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DAVENPORT DENTAL STUDIO

DENTAL FEAR - Does the thought of visiting your dentist's office give you the heebie-jeebies? You're not alone. "About 50 percent of Americans admit some fear of dental procedures and about 10 percent have so much fear and anxiety that they actually avoid dental care," says Sheela Raja, PhD, director of clinical behavioral sciences at the Colleges of Dentistry and Medicine at the University of Illinois at Chicago.

What's even scarier than dental procedures? Skipping out on important treatments so that you end up doing more damage to your [dental health](#). If your dental phobias are threatening your tooth health, read about these "terrifying" procedures that actually aren't that terrifying — and find out how to ease the discomfort and quell your fears.

1. Frightening Fillings

Got a cavity? This small hole in your tooth, which is usually caused by germ-containing plaque, is simple to treat. But for many people, the sight of

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the needle dentists use to numb the mouth before giving a **filling** can make treating cavities simply unbearable. Keep this in mind: If you don't treat cavities early, they grow into larger holes, the bacteria can cause even more damage, and you may end up needing a more-complicated root canal. "One helpful tip to lessen anxiety is to bring along an iPod to distract you and help you relax," says Raja. Also try to remember that, while the sight of a needle may be scary, it's actually used to help offset pain.

2.The Dreaded Root Canal

During a root canal, damaged tissue is cleaned out from inside a tooth. It's a long procedure (sometimes lasting about two hours), but it can save your tooth. So why do so many dental patients fret over root canals? "People with dental phobias may have had a bad dental experience in the past," says Alyson Hope Koslow, DDS, a clinical assistant professor of restorative dentistry at the University of Illinois at Chicago College of Dentistry. "But with modern dental anesthesia, a root canal is no more painful than getting

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a [cavity](#) filled." If the thought of being stuck in the dentist's chair for a long time is what's filling you with dread, Dr. Koslow suggests breaking it down into shorter, manageable visits.

3.Extra-Scary X-Rays

[Dental X-rays](#) can help your dentist find little problems before they become bigger problems. But for people with a strong gag reflex or fear of radiation exposure, the process can sound downright dreadful. "In all dental procedures, your dentist should take the time to ask if you are afraid and why," says Raja. "If he doesn't ask, you should tell him." Your dentist can use a little topical anesthesia to help control your gag reflex during this short dental procedure. It also may help to remember that the actual radiation exposure from dental X-rays is relatively minimal compared with the radiation exposure you get naturally each day.

4.Cringe-Worthy Crowns

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If your dentist recommends that you get a [dental crown](#), it's so you can protect a worn-out or weakened tooth. The most intimidating part about the procedure? The molding dentists use to make an impression for your crown. "Many people fear that they will gag, choke, or have trouble breathing when molding material is used inside the mouth," Koslow says. "Some ways your dentist can make this dental procedure easier on you are to have you sit upright, use a faster-setting mold, stand in front of you, and give you ongoing reassurance.

5. Unnerving Dental Implants

[Dental implants](#) are used to replace missing teeth. These "fakes" look natural and are stable because they're molded to your bone below your gums (or they may be used to attach full or partial dentures). But no matter how great the end result, you may fear implants because they involve surgery — and there's a long healing process between the surgery to place the anchor and

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the actual placement of the implants. The best way to work through this fear is to take time to discuss your concerns.

6. Tooth Extractions (**Eek!**)

If your dentist tells you that you should undergo a tooth extraction, here's what she means: To safeguard your dental health, she'll need to pull one of your pearly whites. A tooth gets pulled when it's beyond saving and is causing you [pain](#), or if it's a source of infection. "Fear of blood, needles, and the sounds of the dental procedure may all come into play when patients are anxious about getting a tooth pulled," notes Raja.

A certain amount of bleeding is to be expected and pain should be able to be controlled by the anesthetic. "Ask your doctor if you can have a pain signal to stop the procedure if you feel pain," suggests Raja.

How to Ease Your Dental Anxiety

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If your [fear of dental procedures](#) is interfering with your tooth health, talk to your dentist. With modern dental anesthetics and a good patient-dentist relationship, you should be able to get through most dental procedures. "In some cases, your dentist may be able to help you by giving you a sedative", says Koslow

By Chris Iliades, MD

Psychological Approaches for Tackling Dental Fears

Dentists often adapt approaches from children's dentistry when helping adult phobic patients. And although they were originally invented with children in mind, there's nothing intrinsically childish about them.

