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Please share this newsletter with other family members.



Squeaky clean mouth ..a myth:

Our mouth is a functioning organ. The bacteria that we are trying to remove are, on the whole, part of our body. We are not trying to eliminate them but merely trying to keep their numbers low on a daily basis, preventing them from exercising 'mass rule'.

Most of our patients are conscientious and follow the advice given as regards to daily oral hygiene protocol.

However, recently I came across a few patients who had over exercised the dental accessories such as floss and the interdental brushes. This had in fact resulted in 'self-inflicted cavities', a new phenomenon.

"The aim of every profession should be its own extinction."

A brave statement made by a former president of the British Dental Association. Such is the human instinct for self preservation that I suspect the poor bloke never got re-elected. Legal colleagues deny the possibility of their extinction on the grounds of eternal presence of good and evil. The painful evil of dental disease is a little easier to overcome with a small injection of will power. It is a simple matter of locking up your sugar, regular wielding of your toothbrush and a daily potion of appropriate mouth wash. Not forgetting the six monthly counsel of your Dental Surgeon and the Hygienist.

The above statement has never been more true about the dental profession, than now. Advances in electric tooth brushes, fluoride as well as minerals to repair enamel included in modern tooth pastes mean that your six monthly dental check-ups should be uneventful.

I thoroughly enjoy the creative aspect of my work but at times of soul searching, I feel like a charlatan deriving a living from a human affliction that can so easily be eradicated. However, that is the state of play as it stands unless we start giving the health of our mouths as much importance as our major organs.

I often find myself telling all those who are 25 and below that their generation should be putting me out of business. Thankfully ..I mean Alas, in practice this is not the case. ©

Those of a certain age and with a lot of dental treatment in the mouth could benefit from the following regime that I have been recommending for the past 4 years.

The chemical help regime is as follows: (to be used at night)

Day one: Brush your teeth at night with neat Salt using a wet brush and very little toothpaste. Rinse after you have done all your teeth.

Day two: Brush your teeth at night with Corsodyl daily mouthwash instead of toothpaste. Don't rinse after, go straight to bed.

Day three: Brush your teeth with Peroxyl mouthwash instead of toothpaste. (Hydrogen peroxide mouth wash made by Colgate). Repeat the three day sequence from the fourth day.

Salt tooth pastes are now available online and also at some health food shops.

Journey of a tooth throughout your life:

Given the increased human life span, your teeth need to serve you almost twice as long. Even without any disease affecting it, it will succumb to wear and tear and will need dental intervention, not due to disease but to restore the worn tooth to its original shape and size for its optimal functioning.

Once a tooth receives a filling, however small, the integrity of that tooth is lost and it is a downward slope from there on. In time all fillings need replacing with inevitable increase in size and weakening of the original tooth. The larger the filling and the amount of drilling endured by the tooth, the higher the chances of nerve death and the inevitable root canal treatment. This makes the tooth dry and brittle and prone to fracture. So now, it needs covering with a crown to protect it from fracture and possible loss.

Whilst the tooth is going through all this, if the patient whose tooth it is, does not take heed and address the circumstances that lead to the tooth requiring the crown, then the crown too can fail.

Hence, it is important that all existing dental work is monitored regularly.

Given human ingenuity, there is an answer to most dental predicaments. An ultimate solution now to replace a missing tooth is 'Implants'. Where a metal peg screwed in to your jawbone replaces your original tooth. This at the moment comes at considerable cost and not an option for everyone. Sadly, implants too require a high level of maintenance and daily home care.

Tubs for brushing:

- Two minutes are not enough for everyone.
 Don't measure the time but instead focus on
 what you are doing when you brush. If all teeth
 and all tooth surfaces are cleaned well, then
 the job is done. Time is what it takes and can
 vary from patient to patient.
- Cast your memory back to your maintenance visit with the dentist and the hygienist and it will help to focus what you need to do with daily brushing. The dentist and the hygienist both use a pointed metal instrument and dig in the joint between the tooth and the gums. Do the same with your brush and you cannot go far wrong.
- In essence, think of your teeth and gums as the nails and the cuticles. The aim is to angle the brush so as to clean the cuticles.
- Flexed fore arm muscles when brushing usually means too much pressure.
- Most patients need medium bristles. Those with very sensitive teeth may use soft bristles but need to change their toothbrush more often.
- If you have sensitive teeth then you need to use the sensitive toothpaste all the time, not just when sensitivity strikes.
- Brush twice a day as few of us are good enough at it to get it spot on with once a day effort.
- Brush before breakfast. Once those bacteria get hold of the sugar from your breakfast they become too sticky and more difficult to remove after. Brush once more after, if you prefer.
- Once a month use the 'plaque disclosing' tablets or a rinse to highlight those areas you may be missing. Best done at night. These mark the plaque making it easy to brush off.
- Don't forget your tongue. Clean gently with your brush and only if you are prone to white coating every morning. Aggressive cleaning of the tongue can damage the delicate taste buds.

