including fluorides and sealants. Fluoride supplements are generally prescribed at age three, when all the baby teeth are in.

6. Have your dentist apply a sealant to protect the biting surfaces of the molars. These are generally applied when the six year molars come in. Sealants are nearly 100 percent effective in preventing cavities on the biting surfaces of molars, the most cavity-prone area of the mouth. They are approximately one-half the cost of a filling.

7. Do not give your child a bottle at night with juice or milk. If your child must have a bottle at bedtime, dilute it with water or use a pacifier.

8. If your child uses a pacifier, don’t deep it in any sweetener. Some dentists have taught this in the past and it is not a good idea!

9. If you live in a community where there is NO fluoride in the drinking water, ask your pediatrician or pediatric dentist about fluoride supplements as early as 6 months of age. Often, if your child needs a multi-vitamin anyway, one can be prescribed that includes fluoride as well.

10. You need to help a child under age 6 years old to do the brushing. Studies show that children under six do not have the dexterity to do a good job. One great strategy if you have a child, who likes to do everything on their own, is to let them do it first on their own. Then say now its mommy or daddy’s turn. I know that there are children who will fight you on brushing. No easy answer on how to do it.

11. Finally, the most important thing to realize is that children learn the behavior they observe. So, the reality is your dental health is just as important as your child’s. When was the last time you had your dental check up and cleaning?

I hope this report has been very educational and helpful. If you have any questions, or would like to schedule an appointment, please call 1-(318)442-9555 schedule our 10 point Healthy Teeth Check –Up!

Does Your Dentist Provide Periodontal Screening?

Three Types of Oral Bacteria That Increase Risk of Heart Attack by 300%

The American Dental Association notes that one out of every four persons will lose all their teeth to periodontal problems by the time they reach age 60.

It all starts with bacteria- the mouth has billions of them. These microscopic germs form the sticky film called plaque that clings to teeth and irritates gums. The result: PERIODONTAL DISEASE, which means your teeth begin to fall out. To make matters worse, bacteria detach themselves from dental plaque, enter the bloodstream, and become lodged in blood vessels, increasing the risk of heart attack and strokes.

Researchers at the University of Buffalo, New York School of Dental Medicine have identified the specific types of bacteria most damaging to the heart: B. forsythus, P. gingivalus, and...
C. recta. Dr. Robert Genco found that the increased risk of heart problems in persons with one or more of these bacteria was from 200-300%.

A study from the Michigan School of Dentistry goes even further and associates poor dental health with “early death from any cause.” Poor oral health is something that becomes more common as we age. Fewer immune cells are present in aged tissue, and therefore you have less protection against the bacteria, viruses, and fungi that infect and kill healthy cells.

At our office we do periodontal screenings on all new patients and we monitor all of our existing patients on a regular basis.

Sincerely,

Dr. John C. Moreau

DOES YOUR DENTIST USE SYNTHETIC BONE?
HOW TO KEEP YOUR JAWLINE AFTER YOU’VE LOST A TOOTH.

If you break a bone in your body, it will repair itself naturally. However, when a tooth and its root is pulled, you’re left with a gaping hole in your mouth that only slightly fills with bone. Over a period of time, your jawbone will shrink and atrophy. Within two years, normal bone loss averages 40% to 60%. The bone loss is both in height and width, affecting adjoining teeth as well, causing them to possibly loosen, and lose up to 20% of their supporting bone. The result can be a receding jawline, causing: loose teeth, difficulty in chewing, unattractive facial lines, and an appearance of general aging. That’s why preserving the jawbone is so important, and today, it can be accomplished so effectively and inexpensively. HTR polymer is a unique, patented synthetic bone substance which your dentist can apply in a quick, painless and uncomplicated procedure immediately after a tooth extraction. HTR polymer can prevent the long-term loss of your jawbone. Initially, HTR provides a bone-promotive environment that results in maintaining the height and width of the jawbone at the extraction site. Your own bone will grow through and around the HTR polymer structure, re-forming the original bone ridge, and providing your dentist with a solid foundation for subsequent procedures. HTR polymer also has been able to restore healthy new bone to areas where loss occurred years previously. It has proven effective in restoring bone loss from periodontal disease, bone defects, and even partially atrophied jaws. HTR polymer forms a perfect foundation, so that the placement of future implants may be an option.

FDA APPROVES NTI-TSS DENTAL APPLICATION FOR PREVENTION OF MIGRAINE PAIN.

The FDA has approved the small and simple dental device, the NTI-tss*, for the prevention of medically diagnosed migraine pain and associated tension-type headache. (*Nociceptive Trigeminal Inhibition- Tension Suppression System). In clinical trials submitted to the FDA, 82% of medically diagnosed migraine suffers had a 77% average reduction of migraine pain attacks. There are no adverse side effects to wearing the NTI-tss nightly long-term. (The NTI-tss has also been approved for the prevention of TMJ syndrome and bruxism). Over 20% of the population (and therefore, over 20% of a dentist’s patients of record) suffer from migraine and tension-type headache. With the NTI-tss, the dentist will specifically be suppressing the intensity of the nocturnal muscular pericranial intensity (a type of TMD), thereby preventing the intensity and/or frequency of migraine and headache attacks. The NTI-tss device takes advantage of the jaw-opening reflex by only allowing contact to be made on only one or two of the lower front teeth (incisors), and never allowing any of the back teeth (or canine teeth) to touch. (The prevention of allowing canine and posterior teeth from contacting is probably just as important as the lone contact on the incisors. The research shows that the contacting of either the canine or posterior teeth instantly allows a significant increase in temporalis contraction.) Thus, when the mouth is being closed, a lower incisor will touch the NTI-tss appliance, suppressing the temporalis muscles’ ability to contract! Of course, the NTI-tss appliance cannot be worn when actual eating and chewing are taking place.

DOES YOUR DENTIST OFFER THE LATEST IN COSMETIC DENTISTRY?
FULLER SENSUAL LIPS THROUGH DENTISTRY: