

DENT 378

QUIZ #6 thru #11

DUE: Midnight, Sunday, September 17th

Module 3.2

Provide your opinion of the relative importance of heredity in caries etiology compared to the significance of dental caries as an infectious process.

PACKER P. 1 "Key Features, P. 2 "Genetics"
ARTICLE P. 492 ☆

Module 3.3

Compare/Contrast the effects of fluoride varnish, office fluoride, fluoride toothpaste and mouthwash, and fluoridated water on the dentition, oral soft tissue, oral microflora, and plaque.

Root Resensitizer / NOT ALTHOUGH AS AND

	DENTIFRIM	ST	MIZOLITH	PLAQUE
14 14 VARNISH	STROUSCH [] RECOMMEND. 2600 PPM 1600 PPM	SAFE TO USE FOR KIDS (small box)	bacteriocidal	bacteriocidal (resolves into fluoride)
15 OFFICE	Enamel TARTAR FL			takes up FL in enamel
18 / 12 T P				takes up FL
19 / 14 M W				takes up FL
18 / 9 Module 3.4 H2O	1ppm			Takes up FL Resensit

*Always best post-operative & TOPICAL

Briefly explain the scientific rationale for the use of sealants that you would discuss to a parent.

88% of C in kids are PIT / FISSURE

SAFE & long term

17% of 2nd M greatest risk

57% intact @ 10 yrs.

94% @ 1yr.

Module 3.5

Briefly discuss what you would say to a parent regarding dietary counseling for a 1- to 2-year-old child after you have examined a 3-year-old sibling with severe early childhood caries.

- Your child's diet is a main contributor to their dental disease. You as a parent are responsible for what your child is offered to eat. Allowing your child to have candy + soft drinks is OK but ~~it~~ they should be given in moderation. Some parents choose to have a "Candy Night" and that is the only time the children are allowed to eat candy. Then teeth are brushed + flossed right after.
- Keep a log of everything the child eats for 5 days and come in and discuss alternatives to change the child's diet.

Module 3.6

1st show plaque w/ explorer - all the wild this is all the bugs

Briefly describe the etiology and prevention of dental disease to a 4- to 5-year-old child at the child's level of understanding.

- The bugs on your teeth have 2 favorite foods → candy and teeth! They take a bite of sugar and then they take a bite out of your teeth. But they only like to eat teeth after they eat their sugar. So to stop them from eating your teeth we have to not give them ~~any~~ ^{very} much sugar, and brush + floss them off your teeth.

Module 4.5

Briefly describe the post-operative instructions you would give to a parent following the extraction of a lower left 2nd primary molar of her/his 4-year-old child.

- Bite on rolled gauze to help stop bleeding. When gauze doesn't come out bloody then new gauze doesn't need to be placed.
- Keep cotton between child's lips until numbing wears off.
- Slight bleeding may continue for a few days, try not to disturb the area (brushing, ~~chewing~~ chewing on the area)
- Don't swish/rinse mouth for 24 hrs.
- Call if child ~~has symptoms of~~ has any severe symptoms.

FINAL EXAM

DUE: Midnight, Sunday, September 17th

Pair up with a classmate. Provide a point/counter point discussion regarding the use of a rubber cup dental prophylaxis in children. One of you should take point, the other counter point. Cite any pertinent references.

- ① Plaque + pellicle must be removed for adequate fluoride uptake (Knutson (1), Melberg (2))
 - These beliefs have been proven incorrect - plaque + pellicle doesn't reduce the fluoride uptake (Jogsten-Bechal (6))
 - It takes 7 days for the pellicle to fully mature after prophylaxis removal, and even longer before it is actively buffering dietary acids (Zer DT (9))
 - Staining isn't an etiological factor in dental disease (removing it doesn't prevent anything), children rarely have any staining or calculus
 - Pumice removes up to 0.13 μm of enamel per 10s
 - Pumice removes outer surface enamel and this fluoride rich layer is not recovered even after topical FL (14-15)
 - using toothbrush/floss as a prophylaxis is a very effective educational tool.
- ② Pumice/rubber cup is effective in removing extrinsic stains from the teeth + smoothing surfaces after calculus removal
 - cost/benefit besides being educational + reinforcing OHI is questionable.
- ③ Enamel removed that is a very tiny amount removed which is then replaced w/ fluoridated
- ④ prophylaxis alleviate fear of dental instruments/drills and manipulation of oral tissues
- ⑤ Cost ~~side~~ parents ^{may} be unwilling to pay for Toothbrush/floss prophylaxis - something they could do on their own
 - ~~many~~ 3rd party payers will reimburse for prophylaxis.