Primary Dentition

1. Avoidable Risk Factors

According to an eight-year study from China, children with caries on their primary molars are about three times more likely to develop caries in their permanent teeth. In 1992 and in 2000, 362 children aged 3 to 5 years were monitored. In 1992, 85% of the children who had decayed primary molars showed at least one carious permanent tooth in 2000. For the children who had no decay in their primary teeth, 83% remained caries-free until at least age 12.

Can Milk Teeth Diagnose Asthma?

Preliminary analysis of umbilical cord samples seem to suggest a possible connection between a pre-birth infant's exposure to the minerals iron and selenium and a subsequent risk of wheezing. By studying the milk teeth of children with and without asthma—a marker of child health—researchers can check pre-birth exposure to the minerals.

A child's top two front teeth begin to develop in the womb, where tooth enamel absorbs trace elements and minerals. This permanent record of exposure is another clue suggesting that the nature of lung and immune development in utero can greatly influence whether or not wheezing and asthma will be a part of the child's future. The study is based at the University of Bristol.

Caries in Primary Dentition

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Aesthetic dentistry will soon have a major impact in Asia... An Interview with Michael J. Williams, GC Asia

How do you qualify the Asian Pacific market? How do you supply and demand for continuing education programs, meetings, and congresses?

There are a number of questions here. Continuing education is difficult enough in this region at present because the profession is generally unprepared to devote the time to attend a full-day course or meetings during a weekend. They are also reluctant to pay a reasonable fee to attend. This is in contrast to Australia/New Zealand, where it is common to spend around US $500 per day for a continuing education program for perhaps 20 specialists, or attend a more general program such as Aesthetic Dentistry, costing US $200 for the day, where up to 400-500 delegates will attend. The current level of continuing education courses and seminars and high quality speakers in Asia is directly related to economic viability. On the question of congresses, first of all there are many and they are too frequent. Second, there are few we would regard as being regional yet, let alone international. Third, we understand that each national dental association wants to have their own annual local meeting, but let’s be clear, that’s what they are, local national meetings. We are very happy to attend and work with the organizing committee who is prepared to have an open dialogue with the dental trade and be realistic about expectations and revenue to be made from such events.

Complexity of dentistry as a discipline requires more and more specialists to be identified as someone who is good at it. At the same time we are trying to develop products that will enable the dental team to make additional income, by actually doing something other than their regular post. Please note that manuscripts received by post will not be returned.

Are there any changes in the world of dentistry that you’d like to see occur?

Yes of course. We would like to see a vaccine that could guarantee to eliminate all dental disease. However even if it happened within the next 25 years – no one should be afraid that there would be less restorative work to perform. We have already seen how new fashions in dentistry can increase the numbers of patients visiting the dental office. Prevention is part of our philosophy, and painless diagnosis and prevention will ensure a bright future for all.

Where do you think dentistry will be in another 10 years?

Philosophers invariably get it wrong, so let me say this. Preventive dentistry will be one of the main income sources in developed countries. New mechanical tools will provide descriptive, diagnostic and therapeutic solutions that will be able to be reversed. The first periodontal vaccine will be available as quantum leap forward in controlling this disease.

Cosmetic dentistry, estodontics and orthodontics will grow more rapidly in these areas. The traditional dental chair and associated equipment will go through major design changes, making today’s state of the art set up as old fashioned as a model T Ford.

Thank you very much for taking the time to speak with us, Mr. Williams.
Drink White Tea for Better Oral Health

Researchers at the University of New Zealand have found that white tea, which is made from the leaves of the shrub *Camellia sinensis*, has anti-inflammatory properties that can help reduce inflammation in the mouth and gums. White tea contains antioxidants that can help prevent periodontal disease, a chronic bacterial infection that destroys the gums and can lead to tooth loss.

A study published in the *Journal of Periodontology* found that white tea was more effective than black tea in reducing inflammation in the mouth. The researchers concluded that white tea has the potential to be an effective natural alternative to prescription medications for the treatment of periodontal disease.

In addition to its anti-inflammatory effects, white tea has been shown to have other health benefits, such as improving heart health and reducing the risk of cancer. It is a popular beverage in many parts of the world and is known for its gentle flavor and low caffeine content compared to black tea.

When you drink white tea, the antioxidants in the leaves can help to neutralize free radicals in the mouth, which can damage the cells that line the gums. This helps to prevent the development of plaque and gingivitis, and may even help to reverse some of the damage that has already occurred.

For best results, it is recommended to drink white tea regularly as part of a healthy lifestyle. It is important to consult with a healthcare professional before making any significant changes to your diet or health regimen.


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Dental Tribune Asia Pacific Edition

page 1: Poor Oral Health in New Zealand

Dental Tribune International

Rory Wright

After water, tea is the second most frequently consumed beverage in the world. New insight into the potential benefits of tea is being generated by the fact that a cup of tea between meals can indeed prevent periodontal disease and other oral health issues.

All true teas come from the plant Camellia sinensis, and white tea is considered the most pure form. It contains the highest amount of a specific nutrient called polyphenol, which provides the plant with resistance to cold and disease. Polyphenols are known to be antioxidants, and they may prevent cancer and heart disease. White tea is the richest in antioxidants with three times the amount found in green tea.

In addition, polyphenols can prevent the growth of cavity-causing bacteria, reduce the amount of teeth that can be repaired, and lower the risk of periodontal disease. White tea contains antioxidants that can help to prevent the formation of plaque and reduce the risk of tooth decay. It is a popular beverage in many parts of the world and is known for its gentle flavor and low caffeine content compared to black tea.