Does it not make sense then to maintain what you have with a little help from your dental team? Stitch in time?

Make a timely investment in your teeth. Visit your dental team regularly and follow their advice.

Better still make a commitment to become a member of Dene Dental's 'Teeth for Life Club'.

Take time to check the benefits on the back of the enclosed Price list.

Should Silver members decide to see the hygienist, they will receive 10% discount on the Hygienist's fees.

Best Dental Material:

Most of us have grown up accepting the black metal fillings as the norm. Until recently very few questioned why the commonly used filling material is such a contrast to the natural colour of our teeth.

The fact is that, despite advances in white fillings, metal fillings have stood the test of time. Unfortunately of the two metals used the Amalgam (silver filling), is no longer acceptable due to its colour and more importantly as it contains mercury which is now accepted as being toxic to our health.

The other metal and the best material to be used in the wet environment of the mouth due to its inert quality is gold. This too, has fallen out of favour with general public as well as dentist on account of its yellow colour and more recently due to its exorbitant cost.

So, the commonly used 'white fillings' are in fact a compromise and the best quality white fillings have only been around for about 10 years. They consist of resin base (acts as the glue) which is packed to varying amount by very hard ceramic particles giving it its strength.

It makes sense then to have a filling, which is 100% ceramic and no resin. That is exactly what the modern ceramic crowns are. However this involves an extra visit as they are made in the laboratory and hence come with increased costs as well as time.

It can be cost effective if multiple black fillings are replaced with ceramic ones in the same course of treatment. Please talk to me if interested.

What's new @ Dene Dental?

Smile improvement with Snap-On Smile:









Snap-On Smile: A new dental revolution

There is no shortage of people within a society who seek an improvement in their smile. The reasons and desires could range from crowded teeth, gaps between the teeth, colour of the teeth to missing teeth. Not everybody wants to undergo extensive dental treatment by means of drilling crowns, veneers, implants etc. This does not mean to say that they would not wish for a solution to their imperfect smile.

Would it not be wonderful if somebody could give you a trial smile without any injections or drilling? Imagine if you could transform your imperfect or missing teeth into a stunning, natural-looking smile by literally and simply snapping your new smile in place—without a single prick of a needle, without a drill ever coming in contact with your teeth, without a touch of adhesive, and without a hint of pain!

A new Snap-On Smile takes seconds to go from the old smile and if not desired you merely remove the new smile to go back to the old.

At Dene Dental Practice, as part of our strive to keep up-to-date with the recent and innovative techniques in dental treatment, I am offering an **exciting solution for smile improvement** that allows me to give you just that. It's Snap-On Smile®—the incredible, non-invasive smile makeover solution that's **finally within your reach!**

Currently I am proud to inform that we are the only practice in Northwood providing this service.

Comprehensive Orthodontics at affordable prices:

For the past two years, I have been providing adult teeth straightening using latest FASTBRACES® technology pioneered in Texas, USA. This in most cases takes 20 weeks to achieve the desired results.

Crowded smile – Improved with FASTBRACES® & Teeth Whitening:







One visit Smile Improvement:

Crowns, veneers remain the gold standard, however, modern white fillings are versatile in creating dramatic improvement in smile as seen below. Please visit our website www.denedental.com for more information.









(Please visit the Photo Gallery on our website for more 'Before-After' photos)

View from our doorstep:



Dean and Wilson, our practice mascots, would be very grateful if you would kindly leave a Google review for us.

Please visit our website for the link.

