

The statistics are alarming. The Oral Cancer Foundation recently reported:

- 30,000 Americans will be diagnosed with mouth cancer this year.
- Of these 30,000, only 15,000 will be alive 5 years from now.
- One American dies every hour of every day from oral cancer.
- The death rate for mouth cancer is greater than that for cervical and certain kidney, brain and testicular cancers.
- Mouth cancer has a higher death rate than malignant melanoma.

Many of those that are successfully cured of mouth cancer will be severely disfigured by the aggressive surgeries necessary when the cancer is not diagnosed early. This is why we take this threat to our patients very seriously and encourage everyone to see us regularly...even if you have only a few teeth or no teeth all!

Fortunately, oral cancer is one cancer that is largely PREVENTABLE. Most cases of mouth cancer can be associated with either tobacco use or excessive alcohol use or a combination of both (the effects are much more than additive).

**BEST WISHES FOR A
HAPPY AND HEALTHY 2007!
SINCERELY, ALL OF US AT KENNEDY DENTAL GROUP**

For more information on the articles in this newsletter, please refer to the following resources and websites:

- [Journal of Clinical Periodontology](http://www.journalofclinicalperiodontology.com), Vol. 7 #6
- [Journal of Dental Education](http://www.journalofdentaleducation.com), Vol. 65 #10
- www.kennedydentalgroup.com, www.ada.org
- www.carecredit.com
- www.oralcancerfoundation.org

Here are some things you can do to help prevent oral cancer:

- Do not use any type of tobacco.
- Use alcohol only in moderation, if at all.
- Contact our office if you notice a red or white patch in your mouth or notice a sore that does not heal in several weeks.
- Contact our office if you notice a lump in your mouth, cheek, tongue, lips, palate or throat area.
- Contact us if you notice a sharp tooth or restoration that irritates your tongue, lips or cheeks. (Chronic mouth sores are a risk factor.)
- Do not chew your cheeks.
- Keep your teeth well restored and clean.
- Visit us (and your medical doctor's office) regularly, even and especially if you wear dentures, partials or use tobacco. (Exams are quick and painless!)
- Pass this information on to your loved ones and friends.

We want all of our patients to have beautiful, healthy smiles: but more importantly, we want all of you to live long, healthy and happy lives.



A few words from our front desk...

Offered services and treatments

Our doctors, Dr. Kennedy and Dr. Wagner: Both of our doctors are pleased to be able to offer a wide variety of treatments (including restorative, prosthodontic and cosmetic procedures), and they have special interests as well.

Dr. Kennedy has obtained additional training and education in occlusion and disorders involving the temporomandibular joint (commonly called "TMJ"), while Dr. Wagner has extensive experience providing cosmetic procedures including veneers, bonding and whitening.

Our hygienists, Crystal and Amy:



Debbie Benjamin
Front Desk Manager



Kim Bambach
Front Desk Assistant

- Prophylactic cleanings (a.k.a. preventative maintenance)
- Fluoride treatments; both trays and varnish (recommended for all ages of patients, not just for children!)
- Sealants • Oral hygiene technique instruction and education
- *Periodontal maintenance (for periodontal patients)
- Scaling and root planing
- Site specific antimicrobials

*Crystal and Amy both have many hours of continuing education and training and take great pride in being able to help diagnose and treat early periodontal disease.

Our dental assistants, Danielle and Stephanie: They assist our doctors chairside and behind the scenes to help assure a comfortable and efficient dental visit. They also provide digital x-ray and photographic services along with dental sealant and other preventative dental services.

Our network of specialists: And when your treatment needs require it, we are proud to work with some of the best dental specialists and laboratory technicians available anywhere!

Please visit our website at www.kennedydentalgroup.com for a complete list of our services and treatment options.