Baby Steps or Giant Strides?

Frequently used techniques include:

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- the use of [non-threatening language \(and body language\)](#)
- interactive approaches based on [tell-show-do](#) techniques (direct interaction)
- [structured time](#) (taking frequent breaks)
- positive reinforcement (making positive comments)

[Desensitisation and rehearsals](#) are also frequently used, both in formal and in informal ways.

What all these approaches have in common is that they are based on *rapport* and *interactivity*. They're aimed at building confidence and trust. They are about putting you in control.

By going slow and taking baby steps, many people find that they make giant strides and gain confidence quite rapidly!

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Blue is the new white

The physical *environment* also plays an important role in easing fears. For example, the dental team wearing non-clinical clothes instead of the “white coat”, getting rid of the smells traditionally associated with dentistry, and playing music in the background can all help people by removing and replacing frightening stimuli. Some people also enjoy more obvious [distraction techniques](#) such as watching movies or listening to their own music during treatment.

It's a kind of magic...

More specialised methods of help include [hypnosis](#) and [systematic desensitisation](#). Systematic desensitisation is not used all that often by dentists because of the amount of time it can take and the additional training required. For hypnosis, the dentist needs special training, so it is quite rare to

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actually be offered this. But [informal hypnosis](#) is quite commonly used, often without the dentist even realising they're using hypnosis.

There are other ways of making people feel at ease – for example, using humour or being particularly calm and confident. These are to some extent dependent on personality characteristics though and not always techniques that can be learned. Another major factor is *trust* – dentists who strongly believe in your ability to cope well are likely to be much more successful using psychological approaches. Trust begets trust. And although trust is a very powerful technique, again it takes a special kind of personality to put deep trust into another person's ability to cope.

Relaxation and Systematic Desensitisation

Much of what has been written in journals and books on helping adults with dental fears is about using [relaxation techniques](#) such as belly breathing, or behavioural techniques like [systematic desensitisation](#), or thought-based

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techniques such as *cognitive restructuring* (that is, challenging your thoughts about dentists and dentistry).

In practice, some of these techniques can be quite cumbersome and slow (this website is an example of an attempt at cognitive restructuring – and note how long it takes to read it!). They can take weeks or months to have an effect. Not surprisingly, not many dentists use them on a regular basis.

Even when a “traditional” cognitive-behavioural approach is used, rapport, confidence, trust and control is what it boils down to:

“It is interesting to take into account the views of people who have been provided with behavioural treatments for dental fear. From a psychologist’s perspective, techniques such as graded exposure, relaxation techniques or challenging catastrophic thinking are important. However, Gerry Kent, a clinical psychologist from the University of Sheffield UK, notes that from the

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patient's perspective, interventions can be conceptualized quite differently. He argues that high levels of anxiety or phobia should not be considered as residing simply within the individual or in the individual's perceptions of dental care, but more within the relationship with the dentist. For example, when patients who had successfully completed a cognitive-behavioural programme were asked what had helped them to tolerate treatment, they mentioned factors such as the provision of information, the time taken, being put in control by the dentist, and the dentist understanding and listening to their concerns. Such findings suggest that an interpersonal model of anxiety and anxiety-reduction is useful when trying to understand and treat dental fears.”
(from [Wikipedia – Dental Fear](#))

What Can Help? - Ways of Tackling Dental Fears

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In the What Can Help section, you can find information on the three main things that can help with overcoming dental phobias and fears:

1. psychological – the way the dentist acts and communicates, and specific techniques dentists can use to help
2. technology and gadgets – new and not-so-new inventions which can make dental treatment more enjoyable
3. sedation – using drugs to make you feel relaxed.

For dentists, there is also a fourth way, and that is local anaesthesia technique (giving comfortable and effective numbing).

