tell you the options and give their recommendations.

**Q** **Should I use a fluoride toothpaste?**

**A** Yes. Fluoride helps to strengthen and protect teeth, which can reduce tooth decay in adults and children.

**Q** **How much toothpaste should I use?**

**A** You do not need to cover the head of your brush in toothpaste. A pea-sized amount is enough. Children should use a small scraping of toothpaste.

**Q** **Are accredited products better?**

**A** Look for products carrying the British Dental Health Foundation logo on the packet. These products have been clinically and scientifically proven to the satisfaction of a panel of experts. The claims made on the labels must be accurate in what they say and what they imply.

**Q** **Should I use a mouthwash?**

**A** Mouthwashes are mainly used to freshen breath. If you have to keep using a breath freshener to hide any bad breath, see your dentist. Bad breath can be a sign of poor general health as well as unhealthy teeth and gums.

A fluoride mouthwash can help prevent tooth decay. Your dentist may recommend an antibacterial mouthwash to help control plaque and reduce gingivitis (gum disease).

**Q Can watching my diet help?**

**A** Many people think that it is a high level of sugar in your diet that causes decay, but this is not so. It is how often you have sugar in your diet, not the amount that causes problems. It takes an average of 40 minutes for the mouth to cancel out the acid caused by eating and drinking sugar. It is therefore important to limit the number of attacks by keeping sugary foods and drinks to mealtimes.

**Q What do I do if I have dentures?**

**A** It is just as important to clean dentures as it is to clean your natural teeth. Food can become caught around the edges of dentures and clasps, and can rot if not cleaned thoroughly. Clean your dentures using a denture brush and plain soap. Always clean dentures over a bowl of water or folded towel to stop them breaking if you drop them.

**Q I have implants, do I have to do anything special?**

**A** Your dentist or oral surgeon will tell you how to care for your implants after surgery. It is very important to make sure you clean them regularly and thoroughly to prevent gum disease and possible infection.

**Q Why should I visit the dentist regularly?**

**A** Prevention is always better than cure. If you visit your dentist regularly, you will need less and your dentist will spot any problems earlier. It will also be easier to put these problems right.

The last word

Good dental health begins with you. By following this simple routine, you can keep your mouth clean and healthy:

- Brush your teeth twice a day using fluoride toothpaste.
- Have sugary drinks and snacks less often.
- Use a small to medium size toothbrush.
- Use a toothbrush with soft to medium multi-tufted, round-ended nylon bristles.
- Use a pea-sized amount of toothpaste.
- Use small circular movements to clean your teeth.
- Change your toothbrush regularly.
- Clean between your teeth using dental floss or wood sticks.
- Visit your dentist at least once a year.
- Look out for products with the British Dental Health Foundation logo.