Questions to ask your dental benefits provider

Many patients either do not know or understand that dental benefits work very differently than medical/health insurance. While many dental and medical offices no longer offer this service, we are happy to submit your dental benefits claims for you. However, we do not always know all of the specifics of your particular policy/plan (since plans offered by the same employer or written by the same third party payer or benefits provider can vary according to the contracts involved). Here are some important things you should know about your

policy or should ask your dental benefits provider:

- Do I have a waiting period for certain services?
- What is my deductible?
- When does my calendar year begin?
- What is my yearly maximum benefit?
- Does my policy have a preexisting condition clause or missing tooth clause?

We are happy to assist you with your benefits questions, but if you have additional questions regarding your dental plan or a problem with a reimbursement level, please contact your employer (Human Resource department) or insurance company directly.

(silver vs. white fillings cont'd)

Advantages of composite fillings include:

- They are tooth colored, therefore less noticeable.
- They bond to tooth structure to reinforce weakened teeth.
- They allow for more conservative preparation of the teeth than silver materials.
- They may prevent the need for full crowns, which are significantly more costly.

Silver amalgam has been in use for over one hundred years. Although seldom a preferred material today, it is far from obsolete. In spite of consumer's intuitive reluctance to accept this mercury containing material, the National Institutes of Health, the Center for Disease Control and Prevention, and the Food and Drug Administration, (not to mention the American Dental Association and the UNC School of Dentistry) endorse its use as a safe material. As recently as April 2006, the Journal of the American Medical Administration published research concluding that there are no adverse effects on children from the use of dental amalgam.

But, there certainly are disadvantages of using silver amalgam fillings, which include:

Oral Cancer: It's Deadlier and More Common Than You Think!

When you have been examined at our office, you might have noticed that not only do we inspect the teeth and gums, but we will also palpate your neck and thyroid area and examine your tongue, cheeks, lips, palate, floor of the mouth and throat areas as well. This is because there are several serious non-dental

- They are unesthetic.
- They require more aggressive tooth preparation.
- They do not reinforce weakened teeth.
- They release small amounts of mercury vapors during placement and removal. (We use high suction and copious water irrigation when working on a tooth containing old silver filling in order to minimize these airborne components.)
- Their placement and removal can contribute to environmental pollution. (Our practice uses amalgam separators and filters that exceed state and national requirements and recycle recovered amalgam to minimize this impact on our community.)

We will not recommend replacing old silver fillings in the absence of a dental or cosmetic need. And there are even instances in which the conditions of the tooth or gums may still predicate the preferred use of silver amalgam. Silver amalgam will never be used by our office to appease an insurance company's preference for a cheaper treatment and it will never be removed to produce a profit for us! We are concerned for your health and will always recommend the best treatment for your dental needs.

diseases that can manifest their earliest signs and symptoms around the head and neck or in the mouth.

We also screen for one of today's most under recognized health risks: ORAL CANCER. **When diagnosed in its earliest stages, oral cancer is 80-90% curable.**

A few words from our Office Administrator...



Asa Goldenberg
Office Administrator

We want you to be comfortable

We want you to be as relaxed and comfortable as possible during and after your dental visits with us, which is why it is our pleasure to offer you the following:

- Soft, soothing music in the treatment rooms.
- CD players with headphones and a selection of CD's to choose from (or you can bring your own from home).

You may have noticed that we do not advertise. We believe the best advertisement is a satisfied patient. Thank you so much for your continued referrals! The trust and faith you have continued to show in us is taken very seriously and is greatly appreciated. Your referrals keep us growing. Thank you!

- Protective eyewear.
- Pillows and blankets.
- Warm towelettes.
- Juice and snack after longer procedures.
- Prize/toy for children from our Treasure Chest.

If there is anything else we can offer to make your visits more pleasurable, please let us know.

A few words from our Dentists... Who Are the "Cosmetic" Dentists?



Jeffery R. Kennedy, DDS Richard W. Wagner, DMD

Today, some dentists sell "smile makeovers" or say they "specialize in smiles". There is no specialty in Cosmetic Dentistry, but the science of dental materials has certainly come a long way in providing our profession with some amazing cosmetic possibilities.

We offer the most advanced and esthetic options available for changing or enhancing your smile, and what's more, we love to do it! Our practice philosophy, however, always puts the health and function of your mouth first. We don't "sell smiles".

