

# Patient NEWSLETTER

## PATIENT Newsletter

**Produced for  
the patients of  
Edward R. Kusek, D.D.S.**

**Fall 2009**

### **DENTAL TEAM**

Vicki Neve  
Judith Pastrano  
Jeanette Miranda  
Cindy Dellman  
Amanda Kusek  
Tina Simunek  
Kristi Meyer  
April DeVille

**GREETINGS!**



**FALL**

Football and soccer have begun, and hunters are preparing for their big season. Yes, summer has officially passed, and, unfortunately, fall is upon us. Our office has sponsored seminars to instruct dentists and hygienists on using a laser to fight gum disease without surgical means. The most recent course was given on September 18 and 19, at which we spoke and demonstrated to area clinicians on the topic of laser pocket reduction. Jeanette, Amanda, Vicki, Cindy, and myself taught this course. This is the only course taught in the United States that uses actual patients in a hands-on approach.

A second course that the office sponsored was entitled "New Frontier in Implant Dentistry." This class was given on October 2 and 3 and consisted of two full days of lecture and participation on how to use the Ir;Cr:YSGG laser to aid in surgical procedures. A number of these procedures have been published in the last few years. We have found that using a laser allows faster healing, causes less pain, and gets better clinical results than traditional methods. At this time, there are very few clinicians who are using lasers in their surgical methods. We are hopeful that soon they and their patients can benefit from the outstanding results we have seen in our office. This course was limited to dentists, but we did invite them to bring their clinical assistants also. The course was aided by Judy, Kristi, April, and Vicki, who also provided information on how to get the maximum benefits from your insurance company when using laser technology.

As for new challenges that I have taken on lately, I will be the first clinician in South Dakota to achieve Advanced Proficiency from the Academy of Laser Dentistry. Hopefully, the examination part will be completed in the near future. Other plans are to write new articles on interesting clinical findings we have experienced with the use of the laser in combination with the use of a CAT scan for diagnosis of failing teeth.

For those of you who are interested in the quarterly update of my family, here is the latest: Alex (18) has left the nest to attend the University of Nebraska. It was hard to see him go, not just because of the empty nest, but also the reminder

that my and my wife's lives are moving in a different direction, away from child rearing. I have been able to visit him a number of times to see the Huskers play football on Saturdays. (It looks like the Huskers could have a better season this year!) Alex has pledged a fraternity at UNL, Pi Kappa Alpha, to help him make new acquaintances at this large university. I am proud to say that he selected the same fraternity I joined in my undergraduate years. He is majoring in biology and adjusting to college studying! Amanda (22) is a member of my dental team—a hygienist—and has been employed with us for over a year already. She has been a huge asset in putting together our continuing education courses that I mentioned earlier. She's also been busy socializing with friends and participating in a number of weddings. Adam (25) is working for Mansanto in Harrisburg with corn and soybean research. Just ask him one question about corn and you will get a 20-minute dissertation on corn growth! Adam joined me in playing in Men's League Golf at Bakker's Crossing. He also played in the Hispanic League for soccer until his ACL tore in his left knee. Fortunately, he never had a major injury in high school or college until now. It has been a slow recovery process for a very active young adult. Jody, my wife, has experienced continued growth in her store, *Forget Me Not* Gift Boutique. She invited me to attend one of her buying trips recently in Las Vegas. I was amazed at the number of vendors at these meetings and the miles of walking that is necessary to complete this process (good and comfortable shoes are a must). At the show, I saw a product produced by two dentists called "cleaning cloths" for infant to toddler ages. These are great for parents on the go who may not have the ability to brush their child's teeth. The best part of this product is an anticavity agent in the product that is totally natural (Xylitol). If you have a young child or grandchild, please ask for a sample of this product from my office; or, you can purchase them from *Forget Me Not*.

Again, thank you for the referral of family and friends!

**Thank you for all your referrals. We appreciate them!**

# Blood and gums

You're happily brushing away. You're about to rinse your brush when you notice the reddish hue in the bristles. You look down and see blood in the sink as well. What's going on?

While bleeding gums can be a little frightening, the cause of the problem can usually be reversed if treated quickly.

Gingivitis, which causes gums to become puffy, tender, and to bleed, can be a symptom of periodontal disease or vitamin C deficiency.

Although vitamin C deficiency is an unlikely cause, about 15 percent of Americans do suffer from low vitamin C. In addition to gingivitis, symptoms of low C include dry, scaly skin, hair that is dry and splits, nosebleeds, swollen joints, anemia, and lowered resistance to infection. Those suffering from vitamin C deficiency may be prescribed vitamins and encouraged to eat a diet high in fruits and vegetables containing this essential vitamin. Good sources include citrus fruits, broccoli, cauliflower, blueberries, cranberries, and juices.