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The way you tackle your fears needs to be tailored to you as an individual. But generally speaking, we can look at tackling fears (or “dental anxiety management” in dentist-speak) as being a bit like a pyramid:

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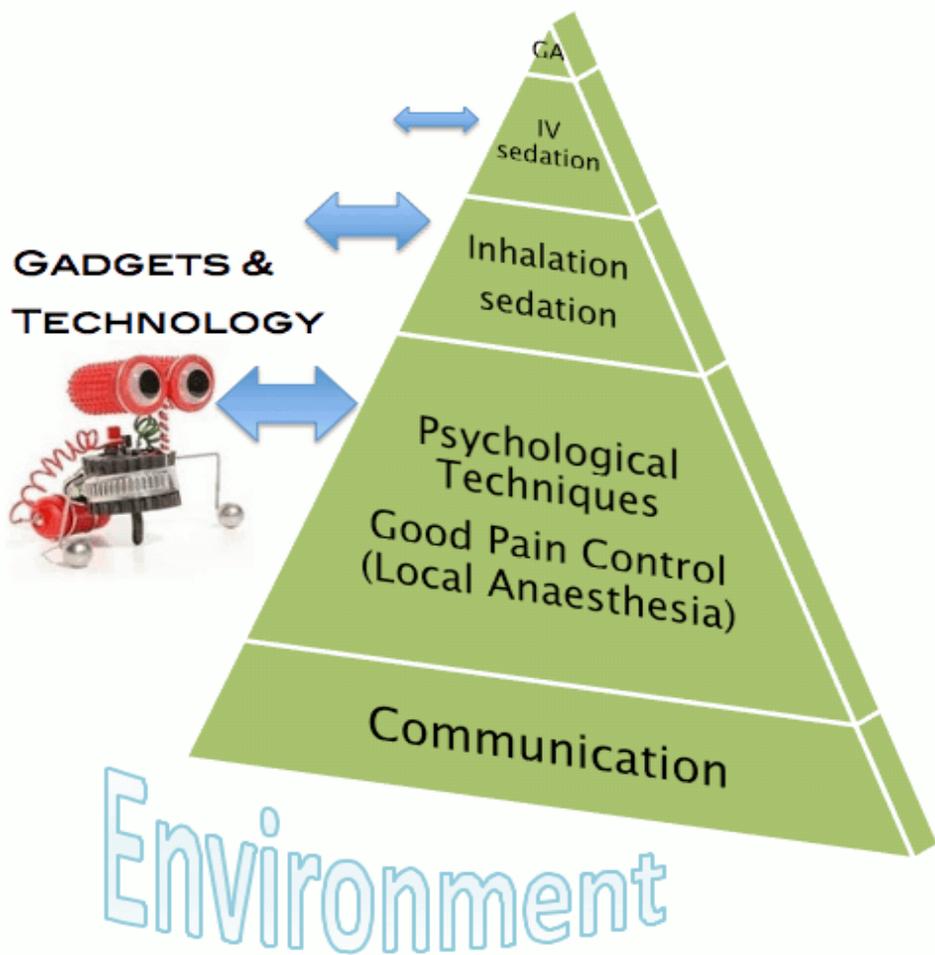
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The Environment

The [dental environment](#), despite being of such huge importance, is often overlooked when it comes to dental anxiety. The environment sets the tone for the whole dental experience – first impressions do count! While we cannot do away with modern dental equipment, many people with dental fears find it really important that the rest of the room doesn't have a "clinical" feel to it. This means, for example, instruments being hidden from sight as much as possible, artwork instead of photos of smile makeovers, friendly colour schemes, music playing in the background, dentists and staff not dressing in traditional medical outfits, and doing away with the "typical" smells associated with dentistry as far as possible.

Communication

The foundation of the pyramid is *communication*. This means the way your dentist interacts with you (and the way you interact with your dentist). You

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need to feel at ease with your dentist if you want to overcome your fears, and your dentist needs to know what you fear and how they may be able to help you. Communication also means things like rapport, body language, and using non-threatening language that you can understand. Rapport (a harmonious connection) also implies a relationship of equals, where you don't perceive your dentist as a threatening or a condescending figure, but as a partner in your care. Communication means that you do things together with your dentist, rather than your dentist doing things to you.

You should only move on to more concrete techniques and options once rapport has been established.

The least invasive approach – that is, psychological techniques – should be considered and tried first.

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Psychological Approaches

Psychological approaches include techniques such as tell-show-do, structured time, desensitisation, and other options which you can read about on this site (see the right navigation box). In dentist-speak, these are referred to as *behaviour management*. While “behaviour management” may sound ominous, it simply means that your dentist will let you gradually get used to new, unfamiliar things, take things slowly, explain things to you, let you know what s/he is doing and what to expect, and so forth.

An integral part of this approach is that any treatment is delivered comfortably and gently.