From teeth whitening to crowns and veneers to soft tissue plastic surgery procedures or tooth movement, we can discuss your cosmetic options with you in the context of your overall health. If you are interested in cosmetic dental work, don't be shy. We will gladly make an appointment to explore the possibilities with you.

What is "TMJ?" Do I Have It?

"TMJ" is a term commonly used to refer to a variety of disorders that involve the temporomandibular joint. Our masticatory system is responsible for effective chewing, speech and esthetics. The joint (the TMJ), along with the teeth and the muscles of the face, head and neck, is a critical component in a comfortable, functional and stable masticatory system. Imbalance in this system may result in damage to the teeth or joints.

Treatment in early stages can be very conservative and may prevent significant pain or expense later. Imbalances in the masticatory system are common and most can be treated.

Signs or symptoms of "TMJ" include:

- Tooth wear.
- Tooth fractures or cracks.
- Gum recession.
- A loose tooth or teeth.
- Joint or jaw pain (especially at night or upon waking).
- Clicking or locking of the joint.
- Muscle tenderness.
- Muscle tension headaches.

We seek out continuing education in this critical area of oral health care every year and are proud to offer occlusion services.

Silver vs. White Fillings: Why We Use What We Use

Since you were a child, you've probably noticed some dramatic changes in your dentist's office, not the least of which are the materials available to treat your teeth. Some amazing

chemistry has lead to the space-aged tooth colored composites that have become the materials of choice for most fillings today.

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I know I need to have this dental work done, but how can I afford it?

Here is some important information that you should know about your payment options.

- We will submit claims to your dental insurance or benefits provider for you.
- We offer no and low interest payment plans.

Life is complicated enough without dealing with insurance claims. While many offices in our area no longer accept dental insurance or submit insurance claims, we still do! It is our pleasure to file your insurance claims electronically the same day services are rendered, so it's easier and faster to get a response or payment from the insurance company on your behalf. At the time of service, we collect only your portion that we estimate your insurance provider will not cover. If there is a balance left over after the insurance company has responded or made their payment, we will send you a statement. We are happy to accept payment by check, cash, money order, Visa, MasterCard, Discover, or CareCredit.

Many of you have already taken advantage of our no and low interest payment plan options. CareCredit, with its revolving line of credit, is the leader in patient financing. CareCredit is a convenient, low minimum monthly payment program designed specifically to pay for healthcare treatment not covered by insurance. There are 2 types of plans; no interest payment plans (3, 6, 12 month) and low 11.9% interest payment plans (24, 36, 48 month). With over 45,000 participating healthcare practices nationwide and no annual fee, these payment plans can be used repeatedly for yourself, your entire family and even your pets with no need to reapply. You can apply online at www.carecredit.com or on the phone at 1-800-365-8295 to get immediate approval. If you have questions or would like more information, we will be happy to send you a brochure or you can call CareCredit directly at 1-866-893-7864; or visit their website as listed above.

Important friendly reminders

- In the case of a dental emergency after hours, we ALWAYS have someone on call 24/7. Please call our office pager at: (919) 968-2658
- If you have been told that you need treatments, your new dental benefits likely began again in January.

We are already reserving appointments into next month, so call us now to reserve yours!

• As always, if you have a comment or suggestion on how we can improve our office, please let us know. Our main goal is your care, comfort and satisfaction!

A few words from our Hygienists...



Crystalyn Roberts
Registered Dental Hygienist



Amy Neese
Registered Dental Hygienist

(your world is high tech cont'd)

- **Magnification:** All of our restorative procedures are done under magnification.
- **Continuing Education/Training:** Our dentists and staff attend hours of

ongoing dental education in order to offer the best of “what’s new” while avoiding the unproven fads so prevalent today.

As always, your best dental health, comfort and appearance are our goals.

Why see the hygienist more than twice a year?

Patients with healthy gum tissue may only require prophylactic dental visits (also known as preventative maintenance or cleaning appointments) every six months to maintain good oral health. Healthy gums are free of redness and swelling and will not bleed upon stimulation. Our exams include a periodontal screening (for your gums) at each six-month visit to make sure you remain healthy.