Cosmetic Dentistry:

Cosmetic dentistry, dentistry to improve your smile, in order to feel good is frowned by some with a particular mindset. To a limited extent I will go along with that notion. However, there is no bravado in accepting a poor smile only to cover it up with your hands on account of being self conscious.

Many smiles with heavily filled teeth or darkened teeth or crowded teeth can be improved, if all other measures have failed, by placing of traditional crowns and veneers.

I have many cases of dramatic improvements photographed. Please approach me if interested. Regular check-up is not the right time to discuss such life changing decision.

Smile Makeover with upper Porcelain Veneers & lower hand built Crowns:





Refurbishment and Salesmanship:

25 years ago, long before the appearance of corporates and their venture capitalist money, there were a few dentist like me who believed in digging deep to spruce up their work environment to the benefit of the workforce as well as the patient comfort. (even in the days when I was NHS)

I remember the salesmanship of a particular liverpudlian dental salesman in 1991. As he sat across from me at my old practice in south London, he asked just three questions which seemed completely irrelevant to the product he was trying to sell; 'Refurbishment of dental practices.'

He asked, "How long do you spend in your Loo?" followed by, "how long do you spend in your Kitchen?", finishing by asking how much in total have you spent on these two rooms in your home?

He had to say no more. I signed up to his firm's services. I had spent more money on the two rooms in my house where I spent less than 2 hours in total per day, than the figure he quoted to do up my surgery. Where I spend on average 9 hours of my day.

If only I had his knack for getting my core message across to all my patients!!!

The best complement is the one that is given by your own colleagues:

One of the two dentists who owned the practice before me, stayed on for a few months to help with the transition. One day he approached me and in his controlled voice said, "listening to you talk to your patients Vik, I think I learnt few new things." He was being modest.

But a few years later as he stood in the newly refurbished reception, reflected with true honesty, "not in a million years could I have imagined that the old garage one day could look like this." It all made it worth while.

New Price List from Jan 2017:

Please find enclosed our new price list, which will become effective from 1st of January 2017. From the outset I will urge all to look at our 'Teeth for Life Members Club'. It has now been running for four years with great success and benefits to the members.

The last Price change was in January 2015. Main changes in Jan 2017 price list are as follows:

- A fee of £75 will now be charged for all review appointments in between regular check-up appointments. This has now been brought in line to reflect the minimum time spent and the advice dispensed. Patients will be exempt from paying this if any treatment is carried out at the same visit, the cost of which exceeds £75. 'Teeth for Life Club Members' are entitled to unlimited review appointments.
- The basic fee for two small X-rays is now £35, however all further X-rays taken during the same course of treatment will now attract a further fee of £5 per X-ray. It is worthwhile mentioning that all 'Teeth for Life Club Members' in addition to other benefits are exempt from paying the above mentioned fees.
- The fee for teeth whitening is now £450. It has been at its old price of £350 for several years. It may help to know that, to date we have not had a single case of 'lack of improvement' in teeth colour. This is partly due to the perfect construction of the custom made trays. I personally construct the trays from start to finish paying attention to detail that cannot be guaranteed from a laboratory.

Teeth for Life Members' Club: The membership fee is £22.50 per month for Silver members and £32.50 per month for Gold members. I would encourage all to look at the premium and the benefits of becoming a member of an ever growing club. Please note that the substantial membership discounts of 10% for Silver members and 15% for Gold members, take the 2017 fees to below the 2015 fee scale.

Wisdom in staying with the same dentist:

In the 80's a controversial dental academic from the London hospital was ostracised by the dental profession for making a statement about dentistry, which was misquoted by the media. The media published his personal opinion in which he stated that, the more often you visit the dentist the more likely you are to be recommended invasive treatment. The word they missed out was DIFFERENT. The more often you visit a 'different' dentist...

There is some truth in what he was trying to say. Despite the modern emphasis on evidence based approach to provision of health care, dentistry can be subjective. Each dentist will have his or her own way of reaching the final goal of healthy mouths.

Once you develop trust in a dentist, the best outcome is achieved by sticking to the same professional for your future dental care.

Recently, I had a patient who approached me after having been told by two separate dentists that she needed several fillings. She was in no pain. After a thorough examination, in my opinion, I could not find any clinical evidence to recommend the same treatment.

So, what it boils down to is communication. If you are able to communicate a logical explanation to your treatment, then most sensible patients will understand and accept your approach to managing their oral health.

