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Congratulations on taking the first and most important step to total dental health – educating yourself!

This report is designed to inform and educate you about the basic causes of most dental health problems. The report is divided into three sections. The first section will explain the disease that is at the root of the problem. The second section will cover common myths about dental health and give you the facts to combat them. The final section will explain what can be done for you to control this disease and put you on the road to complete dental health.

Explaining Dental Disease

If given a choice, most people would rather be healthy than not. Unfortunately, unlike general health, most people can't tell if they are dentally healthy or not. This is because dental disease rarely hurts. If you have the flu, you know that there's something wrong and you take action to get treatment. This is not the case when it comes to your oral health. More than 80% of the entire population is living with a chronic oral infection, and most have absolutely no idea what is going on in their mouths right now. Yet they've been going to dentists and they've been brushing their teeth. How is this possible? What's going on here?

The cause of essentially all dental problems is well known and well understood. It's just that it's not often well communicated to you, the patient! The cause is quite simple. It is an INFECTION! A chronic, low-grade, painless oral infection that over time destroys everything it comes into contact with – teeth, gums, and jawbone!

We're well aware of the fact that we can have many serious health problems going on in our bodies at any given time. Generally people are unaware of these problems because they feel and appear just fine. People rarely notice such things as high blood pressure, clogged arteries, glaucoma, or early stages of diseases like diabetes or cancer. The same thing is true of dental disease, except that people are no where near as well-informed about dental health as they are about medical health. While the vast majority of us suffer from this chronic dental infection to one degree or another, most of us are completely unaware of it! Fortunately, unlike many painless diseases, it's easy to diagnose and responds well to treatment except in the most advanced cases.

I'm sure you're familiar with the damage caused by this infectious disease: cavities and tooth decay, abscesses and toothaches, tender inflamed bleeding gums, gum pockets, gingivitis, bad breath, loose or shifting teeth, periodontal disease, sensitive teeth, and tartar buildup, just to mention a few!

Oral infection is simply too many germs in all the wrong places: the pits, fissures, grooves, cracks, and crevices of our teeth; underneath leaky unsealed fillings and crowns; in our gum pockets (gums form a turtleneck collar around each tooth – the space between the gum and tooth, where all the germs and popcorn kernels hide, is called a "pocket"); and even inside our gums and bone. The germs start on the

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surfaces of our teeth and in our gum pockets, and then (this is the part most people don't realize) the germs infiltrate into the lining of our gum tissue itself! Unless the germs and the diseased layer of gum tissue they live in are removed, they will slowly wreak havoc in our mouths.

Dental disease is similar to what our bodies would be like without bathing. If we were to stop bathing, over time our skin would become more and more dirty, smelly, inflamed, rashy, raw, tender, and even ulcerated and infected as the germs continued to multiply and entrench themselves. The same thing happens in our mouths, only worse because there are so many more nooks, crannies, and recesses for the germs to hide in our mouths compared to our relatively smooth bodies. Thankfully, just as skin is easy to restore to health with proper hygiene, so are our mouths!

In medicine, we strive for prevention, but that's not always easy. Fortunately, we know a lot more about preventing dental diseases than medical diseases. In dentistry, we know an infection is the cause of almost all our problems, and we have proven ways to control this infection. As a result, we are quite successful in preventing the damage to our teeth, gums, and bone that this infection causes.

About the word "prevention" – it's probably the most misunderstood and misused word in dentistry. Many patients come to me with a full-blown infection silently destroy their mouths, thinking everything is fine, and mainly interested in "prevention". Think about that for a minute! Isn't it a little late for "prevention" if something's already wrong? The problem is they're unaware they have something wrong because nothing hurts and nothing is broken. What the patient really wants is to "prevent" needing fillings, root canals, etc. Getting rid of the infection would indeed prevent needing these things, but first the patient needs to realize that an infection causes these problems, that they have this infection, and that they need treatment to get rid of this infection. Only then can they start thinking about preventing this infection from coming back. "Prevention" doesn't just happen. It comes through treating and then controlling this infection!

Myths and Reality

MYTH: The main factors leading to dental problems and tooth loss are sugar, food, plaque (whatever that is), and aging.

REALITY: Actually teeth, gums, and bone are all slowly destroyed by a painless, low-grade, chronic oral infection. The mouth is meant to have some germs, like our skin, but when it has too many germs, to the point where oral tissues are being destroyed, it's called an infection. Sugar and food don't cause problems directly, but they do feed the germs that cause the problems. Plaque is the name we give to germs and the sticky substance they excrete that lets them adhere to teeth. Unlike our skin, our teeth, gums, and jawbone don't deteriorate from age alone. But if we have an active oral infection, the older we get, the more time the infection has to damage our teeth, gums, and jawbone.

MYTH: Tooth decay (cavities, dental caries, rotting teeth, etc.) is the number one cause of tooth loss.

REALITY: Actually, tooth decay is the number two cause of tooth loss. The number one cause of tooth loss is chronic gum and bone infection (i.e. periodontal disease, bone disease, gingivitis, gum disease,

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etc.) Since all of these things are caused by infection, it could be said that infection is the only cause of tooth loss, apart from traumatic injuries.