You may have been diagnosed with gingivitis or periodontal disease. Both of these conditions have far reaching implications for your general health. (Please see our article “Gum Disease Can Harm More Than Your Smile”.) Gingivitis can usually be eliminated. But periodontal disease is incurable! Fortunately, though, it can usually be controlled and your health maintained.

If you have been treated for one of these conditions (or have declined treatment), you may be put on a regular schedule of periodontal maintenance visits with one of our hygienists. Studies have shown that periodontal patients on a regular maintenance program suffer less attachment loss of the gums, have decreased pocket probing depths and suffer less tooth loss than those undergoing regular “cleanings” every six months.

Typically, periodontal maintenance is performed every three to four months. It may “feel” similar to preventative maintenance, however, periodontal maintenance includes removal of bacterial toxins, plaque and hard deposits *under the edge of the gums* that are not removed by regular cleanings. Your maintenance interval is critically timed to disrupt the bacteria you can’t reach in pockets or areas of gum or bone loss before it can do more harm. Localized treatments may include the painless application of anti-microbial agents in active sites. Along with your home care efforts, including the use of a rechargeable electric toothbrush and regular daily flossing and the talents of some excellent local periodontal specialists, we are striving to keep your mouth and body in top shape.

Fluoride: Dentistry’s “Magic Bullet”

Fluoride has been dentistry’s “magic bullet” for the past fifty years. **When used appropriately, no other drug in history has had a more positive**

impact on the world’s dental health than fluoride. Its safety and effectiveness are emphasized by

(cont’d on next page)

Know the lingo!

Sometimes, teeth will become damaged or diseased and require restoration to be retained. **We try to treat your teeth in the most cost effective and conservative ways to achieve your return to good health and function.** Usually, that means placing direct fillings. Crowns or bridges are common ways of restoring cracked, decayed or missing teeth when direct fillings cannot be used.

- **Crowns and onlays:** Crowns (sometimes called caps) are made to fit single teeth. They can be gold, porcelain fused to precious metal (called PFMs) or all ceramic. Crowns cover teeth and are designed to restore them to comfortable contours to the adjacent teeth, tongue and bite. Onlays are similar to crowns but are more conservative to the tooth. Onlays can be made of gold or, in some cases, can be all ceramic.
- **Bridges :** Bridges are restorations that are often used when one or more teeth are missing. A bridge consists of a replacement tooth (or teeth) attached to crowns on the adjacent teeth. Like a crown, a bridge is made to fit anatomically over the prepared teeth for natural function, feeling and looks.

“Crown and bridge” work is usually a two-step procedure in which the final restoration is constructed outside the mouth on models and detailed and cemented in the mouth at a second visit. An acrylic provisional restoration or “temporary” is worn between visits.

- **Foundations:** Sometimes a foundation or core buildup is needed to replace lost or damaged tooth structure before constructing the crown or bridge. That is a separate procedure and but can usually be done in conjunction with the first visit.
- **Implants:** Implants are precision titanium “roots” that can be placed directly into the jaw to replace missing teeth. Implant dentistry has provided us with the ability to provide crown and bridge services in cases previously unrestorable without removable dentures. Today’s state of the art implants are predictable and highly successful in recreating the feel and function of natural dentition for patients that have lost teeth to accident, gum disease or decay.

Crowns, onlays and bridges placed on natural or implant teeth do not require removal for cleaning and can last for many years. Our options for restoring your teeth have never been better. And now you know the lingo!

(Xerostomia cont'd)

- Medical treatments such as head or neck radiation for cancer or the removal of salivary glands
- Nerve injuries
- Dehydration
- Habits such as smoking, chewing tobacco, alcohol consumption or mouth breathing

If you believe your dry mouth is caused from medications or systemic problems, discuss this with your physician. He or she may be able

A few words from our dental assistants...

Your world is high tech...So is ours!

We are proud to incorporate the most up to date technological advances available to produce the best dental care in the safest treatment environment possible.