Inhalation Sedation

If psychological techniques alone do not help you enough, there are then various sedation options. [Inhalation sedation](#) (laughing gas) is great for

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making you feel more relaxed, and it is very much a “participation technique” suited to people who like to feel in control of situations.

IV Sedation

On the other hand, [IV \(intravenous\) sedation](#) may be better suited to those who are more willing to entrust control to another person. It can produce a level of sedation so deep that you may not remember much, or even nothing at all, of what happens during treatment.

IV sedation can also be a good option if you need lots of work doing and you are really worried about it. In this case, you might be better served getting things under control using IV sedation, and then experiment with other methods when you require just a bit of maintenance work. Having said that, if you find yourself a really good dentist, he or she might be able to treat you using other techniques alone, which will be less expensive.

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Remembering the treatment and having positive experiences will help you build confidence.

Technology and Gadgets

Also, there have been some exciting technological advances and innovations which can really help with specific fears. For example, the [wand](#) has been a real blessing for people with needle phobia, who in the past might have opted for sedation. Handpieces (“drills”) have become quieter, and there is even a device now which allows people to literally stop the handpiece at the press of a button (although it isn’t widely available yet) – ideal for the many people who fear loss of control. Minimally invasive methods such as air abrasion and ozone therapy also hold much promise for delivering gentle care and ensuring that children do not grow up to develop dental fears.

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You can find out more about these technologies, as well as about psychological and sedation approaches, by exploring the pages in the right navigation box.

anxiety, fear and phobia

A distinction has been made between dental anxiety, dental fear, and dental phobia.

- DENTAL ANXIETY is a reaction to an UNKNOWN danger. Anxiety is extremely common, and most people experience some degree of dental anxiety especially if they're about to have something done which they've never experienced before. Basically, it's a fear of the unknown.
- DENTAL FEAR is a reaction to a known danger ("I know what the dentist is going to do, been there, done that – I'm scared!!"), which involves a fight-or-flight response when confronted with the threatening stimulus.
- DENTAL PHOBIA is basically the same as fear, only much stronger ("I know what happens when I go to the dentist – there's no way I'm going back if I can help it.

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I'm so terrified I feel sick"). The fight-or-flight response occurs when just thinking about or being reminded of the threatening situation. Someone with a dental phobia will *avoid* dental care at all costs until either a physical problem or the psychological burden of the phobia becomes overwhelming.

There are other classification schemes; for example, Weiner and Sheehan (1990) distinguish two types of dental anxiety: exogenous (from the outside) and endogenous (from the inside). Exogenous dental anxiety is defined as anxiety due to traumatic dental experiences. Endogenous dental anxiety is thought to have originated from other anxiety disorders.

Similarly, the University of Washington Categories of Dental Fear distinguishes between 4 categories of dental fear:

1. Fear of Specific Stimuli
2. Distrust of Dental Personnel
3. Generalized Anxiety

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4. Fear of Catastrophy (fear of a medical emergency)

The first two of these would usually have been caused by previous bad experiences (“exogenous”), whereas generalised anxiety and fear of catastrophe could be classed as endogenous. These distinctions aren’t always helpful, though. For example, someone may have experienced a real medical emergency in the past during dental treatment (exceedingly rare, but not impossible, e. g. in the case of a genuine severe allergic reaction). In this case, the fear of catastrophe would be due to a previous bad experience. Also, when someone is asked what they fear about the dentist and their answer is “everything”, dentists may assume that this is a sign of generalised anxiety, even though the person may not be particularly anxious in everyday life.

Of course, people may fall into more than one category. Exogenous dental anxiety may be perceived as being more “irrational” than fears caused by bad dental experiences. But in my experience, once we know a person’s history and the causes of their anxiety, there is usually a very rational explanation behind it (although where childhood trauma is concerned, people may not remember the events that led up to their anxiety).

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It is always safest to assume that “irrational” fears are not irrational at all, but caused by very real events

What are the most common causes of dental phobia?