Periodontal disease is far more common than vitamin C deficiency, affecting 75 percent or more of the population. In the early stages, periodontal disease can often be cured. Gingivitis is one of the first signs of periodontal disease, and it is a warning that the gums need more attention. A first step to take is to put more effort into oral hygiene. This means brushing after each meal and flossing daily. Professional dental care is also a must. Untreated, gingivitis can lead to periodontitis, which causes the pockets between the gums and teeth to deepen and teeth to loosen. Periodontal disease is the number-one cause of tooth loss.

Other causes of gingivitis include certain medications, pregnancy, and some systemic diseases, such as diabetes. Brushing too hard and eating certain foods that are hard on gums can also lead to bleeding.

Your dentist is the gatekeeper for health problems that begin in the mouth. Bleeding gums should not be ignored. If you notice pinkish-red in your toothbrush, step up your home-care routine, but also seek professional help to find the root cause of the problem.



## FOODS THAT FIGHT DECAY

Most people know that certain foods are less damaging to your teeth than others, but there are also foods that can be beneficial. Certain fruits and vegetables and dairy foods can have beneficial effects.

Some of the best foods for teeth are also the noisiest to eat. These include raw foods that are known for going "crunch." Perhaps the most famous of these are apples, which are well-known for their ability to help cleanse the mouth. Carrots and celery work in a similar fashion, and when eaten regularly, they may even help to lighten stains and brighten your smile. Raw foods also stimulate the salivary glands to help wash away food debris found on teeth.

Foods that contain calcium—such as yogurt and cheeses—

are known for helping children to grow strong teeth, but dairy foods are good for your teeth your whole life through. Cheese, in particular, contains nutrients that can interfere with plaque formation. In addition, the texture of some cheeses can help increase saliva production.

When choosing the occasional sweet, chocolate, although it contains sugar, can be less detrimental than other treats because it melts away rather than sticking to teeth.

Improving your dental health isn't simply a matter of avoiding foods that are sugar-laden and sticky. Rather, choosing foods that are good for your teeth can mean enjoying better dental health and a healthier diet.



## Do adults need fluoride?

Many adults believe their need for fluoride ended when all their permanent teeth erupted, but that's not the case. Adults, especially those who didn't receive adequate fluoride as children, are still in need of fluoride to help prevent decay as adults.

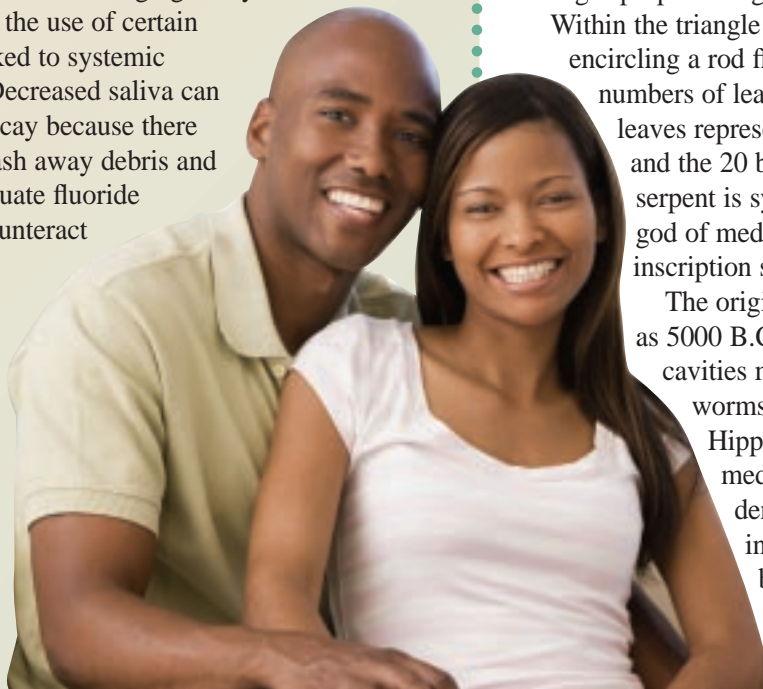
Fluoride helps prevent cavities in two ways. First, it affects the enamel of the teeth, helping to interfere with the decay process. Using fluoride on the teeth daily in a toothpaste or rinse, coupled with fluoride treatments as recommended by a dentist, can aid in stopping decay and help the enamel of the teeth better resist future cavities.

In addition, there are positive systemic responses to fluoride. When fluoride enters the body, it becomes part of bodily fluids, such as saliva, and builds up to continually bathe the surface of the teeth and provide further resistance to acid attacks that cause decay.

Aside from fighting decay on the biting surfaces of teeth, where it often starts, fluoride can also help prevent problems near the gum line. Adults who often experience gum recession that exposes the roots of the teeth may be subject to root decay. The chances of suffering from root decay increase with age. However, once fluoride has become part of the tooth, it can diminish the chances of root decay.