- **Digital radiography** produces improved x-ray images while exposing you to 90% less radiation than conventional films.
- **Digital photography** allows for more diagnostic accuracy, sometimes even eliminating the need for radiographs.
- **Plasma arc curing lights** minimize curing times for restorations and boost the speed and effectiveness of in-office teeth whitening.
- **Fiber optic lighting systems** greatly enhance our views of the operating field.

to adjust medications or prescribe products to re-hydrate your mouth. Over-the-counter products can also help to restore mouth moisture. **And fluoride is very important for patients with dry mouth to help prevent cavities and to improve salivary flow.** Brushing with fluoride, using fluoride rinses and regular professional fluoride treatments at our office will help as well.

For additional information, please contact your physician, dentist, or check online at www.webmd.com.



Danielle Holobetz
Dental Assistant II



Stephanie Forsyth
Dental Assistant II

- **Advanced bonding technology** allows for the use of new cosmetic ceramic and resin restorations for unsurpassed esthetics.
- **Dental implants** can provide missing teeth with lifelike replacements that provide incredible esthetics and function.
- **Disinfection/sterilization:** State of the science disinfectants and sterilization procedures are always used to keep you safe.
- **Amalgam separators and metal waste recycling** help keep our environment clean.

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(Dentistry's "Magic Bullet" cont'd)

the Centers for Disease Control and Prevention's recommendation that all dental health providers, public health officials, policy makers and the public take advantage of its benefits. Research continues to confirm the benefits of fluoride and to develop new and improved ways of using it.

Fluoride works in 3 major ways:

- It inhibits the breakdown of enamel at the time of bacterial acid attacks.
- It enhances the body's natural repair of damaged enamel by combining with calcium and phosphate to form a new enamel surface that is actually stronger than the original tooth.
- It reacts with acid from the bacteria to produce a chemical that interferes with and even kills plaque bacteria.

Additionally, fluoride can inhibit the binding of plaque bacteria to exposed tooth surfaces.

And, because fluoride is activated by the presence of acid, it is most active when it is most needed: during bacterial attack!

Fluoride is safe and effective when used appropriately. This is partly because it does not act metabolically on proteins or membranes of cells. Instead, it combines chemically with other components present to strengthen tooth structure or disrupt harmful bacteria.

Not all fluoride formulations are the same. Today, there are 3 basic topical formulations available:

- APF fluoride is a topical fluoride that raises acidity at the time of its application. This speeds its uptake by the teeth. It is effective, and has been

the standard for pediatric in-office treatments for many years. Due to its increased acidity, however, APF may damage the finish on porcelain or resin restorations.

- Sodium fluoride has a neutral pH and so will not harm dental work. It has the advantage of being available in a varnish form to allow for quick and comfortable office applications that provide prolonged availability to the teeth. It is also helpful in reducing sensitivity for many patients.
- Stannous fluoride could be called the periodontal fluoride. It not only helps fight decay and soothe sensitive teeth, it also provides an additional antimicrobial benefit in people with gum disease. (Though stannous fluoride tends to stain teeth superficially, this is usually well managed using today's electric toothbrush technology and good home care.)

For most people, brushing (at least twice daily) with fluoride and drinking fluoridated water, along with eating a healthy diet, are all that are needed to prevent tooth decay. Sometimes, however, a coordinated regimen with your dentist is recommended. Such circumstances may include:

- The presence of active decay or a high rate of decay.
- Active orthodontic treatment.
- During and after periodontal treatment.
- In the presence of dry mouth or if the ability to remove plaque effectively is impaired.
- In the presence of sensitive teeth

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(Dentistry's "Magic Bullet" cont'd)

from bleaching or root exposure.

The effectiveness of your fluoride regimen depends on the type of fluoride prescribed, and on its concentration,

frequency and duration of use. We want you to be as healthy and comfortable with your teeth as possible. We will help you make the most of dentistry's "magic bullet".

