Know pain and gain results: hypersensitivity and anxiety

By Anastasia L. Turcetta, RDH

Identifying whether or not your patient’s tooth is truly hypersensitive vs. a session of dental anxiety may have been an illusive task a few years ago.

The truth is dentin hypersensitivity affects 40 million people in the United States annually. As for dental anxiety, approximately 50 percent of the population has a dental phobia. Interestingly, 85 percent of anxiety is from past experiences with a dental professional.

Fortunately, we have the products to treat either “pain.” This article will review the causes of gingival recession, symptoms of dental anxiety and products to consider for our patients’ comfort.

Hypersensitivity
Hypersensitivity occurs when fluids within the tubule are disturbed by certain stimuli: thermal, evaporative, occlusal, and osmotic. The most common clinical cause for exposed dentinal tubules is gingival recession.

All too often, documentation of gingival recession is missed during either periodontal charting or a comprehensive exam.

In addition, some of your patients may be misled by associating dental hypersensitivity with their whitening sensitivity. Whitening sensitivity will depend on length of exposure, how the tray fits and the concentration of the material used.

Although some patients may not know this information, your established patients will have the documentation in their chart.

The causes for gingival recession include:
- Brushing abrasion
- Prominent roots
- Inadequately attached gingiva
- Oral habits
- Crown preparation
- Pocket reduction/periodontal therapy
- Cervical decay

Many times, hypersensitivity may be in conjunction with the following:
- Cracked tooth
- Xerostomia
- Erosion
- Decay
- Sinusitis
- Recent dental treatment
- Nutritional choices

Choosing the product
Once hypersensitivity has been diagnosed, product selection is the next task. Two types of treatment options are to desensitize the nerve inhibiting the stimuli’s effect or occlude or block dentinal tubules.

Selecting a product will depend upon your patients’ habits, whether they are willing to change them, their current oral health and understanding of product use.

Those whose hypersensitivity is minimal may best benefit from OTC toothpaste containing 5 percent potassium nitrate. Potassium nitrate will not excite the nerves, thus lessening the sensation to stimuli. Some brands to seek out are Sensodyne by

Tips for great oral health in 2011

Many people ring in a new year by making health-related resolutions to improve their lives, but how many of those lifestyle changes are kept past January?

The Academy of General Dentistry (AGD) has compiled some easy-to-keep oral health tips that consumers can work into their everyday routines and continue to perform throughout the year.

“Oral health means more than just an attractive smile,” says AGD spokesperson Raymond Martin, DDS, MAGD.

“Poor oral health and untreated oral diseases and conditions can have a significant impact on quality of life. And, in many cases, the condition of the mouth mirrors the condition of the body as a whole.”

Oral Health Tips
- Floss every day. It’s the single most important factor in preventing gum disease, which affects more than 50 percent of adults. Spend two to three minutes flossing at least once a day. Not flossing because it irritates your gums? The more often you floss, the tougher your gums will become.
- Brush your teeth for at least two to three minutes twice daily. If you’re not sure whether you’re brushing long enough, simply brush for the length of an entire song on the radio.
- Change your toothbrush or toothbrush head (if you’re using an electric toothbrush) before the bristles become splayed and frayed, or every three to four months. Not only are old toothbrushes ineffective, they may harbor harmful bacteria that can cause infections, such as gingivitis and gum disease.
- Drink sugary beverages through a straw. This will minimize the amount of time that the sugars are in contact with your teeth, which can minimize the risk of developing cavities.
- Replace carbonated beverages, which cause enamel erosion and cavities, with water, milk, tea, or coffee.
- Chew sugarless gum that contains xylitol after meals and snacks. This will help cleanse your mouth and prevent the bacteria associated with cavities from attaching to your teeth. Even better, gum will increase your saliva production and reduce bad breath!
- Wait one hour to brush your teeth after consuming highly acidic food or drinks, such as wine, coffee, citrus fruits, and soft drinks. Otherwise, you run the risk of wearing away the enamel on your teeth.

A final word
“One last reminder to patients is that they should make an appointment to see their general dentist every six months,” adds Martin.

