

WHY THE PHRASE "BRUSHING YOUR TEETH" IS MISLEADING

By Dr. Victor Sternberg

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An observation I've made after many years of practicing dentistry, is that every patient I've ever treated for periodontal disease or tooth decay has always brushed their teeth. They've been doing it since they were children and continue to do so right until the time I meet them. The idea of brushing your teeth as a way to keep your mouth healthy goes back eons. Primitive man used to use little straw sticks to clean between their teeth before toothbrushes were invented and this has morphed into every conceivable device both manual and electronic to "brush your teeth".

Yet despite this mantra to "brush your teeth", dental disease proceeds for many people unabated. More than 50% of adults have periodontal disease and they all brush their teeth.

After you have your teeth cleaned where the hygienist removes any tartar (hardened bacteria) and any plaque (a soft bacterial biofilm on your teeth), you leave the office with no bacterial plaque on your teeth. Bacterial plaque is the sticky film at the gum line between your teeth laden with bacteria that causes gum disease and tooth decay. You leave with no plaque on your teeth and within hours, a sticky film produced by your saliva called an acquired pellicle, begins to adhere to the enamel and root surface of your teeth. Within 12 hours, bacteria are now embedding into that sticky film and beginning the disease process. If that bacterial film or plaque is not removed every 12 hours or thereabouts, it begins to thicken and become more difficult to remove and then at that point, has the possibility of beginning to irritate the gum tissue.

The acquired pellicle (sticky film) and the bacteria that adhere to it create something called plaque. That plaque forms independent of food. Thus if you're in a hospital getting fed intravenously, plaque is forming on your teeth, actually slightly more rapidly than if you were eating because the detergent action of food can be somewhat dislodging to certain plaque even more rapidly than if you ate. Yes, food does not contribute to the formation of plaque. Food, particularly sugar, is necessary to get decay because that sugar in the food will be digested by the plaque bacteria producing acids which cause the cavities. But importantly, the plaque is independent of the food you eat. Most of us brush our teeth to remove food particles and that's where the problem begins.

Since we know that plaque begins to form within 12 hours of it all being removed from our teeth at a dental visit, what should we be doing in between visits? What is your role in preventing the reforming of this plaque?

Given that, I've come up with a different paradigm .

What we're trying to do is deplaque our teeth (remove all bacteria) at the gumline and between our teeth every 12 hours. As long as we deplaque the teeth every 12 hours, it never gets thick enough to accumulate enough bacteria that can begin this cycle of inflammation of the gum and ultimately periodontal disease.

The reason we have continued inflammation, bleeding, and in some cases bone loss despite "brushing our teeth" regularly is that one is not completely removing the plaque from the areas where it begins to accumulate which is between the teeth, at the gumline and slightly under the gumline.

So if you don't completely deplaque your teeth every time you clean and you do leave residues of plaque, that plaque continues to thicken, you continue to miss those areas and the process goes on and on and on and on. At that point, you arrive at the dental office, the hygienist or I say "show me how you're brushing your teeth", your gums are bleeding and you say "but I do exactly what you tell me". And I say "Yes, you do but you are not effective in completely deplaqueing your teeth". Thus the concept of deplaqueing is going to replace "brushing your teeth" as what you're trying to accomplish.

You know from previous correspondence that I favor using a Radius toothbrush and a WaterPik but irrespective of what you do to deplaque your mouth, it is the daily effectiveness that makes all the difference. Our staff is committed and

has been committed for my entire career to teaching our patients how to deplaque effectively. This change of language is important so that we all understand what we're trying to accomplish. Knowing what you need to do and what we need to teach will make us more effective in eliminating plaque and preserving dental health.

If you have questions about any of this, please feel free to contact my office by email or phone or discuss with me or the hygienists when you come into the office.

Once again, as always, we always appreciate your viewpoint.

Yours truly,
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