- *Bad experiences:* Dental phobia is most often caused by bad, or in some cases horrific experiences at a dentist’s (studies suggest that this is true for about 80 -85% of dental phobias, but there are difficulties with obtaining representative samples). This not only includes painful dental visits, but also psychological behaviours such as being humiliated by a dentist.
- *A history of abuse:* Dental phobia is also common in people who have been sexually abused. A history of bullying or having been physically or emotionally abused by a person in authority may also contribute to developing dental phobia, especially in combination with bad experiences with dentists.
- *Uncaring dentist:* It is often thought, even among dental professionals, that it is the fear of pain that keeps people from seeing a dentist. But even where

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pain is the person's major concern, it is not pain per se that is necessarily the problem. Otherwise, dental phobics would not avoid the dentist even when in pain from toothache. Rather, it is pain inflicted by a dentist who is perceived as cold and controlling that has a huge psychological impact. Pain caused by a dentist who is perceived as caring is much less likely to result in psychological trauma (Weiner et al, 1999).

- *Humiliation:* Other causes of dental phobia include insensitive, humiliating remarks by a dentist or hygienist. In fact, insensitive remarks and the intense feelings of humiliation they provoke are one of the main factors which can cause or contribute to a dental phobia. Human beings are social animals, and negative social evaluation will upset most people, apart from the most thick-skinned individuals. If you're the sensitive type, negative evaluation can be shattering.
- *Vicarious learning:* Another cause of dental anxiety is observational learning. This appears to be of only minor importance, judging by our forum and by the available research (e.g. Townend, Dimigen and Diane, 1999). If a parent

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or other caregiver is afraid of dentists, children may pick up on this and learn to be afraid as well, even in the absence of bad experiences. Hearing other people's horror stories about visits to the psychodentist can have a similar effect. Also, the depiction of "the dentist" in the media (especially children's films/cartoons and comedies, and of course horror movies) can cause people to develop dental fears. Examples include "Horton Hears a Who" and "Nick at Night".

- *Preparedness:* People may be inherently "prepared" to learn certain phobias, such as needle phobia. For millions of years people who quickly learned to avoid snakes, heights, and lightning (and sharp objects, such as needles, which would not have been sterilized in those days, apart from giving you a nasty sting!) probably had a good chance to survive and to transmit their genes. So it may not take a particularly painful encounter with a needle to develop a phobia.
- *Post-Traumatic Stress:* Research suggests that people who've had horrific dental experiences (unsurprisingly) suffer from symptoms typically reported

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by people with post-traumatic stress disorder (PTSD). This is characterized by intrusive thoughts of the bad experience and nightmares about dentists or dental situations.

The impact of dental phobia on daily life

Dental phobia can have wide-ranging consequences on a person's life. Not only does their dental health suffer, but dental phobia may lead to anxiety and depression. Laughing out loud is out of the question – too hard to hide one's teeth... Depending on how obvious the damage is, you may avoid meeting people, even close friends, due to embarrassment over your teeth, or avoid jobs which involve contact with the public. Loss of self-esteem over not being able to do something as "simple" as going to a dentist and intense feelings of guilt over not having looked after one's teeth properly are also very common. Dental phobia sufferers may also avoid doctors for fear that they might want to have a look at their tongue or throat and suggest that a visit to a dentist might not go amiss.

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If you suffer with dental phobia, you'll be inclined to think that nobody else feels the way you do – after all, who else would rather be dead or prefer a global nuclear disaster in which everyone dies to meeting up with a dentist?

Actually, quite a lot of people 😊! While there are no reliable statistics (after all, few dental phobics will freely admit to never visiting a dentist... that's if they hang around to complete the questionnaire!), the most conservative estimates reckon that 5% of people in Western countries avoid dentists altogether due to fear. And many more are anxious about dentistry.

However, most people actually don't mind going to the dentist. There is a reason for this – nowadays, dentistry can be pain-free and there are many personable, kind and compassionate dental professionals around. Many if not most people who've suffered with dental fears and phobias reckon that having found the right dentist for them has made all the difference. This is especially

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true when fears were caused by previous bad experiences.

What can anxious patients do to prepare themselves for dental treatment?

Obviously, if a person has a fear of dentists, they should minimize the need for anything but routine dental visits by practicing good [oral hygiene](#). A person cannot drink numerous sugar flavored soft drinks or sports drinks, chew gum, suck on mints containing sugar, not [brush](#) or [floss](#), fail to use [fluoride](#) and then be surprised if they have dental problems. Regular [dental cleanings](#) can help catch small problems before they become big problems. Notwithstanding, if one has a problem and must see the dentist, they want to practice a little positive psychology. If one has had a negative dental experience in the past, especially in the distant past, be aware much has changed in dentistry in a

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short time. New and older dentists are using more modern equipment, better materials and up-to-date methods to ensure better patient comfort.