“More than 90 percent of all systemic diseases have oral manifestations, meaning that your dentist could be the first health care provider to diagnose a health problem.”

More information for the public is available at www.knowyourteeth.com.

(Photo/Chronis Chamaliidis,dreamstime.com)
Giving motivated

Patient after patient, hour after hour, day after day hygienists can be heard delivering oral hygiene instruction (OHI) to their patients. This task has the ability to become mundane. So mundane that other team members can repeat this conversation verbatim.

Hygienists go into autopilot during this time allowed for OHI. This portion of the visit can become so boring for the hygienist that many even skip this important step.

The psychological world has devoted much time and energy attempting to understand how people learn. Hygienists are educated during their formal education years about several learning styles, but typically, this education is not transferred into the clinical arena.

Understanding how each patient is motivated is necessary in order to make a change. There is the idea of avoidance and approach to motivation. If a patient prefers one of these over the other will assist in an effective delivery of OHI.

Avoidance motivates a person who likes to choose to do one thing to avoid another. In this situation, maybe a patient would avoid sugar in order to avoid decay. The approach method differs in that the person would actually do something to reach the desired goal.

For instance, an approach motivated patient would probably engage in brushing more often in order to remove sugars from his or her teeth, realizing this behavior will reduce the incidence of decay.

Another theory centers around goals and rewards. The reward theory states people repeat behaviors that make them feel good (positive reinforcement). As the theory is thought to create tension and people work hard to reduce the tension.

In the dental office, patients who are motivated by rewards perform a task in order to feel good and receive positive reinforcement from the hygienist.

A goal-motivated patient would do well if the hygienist developed an actual program in which a patient needed to accomplish the task every day for a designated amount of time. Actually putting this program into action and reaching the goal would motivate this type of person.

Yet another theory centers around the patients’ needs. This theory states that people can be categorized into one of seven areas based upon which needs are currently being met.

At the bottom of the pyramid are physiological and safety needs. People who are not having these needs met will not be able to engage in behaviors that do not address these needs.

Spend time exploring, understanding and applying motivational theories certainly will assist the dental hygienist to understand how to motivate patients to improve oral health. Similarly, talking with patients and determining what motivates them will cure the boring nature of OHI.

Best Regards,

Angie Stone, RDH, BS

About the author

Anastasia L. Turchetta, RDH, has written for several dental industry publications and is a recognized source for oral health information for numerous online consumer-based websites. Her weekly video blog on YouTube, Anastasia’s Hump Day Happenings, answers questions from the general public on oral health topics.

Turchetta also spends time as an independent consultant working with several companies to develop website content, continuing education programs and in-office training for dental hygiene departments. Her memberships include the American Dental Hygienist Association and the National Speakers Association.

You may visit her online at www.anastasiadrd.com.

GlaxoSmithKline, Colgate Sensitive by Colgate-Palmolive and Crest Sensitivity by Procter & Gamble.

Professional treatment selections range from toothpaste, liquid, light cured to paint on products such as, professionally dispensed products; custom trays for take home use of the previously mentioned products; Oraqix, lidocaine/prilocaine, is a reverse soft-tissue anesthetic, your patient will have feel good (positive reinforcement) that she did it.

Dental anxiety treatment options

When selecting a topical anesthetic, know the onset and duration. This information will be imperative for your patient’s comfort before the appointment. Topical anesthetics that contain 20 percent benzocaine will have an onset in 30 seconds and duration of 3 to 15 minutes. Oraqix, lidocaine/prilocaine, is a thermal setting agent where fluid becomes a gel at body temperature. It is easy to apply, onset occurs within 30 seconds and it lasts 20 to 50 minutes.

If you are providing periodontal therapy and your patients require local anesthetic, you may offer OraVerse. A reverse soft-tissue anesthetic, your patient will have feeling return in 50 to 90 minutes vs. residual numbness of 3 to 5 hours.

Finally, oral conscious sedation may be considered for patients who have dental anxiety no matter what treatment they are visiting your office for. Once ingested, onset is 30 minutes and lasts 1.7 to 5 hours.