When in doubt, I practice the dentistry of 'wait and see'. The only prerequisite to this approach is the hard and fast commitment of the patient to regular attendance for reviews. If you as a patient don't play your part in this well intended approach to your oral health, the dentist can face accusation of being negligent!!!

Who is new?

By now, most of you will have heard that Mandy after four years has moved on to pastures new and Sheila has retired. It is crucial that we find the correct replacement. The new hygienist will be well vetted but on a probationary period. We will seek your feedback in terms of a few minutes of your time at the end of your session with her. This will help us to finalise the right candidate.

Online Appointment Booking System:

In keeping with our desire to keep upto-date with modern services we have created an online booking system for appointments.

Our patients can now use an electronic link emailed to them to book their future appointment at their convenience. Our Online Appointment System Booking (also accessed from our website) enables new and existing patients to independently book appointments 24 hours a day at their convenience. All appointments are booked "live" into our diary. Patients receive an automated email confirming that their appointment has been registered in our appointment book.

Politics and closing down of my dental college:

In my last newsletter I mentioned that I started my training at the Royal Dental Hospital (based in Leicester Square) but completed it at King's College London. The story goes that the Department of Health made a prediction in the late 70's, based on advances in dentistry and provision of good dental care that, in the UK there will not be the need for as many dentists in the future. So, it made sense to close down some dental schools, especially those that were housed in prime central London real-estate.

Yet in 2016, there are three more new dental schools than in the 80's churning out large numbers of Dentists. Of course, all funded by the government. I sincerely hope that they know something that I don't.

The raw material for the business of dentistry is 'Dental Disease'. If this is on the wane (It certainly appears to be in Northwood) then the overproduction of man power could result in desperate dentists with huge investments in their practices looking hard for work. In my opinion this can only have deleterious effect on the patient dentist relationship.

Media and dentistry:

Not so long ago a national newspaper published two front page articles relating to dentistry. One was to do with research carried out in the States regarding the efficacy of flossing and the other was the need for regular checks. I am open minded to new research but firstly, flossing as a dental accessory does not need researching into. It is common sense. It very efficiently and cost effectively, addresses plaque removal from the surfaces of the teeth which your toothbrush cannot reach. What has to be accepted and I solemnly confess to, is the lack of effort made by the dental profession as a whole in training the patient in the correct use of interdental

accessories including the Floss. At our practice, we hope to address this by encouraging regular visits to the hygienist. Secondly, some of you ask how often they should visit me or the hygienist. As a cross section of the patient base it can vary from every 3 months to once every 2 years. Latter usually applies to those 25 or under. Six monthly visits to the dentist interspersed with three monthly visits to see the hygienist has stood the test of time. To the skeptics I would say, in the case of oral health overkill is preferable. If you can afford the time and money, stick to the current guidelines.

Memorable six days in India:

I would like to thank all those patients whose appointments I had to cancel at a week's notice at the end of August. I got a call from my sister in India who was concerned about the rapid deterioration in both my parents' health.

I cancelled my week and went over to see them.

My mother had suffered from misdiagnosed urinary infection for a month, which at that age knocked her for six. Thankfully, she has recovered but is now almost bed ridden due to lack of strength.

My father had weakened and bedridden by personal choice. Two years ago he had cut his meals down to once a day. 10 days before I reached India he had stopped eating solids and was drinking a few sips of liquid diet per day. Due to his fading memory I had to 're-introduce' myself to him. His sense of humour had not diminished. Looking at my face for a few seconds he turned to my sister and said, "He didn't get that nose from me". All three of us burst out laughing. When I suggested that not eating food is causing him to become weak, his response was "whom I am going to wrestle by gaining strength?" As a retired GP he knew what he was doing. Without saying as much he had given us instructions to exercise what in the hospitals is known as DNR.

I spent the six days having my breakfast, lunch and dinner alternating between mum and dad's rooms. Very little dialogue, just each other's company. In my entire adult life I do not remember spending such a meaningful time with my parents. Most of my adult life was spent away at university and then practicing in London as they grew quietly old in Manchester before retiring to India in 2004.

On my last day as I bid farewell they both seemed at peace and contented. I hope my visit had a part to play.

Home of Dentistry without Anxiety, Fear or Pain

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