MYTH: If I had an infection in my mouth, I'd know it, because it would hurt.

REALITY: While there are occasional acute oral infections that do hurt, and hurt a lot (abscessed teeth, periodontal abscesses, etc), the day in and day out oral infection that leads to these acute infections and most of our other dental problems is a chronic, low grade infection that doesn't hurt.

MYTH: For a mouth to be healthy, it must be germ-free.

REALITY: Our mouths, like our skin, are meant to have germs and still be healthy. They're just not meant to have so many germs that the germs start destroying healthy tissues. That would be considered an infection.

MYTH: At least if I have this infection, it only affects my mouth.

REALITY: Unfortunately not. Infections cause inflammation. Inflammation is now considered an even greater contributor to clogging of arteries than cholesterol. Studies have shown that people with uncontrolled oral infection are twice as likely to die from heart attacks or strokes. It is also known that women with uncontrolled oral infection have two to ten times the number of premature births, depending on the severity of the infection. The elderly and infirm can get aspiration pneumonia by inhaling these germs into their lungs.

MYTH: If I use the right toothpaste and mouthwash, I'll be fine.

REALITY: If that were true, 80% of us would be healthy instead of 80% of us being unhealthy! Toothpastes and mouthwashes have some benefits, but we can be perfectly healthy without them. Physically removing the infection from where it hides through proper in-office therapy combined with proper home therapy is the only way to get healthy and stay healthy.

MYTH: If I brush my teeth after every meal, I should be fine.

REALITY: Brushing only cleans the visible parts of the teeth and gums. It doesn't get between the teeth, or inside the gum pockets, yet that's where almost all of the infection is. Brushing teeth is like sweeping the parking lot at the entrance of the Howe Caverns – it needs to be done, but it's not the same as cleaning inside the Howe Caverns!

MYTH: The main reason for flossing is to remove pieces of meat, apple skin, or other foods that get stuck between my teeth.

REALITY: That's one reason, but far from the main reason. Floss is by far the most effective, though imperfect, means of removing germs from our gum pockets (which exist 360° around each tooth – remember the turtleneck collar?), as well as from hidden surfaces of the teeth, and from the diseased skin lining the gum pockets. A brush doesn't have a chance of reaching these areas. Unfortunately, very few people floss, and the few that do are seldom much healthier than those who don't, because they don't know specifically what they're trying to accomplish, what techniques to use, and what type of floss to use.

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MYTH: You can look in your mouth and see what needs to be cleaned.

REALITY: When we look into our mouths, only a small portion of the surface area of our teeth and gums is visible. The unseen surface area of our teeth and the insides of our gum pockets may actually be greater than the visible surfaces, depending on how bad the pockets are. These pockets, or spaces, between the gums and teeth can range from 1/16" deep to over 1/2" deep, all the way around the tooth. If we added up the surface area of this unseen germ world, it would be about the size of the palm of your hand. Imagine having an infected area that big for a lifetime and not doing anything about it! Yet most people don't even realize this hidden germ world exists, let alone do anything about it.

MYTH: If I have my teeth examined and cleaned every six months, I should be fine.

REALITY: Not necessarily. "Cleaning" is a layman's term. Like "prevention", it's often misunderstood and misused. In dentistry there is no procedure called "cleaning". There are, however many different procedures, codes, instruments, techniques, and reasons for using them geared toward "cleaning" teeth and gums. It all starts with a diagnosis. Healthy? Unhealthy? Level of disease? Amount of tartar? Pocket depths? Number of teeth? Amount of bone loss? The diagnosis determines the cleaning procedures and the time required. You may not be getting the "cleaning" appropriate to your situation.

MYTH: When I brush and floss, my gums bleed. I must be doing something wrong.

REALITY: This shows there is something wrong (infection), but not that you're doing something wrong. In fact it shows you're cleaning at least some of the infected areas, because those are the areas that are so eaten away by the infection that they bleed when they are touched. After proper office and home therapy, and sufficient healing time, there will be little or no bleeding when you brush and floss.

MYTH: When I brush and floss, my gums don't bleed at all. I must be healthy.

REALITY: Possibly, but not necessarily. Often an infection is present, but the patient doesn't know where or how to clean properly, so the hidden infected tissues don't get cleaned, and therefore don't bleed.

MYTH: If a chronic mouth infection doesn't hurt, it must be difficult to detect.

REALITY: Actually, it's very simple to diagnose. One thing infection does is make our gum pockets deeper, so we measure them. Since infection infiltrates and erodes and ulcerates the skin inside the gum pockets, they bleed easily when touched. We check for this when we measure the pocket depths. The infection also inflames the gums, changing their appearance. It makes gums tender to the touch. It dissolves away the bone under the gums, which we can see on x-rays. All of these signs are easy to observe, which leads to a standardized diagnosis of level of disease, which in turn leads to a standardized treatment regimen ("Soft Tissue Management").

MYTH: Because this chronic infection of the teeth, gums and bone is a bacterial infection, antibiotics can be used to treat it.