Conclusion

Whether your patient is experiencing restlessness; choking; gagging; anticipating a certain smell, taste or feeling. Underlying conditions of anxiety are depression, stress, heart disease, cancer, medications, dementia and substance/physical/emotional abuse.

As you already know, medications and health ailments contribute to xerostomia. When treating anxiety coupled with dentin hypersensitivity, product selections may be narrowed.

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More professionals choose Patient’s Choice preventives from Crosstex

Crosstex protects patients’ oral health with innovative products that deliver a better treatment experience

Crosstex International, a subsidiary of Cantel Medical Corp. (NYSE: CMN) and a leading global provider of infection control and preventive products, announces that its innovative Patient’s Choice® line of preventives has become among the fastest-growing brands in a highly competitive marketplace.

In bringing the line to market, the company devoted significant resources to developing products that would lead their category in quality and performance, according to Crosstex Vice President of Sales and Marketing Andrew Whitehead.

“Crosstex is best known for innovative infection control products that help protect health-care professionals,” he said. “When we decided to enter the preventives arena, we were committed to apply the same level of research and innovation to products that protect patients’ oral health.”

The Patient’s Choice preventives line for Crosstex includes the following:

Twist® and Sparkle® prophylactic angles & Sparkle EZ contra angle

These unique products address widespread issues with traditional prophylactic angles: vibration, noise, spatter, frictional heat and operator ergonomics. Twist is the first and only disposable 90-degree reciprocating prophylactic angle. Its unique, patented oscillating motion eliminates spatter and heat.

Sparkle, developed with feedback from hygienists, has a patented second-generation gear design that runs vibration free and noise free.

Sparkle EZ delivers all the benefits of Sparkle along with an advanced ergonomically designed contra angle that reduces operator hand fatigue and micro-traumas.

Sparkle V® 5% Sodium Fluoride Varnish with Xylitol

Recently awarded 4 Stars from The Dental Advisor, both Sparkle prophylaxis pastes offer a variety of patient-pleasing fun flavors in a choice of grits and an advanced spatter-free formula. Sparkle™ prophylaxis paste contains 1.25 percent fluoride ion and is gluten free.

It has a time-set formula for superior consistency and offers maximum stain removal with minimal enamel loss. Sparkle FREE is 100 percent free of dyes, fluoride and gluten and it is the ideal prophylaxis paste with xylitol for patients who wish to avoid food dyes.

Zap® Fluoride Gel, Zap Neutral pH Fluoride Gel and Zap Dual Arch Fluoride Trays

Patient’s Choice high-quality fluoride gels and convenient trays facilitate the treatment process and provide greater patient acceptance. Zap fluoride gel contains 1.23 percent APF fluoride ion.

Its gluten-free formula contains xylitol and has long-lasting flavor for greater patient acceptance. Smooth, creamy thixotropic formula flows easily under pressure for greater coverage. Fast, one-minute treatment.

Zap 2 percent neutral pH fluoride gel provides an ideal non-acidic balance and is safe for patients with porcelain or resin cosmetic restorations. Zap dual arch trays make application of fluoride gel and foam an easier experience. They have a soft, anatomical design for a comfortable fit, with buckle ridges to improve fluoride access to teeth.

A unique “space-saver” package provides easy storing and dispensing.

GumNumb® Topical Anesthetic Gel

GumNumb topical gel contains 20 percent benzocaine for effective relief of discomfort from local anesthetic injections, periodontal curetage, impression taking and intraoral radiographs. All six patient-pleasing flavors provide rapid onset within just 30 seconds.

For information on the full line of Crosstex infection control and preventive products, please contact Crosstex at (631) 582-6777 or visit www.crosstex.com.

Determine which professionally dispensed products to supply your patient for the daily home care regimen. Address habits such as lifestyle, nutrition, occlusion or home care for oral health that the patient may be willing to change.

Eliminate what isn’t working and document it for obtaining future comfort. Our goal is to accurately diagnose dentin hypersensitivity, which may co-exist with anxiety.

What may have seemed a daunting task a few years ago, holds much promise in gaining comfort for many patients today and in the future.

www.dental-tribune.com

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