Another dental problem connected to aging is dry mouth, which can result from the use of certain medications and has been linked to systemic conditions such as diabetes. Decreased saliva can mean increased chances of decay because there isn't enough saliva to help wash away debris and cavity-causing bacteria. Adequate fluoride throughout life can help to counteract problems such as these and reduce chances of decay.

More and more Americans are smiling well into their golden years because they are able to keep their own teeth. Fluoride—for both children and adults—has been a big reason why.



## THE MEANING BEHIND THE SEAL

The symbol of the American Dental Association was chosen in 1965, but parts of the insignia date back to the earliest dental association in the United States, and even to the ancient Greeks.

Each piece of the symbol has meaning that directly links it to the dental profession. The outer part of the design uses a triangle entwined with a circle. The triangle is the Greek letter delta, which stands for dentistry, while the circle is the Greek "O," which stands for odont, or tooth.

In 1897, what was then called the National Association of Dental Faculties decided that lilac would be the official color of the profession. The shading within the triangle and circle of the design uses this color, as do dental schools and other dental emblems and banners. The letter "O" is generally gold, and the triangle is black. The rod is gold, and the figures are outlined in black to delineate them from the light-purple background.

Within the triangle and circle is the figure of a serpent encircling a rod flanked by leaves and berries. The numbers of leaves and berries are significant; the 32 leaves represent the number of permanent teeth, and the 20 berries represent the first teeth. The serpent is symbolic of Aesculapius, the Greek god of medicine. In the bottom of the "O," the inscription simply reads DENTISTRY.

The origins of dentistry are ancient. As early as 5000 B.C., evidence from Sumeria notes that cavities may have been the result of tooth worms. Later, between 500 and 300 B.C., Hippocrates (considered the father of medicine) and Aristotle wrote about dentistry. It seems fitting that the dental insignia should include symbols dating back to man's earliest attempts to cure dental caries.

## GOOD EATING—even with dentures

A denture that doesn't fit right or look natural can be a detriment to quality of life and even affect self-esteem. There are people who avoid certain foods and social situations because of discomfort over their dentures.

Good nutrition is important to everyone's health, and an ill-fitting denture can interfere with proper nutrition by causing the wearer to avoid certain foods. But food isn't only about nutrition. There's a pleasure in eating and social satisfaction in enjoying good food while chatting with family and friends. Many social situations include or even revolve around food. The denture wearer who is uncomfortable eating around others may shun such occasions, robbing him or her of social engagement and lowering self-confidence.

A better-fitting, -looking, and -functioning denture can change this scenario. Denture options, including partial plates and implants, can replace dentures that don't fit well or don't appear natural.

Denture wearers shouldn't resign themselves to a life of isolation. Eating, talking, and overall quality of life can be improved with replacements for natural teeth that look, feel, and function more like your own.

**Edward R. Kusek, D.D.S.**  
4921 E. 26th St. #1  
Sioux Falls, SD 57110

*Here's your  
dental newsletter!*

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ORAL HEALTH IS FOR EVERYONE

There is no age at which oral health is no longer important. Throughout life, the health of one's teeth and oral tissues affects the enjoyment of food, speaking, smiling, and laughing. Neglecting dental health can lead to problems with digestion and a lack of self-esteem. Certain medical problems, such as diabetes and heart disease, may be linked to the health of one's teeth and gums. Gingivitis and periodontal disease are often among the first signs of diabetes.

Old restorations may break as a person ages, resulting in discomfort. Emergency dental care should be sought to restore the tooth and enable the patient to continue to eat, speak, and smile with ease.

The senior years are no time to neglect dental health. Good home care and professional care are both necessary to help keep teeth clean, healthy, and free of periodontal disease, which often results in tooth loss. Brushing thoroughly after meals and flossing daily should continue routinely. Regular dental checkups, on the schedule recommended specifically for you, are a must.

Oral-cancer checks are an essential part of any dental examination. The risk of oral cancer increases with age, and early detection can often save the patient's life.

Special dental problems that frequently occur with age include dry mouth caused by taking medications prescribed to lower cholesterol or reduce high blood pressure. Saliva is the mouth's first line of defense against bacteria because it washes away both food debris and bacteria. A number of medications can cause a patient to produce less saliva, making him or her more susceptible to decay. Drinking plenty of plain water as often as possible coupled with good home care and regular professional care can alleviate this problem.

FAMILY & IMPLANT  
DENTISTRY

**Dr. Edward R. Kusek**  
4921 E. 26th St. #1  
Sioux Falls, SD 57110

**Office Hours**

Monday	8:00 a.m.-5:00 p.m.
Tuesday	9:00 a.m.-6:00 p.m.
Wednesday	8:00 a.m.-5:00 p.m.
Thursday	8:00 a.m.-5:00 p.m.
Friday	8:00 a.m.-Noon

**Appointment and Emergency  
Phone: 605-371-3443  
Web site: [www.drkusek.com](http://www.drkusek.com)**

**DENTAL FACT**

**Americans  
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toothpaste,  
mouthwash,  
and dental floss.**