REALITY: Antibiotics in tablet form are carried by the blood. They work wherever there is good blood flow. Unfortunately there is no good blood flow on the surfaces of our teeth or in the gum pockets. Multitudes of germs would survive antibiotic tablets and act as reinforcements to replace whatever germs these antibiotics did kill. Also, remember that the mouth will always have some germs to restart the

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infection, and we can't be on antibiotics continually. The only thing that works is controlling the infection by physically removing sufficient germs with proper in-office and home care procedures.

There is a minor role that antibiotics play using new methods of placing time release antibiotics in deep infected pockets that are inaccessible to physical removal procedures. There is no way to be healed of oral infection once and for all, using antibiotics or any other method, since our mouths will always have some germs which can then multiply. Instead, we must continuously control the germs down to a sub-infectious level.

MYTH: Treatment for this infection must be painful.

REALITY: It's similar to getting fillings done in the sense that most people opt for local anesthetic for some of the procedures and therefore don't feel anything because they are numb. Many patients go without any anesthetic and do fine. Many parts of the treatment programs are totally painless without anesthetic. After some procedures the teeth and gums may feel "dull achy" for a while, and then feel better than ever because they're no longer infected. Don't confuse any of this with gum surgery. It's not. These are non-surgical cleaning procedures. A name for this therapy that is becoming commonplace is "Soft Tissue Management".

MYTH: Treatment for this gum infection must be expensive.

REALITY: Actually the examination and treatment procedures to diagnose and control this infection are the least expensive services a dentist performs on a dollars per hour basis. The dental procedures needed to repair the damage caused by this infection are much more expensive by comparison. Addressing the infection minimizes costs in the short-term as well as the long-term. It's a no-brainer!

Now that we've cleared up some common misconceptions about dental health, let's get to the heart of the matter. If you want to get healthy in addition to getting fixed up, and if you want to have a dental future that is better than your dental past, ...

Here's how I can help!

According to all the dental literature, which agrees with what I see in my practice, at least four out of five people are dentally unhealthy in the sense that they have an active oral infection. If you want to find out if you are unhealthy, and if you want to be healthy, I can help.

I'm not a specialist limited only to gum disease. I'm a general dentist, and I do all the dental procedures you'd expect a general dentist to do (fillings, crowns, dentures, etc.). But I also strongly believe that a complete dentist, and a true healthcare professional, is one who not only repairs the damage caused by dental disease, but also controls the disease that's causing the damage. To that end I focused a good part of my continuing education on how to diagnose and control this disease, and I've put what I've learned into practice.

An analogy will better explain my philosophy. Suppose you had a doctor who stood by waiting for your arteries to clog, because all he ever did was heart bypass surgeries. Wouldn't you prefer a doctor who

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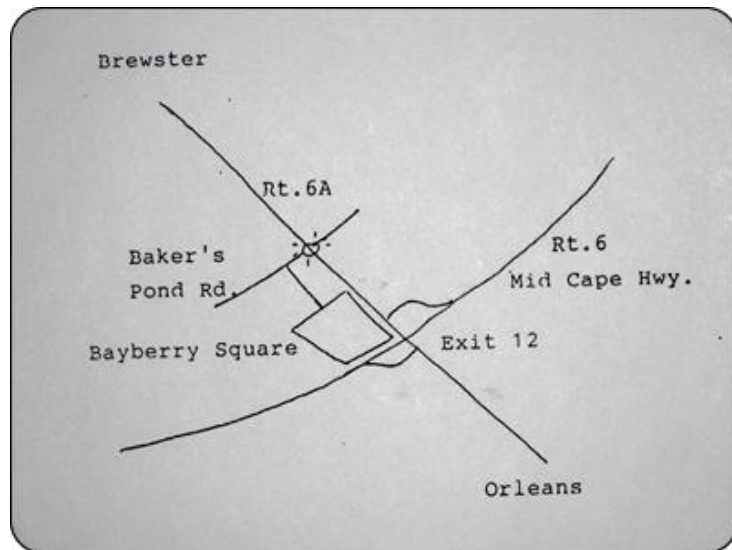
knew enough to prevent them from clogging in the first place so you could avoid the bypass surgeries and the heart attacks?

In my practice, I am the only healthcare professional. I see every patient for every procedure of every type. I am there 100% of the time for everything. I do not relegate my patients to associates or hygienists. I examine every problem. My expertise is always available to you. I answer all of your questions. This makes for less confusion and better communication. Most patients would prefer to deal solely with their dentist, but in most practices this is not possible.

An important part of my treatment is sitting down with every new patient to give them a clear, comprehensive explanation of how this infection works and how to get rid of it, using simple language, pictures, lifelike models, and real objects. At this time, I also address their general dentistry needs (fillings, crowns, dentures, etc.) and answer all of their questions. After my consultation, my patients are finally able to see the big picture clearly and make informed decisions that will get them on their way to restoring their teeth and becoming dentally healthy for life!

If you would like to find out what your dental needs are and learn more about what's involved in treating them, call my office to schedule an examination and consultation.

Dr. David A. Maczko DMD
225 Rt. 6A
Bayberry Square
Orleans, MA 02653
508-255-0032
www.drdauidmaczko.com



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