Gum disease can harm more than your smile

We now know that the gum infections of gingivitis and periodontal disease should create greater concern than we once thought. Periodontal disease has always put patients at risk for tooth loss, but research now shows that **periodontal disease and even gingivitis (inflamed gums) are linked to heart disease, low birth weight and pre-term babies and can seriously affect other health conditions.**

- **Your Heart:** Inflammation from your gums stimulates the liver to produce specific proteins called acute phase reactants, several of which directly increase the risk for cardiovascular disease. The bacteria that cause gingivitis also affect your cardiovascular health by circulating in the bloodstreams and changing platelet function, blood clotting and the integrity of the blood vessel walls. Gum disease should be considered along with high blood pressure and cholesterol, family history and smoking as a major risk factor for heart disease!
- **Your Baby:** Research also shows that inflammation from your gums triggers an immune response that can lead to low birth weight or pre-term babies. In the US, 10,743 pre-term babies are born every week. According to the American Academy of Periodontology (AAP), pregnant women with periodontal disease are seven times more likely to deliver pre-term than women with healthy mouths. Researchers believe that gum disease increases levels of biological fluids that induce labor.
- **The Rest of Your Body:** Studies have shown that gum diseases may cause serious additional problems for patients with other systemic problems such as diabetes, respiratory diseases or osteoporosis.
- **Diabetes:** People with diabetes are more likely to have periodontal disease. Furthermore, uncontrolled type II diabetics seem to be more susceptible than well-controlled diabetics. Not only do diabetics have a higher risk for gum disease, but those with gum disease have a much harder time controlling their blood sugar levels. In patients with uncontrolled diabetes and severe periodontal disease, the body has to function more often with high blood sugar levels, making the patient more vulnerable to diabetic crisis.
- **Respiratory Illnesses:** Patients get bacterial respiratory infections by inhaling droplets down into the lungs. People with periodontal disease (a bacterial infection) can draw these germs from the mouth into the lower respiratory tract. The result can create new infections such as pneumonia; or can worsen existing conditions like chronic obstructive pulmonary disease.
- **Osteoporosis:** Research has also linked osteoporosis and bone loss in the jaw. Studies have shown that decreased density in the jawbone provides less stability for the teeth and may lead to early tooth loss. Clinical trials have been conducted

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(Gum Disease cont'd)

over the last several years concluding that estrogen supplementation may lower gingival inflammation and decrease the rate of oral bone loss in women with signs of osteopenia or osteoporosis.

What you can do:

- See us regularly for evaluations and maintenance of your mouth and gums.
- Practice good home oral hygiene, including proper brushing after meals and flossing daily. (We'll show you how!)
- Don't ignore signs of inflammation such as bleeding or tender gums.
- Seek appropriate treatment if diagnosed with gingivitis or periodontal disease.
- Inform your MD if you have been diagnosed with one of these gum diseases.

It seems the more we learn about oral health, the more important it becomes!

What is Xerostomia? And are you living with its effects?

Xerostomia is the medical term for a very common problem...DRY MOUTH.

Symptoms of decreased saliva production vary but may include:

- A sticky, dry feeling in your mouth.
- A burning or tingling mouth or tongue.
- Frequent thirst.
- Sores or cracks in and around the mouth.
- Difficulty swallowing or tasting.
- Hoarseness.

We know that saliva is a necessary fluid in the mouth. It is composed mostly of water, but it also contains very important enzymes that begin the digestion of food in our mouths even before it hits our stomachs. Not only is

saliva composed of digestive enzymes, it also has antibacterial qualities. Most noticeably, it helps coat and flush our mouths.

When we don't make enough saliva, it not only makes our mouths uncomfortable, it makes the oral cavity more vulnerable to bacterial and fungal infections. This increases our risks for tooth decay, gingivitis and oral soft tissue infections. Xerostomia can also make wearing full or partial dentures difficult for those patients that must depend on them. For some people, it may even lead to decreased eating and drinking. With fewer nutrients, the body's immune system may become compromised and lead to additional illnesses.

Xerostomia may have numerous causes, including:

- Medications (prescription and over-the-counter)
- Diseases or infections (Alzheimer's, diabetes, mumps, Sjogren's)

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