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Dental Tribune Asia Pacific Edition

page 3: Gene Therapy Offers Hope for Gum Disease

Gene Therapy Offers Hope for Gum Disease

Researchers at the University of Michigan and the University of New Zealand have found that gene therapy can help restore the damaged tissue in periodontal disease—achronic bacterial infection that destroys the gums and can lead to tooth loss. This research, which was published in the *Proceedings of the National Academy of Sciences*, represents a new paradigm for treating oral health issues.

The main cause of periodontal disease is a hard substance called plaque, a sticky colorless film that constantly forms on the teeth. Toxins produced by bacteria in the plaque irritate the gums and stimulate a chronic inflammatory response in the tissue. This response can lead to the destruction of the bone that supports the teeth, resulting in tooth loss.

However, researchers have found that using gene therapy to deliver a gene that can help reduce the production of a specific enzyme can help to prevent the development of periodontal disease. This gene is called *IL1B*, and it is believed to be involved in the production of inflammatory cytokines that contribute to the development of gum disease.

A clinical trial is currently underway to test the effectiveness of this gene therapy approach in treating periodontal disease. The researchers are hopeful that this new approach will provide a non-invasive and effective treatment option for patients with severe gum disease.

In addition to the potential benefits of gene therapy for gum disease, researchers are also exploring the use of other gene therapies for treating oral health issues, such as cancer and heart disease. These approaches are still in the early stages of development, but they hold great promise for improving oral health outcomes in the future.

For more information or to request a copy of this study, contact the AAP Public Affairs Department at (312) 973-3243 or (312) 973-3242.


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Dental Tribune Asia Pacific Edition

page 4: Is It Time to Remove the Bad News About Black Tea?

Is It Time to Remove the Bad News About Black Tea?

Black tea is the most widely consumed tea in the world, with an estimated 2.2 billion cups consumed daily. However, like other teas, black tea contains some potentially harmful substances that can affect oral health.

For example, black tea contains tannins, which can interact with calcium and magnesium in the mouth, leading to tooth discoloration and weakening of the enamel. Black tea also contains caffeine, which can stimulate the production of acid in the mouth, leading to increased risk of tooth decay.

However, research has shown that these effects can be mitigated by drinking black tea in moderation and without added milk or sugar. In fact, some studies have found that black tea can have positive effects on oral health, such as reducing the risk of gum disease and improving the healing of gum tissue.

Recent studies have also shown that black tea can help to reduce inflammation in the mouth, which is a key factor in the development of periodontal disease. This makes black tea a promising beverage for individuals who are at risk for gum disease.

Overall, while black tea does have some potential drawbacks for oral health, the benefits it offers may make it a valuable addition to a healthy diet. It is important to be aware of the potential risks associated with black tea consumption and to consume it in moderation as part of a balanced lifestyle.

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Dental Tribune Asia Pacific Edition

page 5: What’s in a Name? The Story of Black Tea

What’s in a Name? The Story of Black Tea

Black tea is one of the most popular teas in the world, with an estimated 2.2 billion cups consumed daily. However, few people are aware of the intriguing story behind the name “black tea.”

Legend has it that the term “black tea” was first used in the 1500s by the British as a way to describe tea that was left out in the sun for too long. The sun would cause the tea to darken in color, which is why it is called “black tea.”

However, some historians believe that the term “black tea” actually refers to the fact that the leaves are completely sun-dried and have no green color at all. This is because most of the green color in tea leaves is due to the presence of chlorophyll, which is destroyed during the drying process.

Regardless of the origin of the term “black tea,” it has become an important part of tea lore and is a symbol of tradition and culture in many parts of the world. Today, black tea remains a beloved beverage and continues to be enjoyed by millions of people around the globe.

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Dental Tribune Asia Pacific Edition

page 6: The Future of Oral Health: Challenges and Opportunities

The Future of Oral Health: Challenges and Opportunities

The oral health of individuals has a significant impact on their overall health and well-being. From a young age, children are taught to brush and floss their teeth, and adults are encouraged to maintain good oral hygiene practices to prevent diseases and infections.

However, despite these efforts, many people still suffer from oral health issues, such as cavities, gum disease, and tooth loss. In addition, oral health issues can have a significant impact on the quality of life for individuals and can contribute to a variety of other health problems.

To address these challenges, researchers are exploring new approaches to improve oral health outcomes. These approaches include gene therapy, oral health education, and the use of advanced technologies such as 3D printing.

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Dental Tribune Asia Pacific Edition

page 7: Oral Health and Nutritional Status

Oral Health and Nutritional Status

The relationship between oral health and nutritional status is well documented. Malnutrition and poor nutrition can both contribute to oral health problems and can also be affected by oral health issues.

Malnutrition can lead to a variety of oral health problems, including gum disease, tooth decay, and poor wound healing. In addition, poor nutrition can make it more difficult for individuals to maintain good oral hygiene practices, which can further contribute to oral health problems.

On the other hand, oral health issues can also have a significant impact on nutritional status. For example, gum disease can lead to malabsorption of nutrients, making it more difficult for individuals to get the nutrients they need from their diet.

To address these challenges, researchers are exploring new approaches to improve oral health outcomes and nutritional status. These approaches include oral health education, the use of advanced technologies such as 3D printing, and the development of new oral health products such as mouthwashes and toothpastes.

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