Secondly, patients who presently don't have a dentist and need to [find a dentist](#) should ask around for referrals and be prepared to ask any potential new dentist [specific questions](#). Thirdly, for those who currently have a regular dentist, inform them of your fears. Don't expect them to know that you have a fear of the dentist. Most dentists will try hard to be kind, caring, gentle and painless, but I assure you they will try even harder if they are aware of your fears.

Fourth, if a patient considers their dental fears beyond normal help, they shouldn't hesitate to ask for a referral to someone who can administer conscious or IV sedation or uses nitrous oxide, if their dentist isn't trained in these areas.

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Fifth, patients should never self-medicate prior to dental treatment without informing their dentist. It could pose a danger if the dentist administers anesthesia or other medications.

Sixth, think positively! Once a patient convinces themselves that treatment is necessary, and the dental problem will only worsen if gone untreated and may require more [difficult procedures](#), which could cost more, they often accept the situation begrudgingly and overcome some of their initial hesitations.

Seventh, the patient must remember that the dentist is their partner in achieving good oral health. Never consider your dentist an adversary but rather a partner.

IGNORING DENTAL PROBLEMS

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If your dentist gives you a treatment plan for dental work that you need to have done, you should focus on getting your teeth fixed as soon as possible. Even cavities continue to get bigger. If they get big enough to reach the nerve in your tooth, your only options would be to have a root canal or have the tooth extracted.

Good oral hygiene is important, not only for looks, but for general health as well. Poor oral hygiene can lead to a variety of dental and medical problems such as gum disease, infection, bone loss, heart disease, strokes and more. Regular check ups and cleanings can prevent these problems as well as provide you with good oral hygiene.

1. To Prevent Oral Cancer

According to The Oral Cancer Foundation, someone dies from [oral cancer](#), every hour of every day in the United States alone. When you have your dental

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cleaning, your dentist is also screening you for oral cancer, which is highly curable if diagnosed early.

2. To Prevent Gum Disease

Gum disease is an infection in the gum tissues and bone that keep your teeth in place and is one of the leading causes of adult tooth loss. If diagnosed early, it can be treated and reversed. If treatment is not received, a more serious and advanced stage of gum disease may follow. Regular dental cleanings and check ups, flossing daily and brushing twice a day are key factors in preventing gum disease.

3. To Help Maintain Good Physical Health

Recent studies have linked heart attacks and strokes to gum disease, resulting from poor oral hygiene. A dental cleaning every 6 months helps to keep your teeth and gums healthy and could possibly reduce your risk of heart disease and strokes.

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4. To Keep Your Teeth

Since gum disease is one of the leading causes of tooth loss in adults, regular dental check ups and cleanings, brushing and flossing are vital to keeping as many teeth as you can. Keeping your teeth means better chewing function and ultimately, better health.

5. To Detect Dental Problems Early

Your dentist and hygienist will be able to detect any early signs of problems with your teeth or gums. Early detection of cavities, broken fillings and gum disease are easily treatable. If these problems go untreated, root canals, gum surgery and removal of teeth could become the only treatment options available.

6. To Maintain Good Oral Health

Your dental hygienist will help to ensure that you are maintaining your good oral health by visual examination and comparing your previous dental check

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ups. If you are falling off track with your oral hygiene he / she will help put you back on the right path.

7. To Use Your Dental Insurance Plan

Dental insurance plans usually pay for all or most of the cost of dental cleanings and check ups every six months. Take advantage of this and save a lot of money in the long run by avoiding costly dental procedures that can result from poor oral hygiene.

8. To Create a Treatment Plan

If your dentist diagnoses any problems in your mouth, he /she will most likely give you a treatment plan. This treatment plan should have the cost of each procedure that you will need, so that you can discuss financial arrangements with the front office.

9. To Have a Bright and White Smile

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Your dental hygienist can remove most tobacco, coffee and tea stains. During your cleaning, your hygienist will also polish your teeth to a beautiful shine. The result? A whiter and brighter smile!

10. To Prevent Bad Breath

Dental studies show that about 85 percent of people with persistent bad breath, also known as halitosis have a dental problem that is to blame. Good oral hygiene is essential in preventing [bad breath](#). Regular check ups and cleanings are the best way to make sure that you are maintaining good oral hygiene.

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