Mission of Mercy 2012

On June 8, Dr. Eric Jackson, our office manager Tammie, and dental assistant Jenny all attended the 2nd annual Illinois Mission of Mercy (MOM) in Greyslake, Illinois at the Lake County Fairgrounds. This fantastic event is sponsored by the Illinois State Dental Society Foundation and provides completely free dental, vision, and medical care to anyone in need. This year over 1,100 volunteers delivered over $1.13 million in dental, vision, and medical care!!! Specifically, the dental component of the day was a wild success!

Here are some of the dental totals:
- 2,082 patients were seen
- 1,123 Fillings were completed
- 811 Cleanings were completed
- 878 Extractions were completed
- 41 Root Canals were completed
- 98 partial dentures were made on site!

Compared to the inaugural event in 2011, the 2012 Mission of Mercy provided care to 129 more people and provided $130,000 more in free dental care. It was a fantastic day for a fantastic cause!! For more information on the ISDS Mission of Mercy, visit http://www.isds.org/isdsfoundation/imom.asp

Can you Handle the Tooth?

38.5 Total days an average American spends brushing teeth over a lifetime.

Thomas McKean was the last to sign the Declaration of Independence in January 1777.

A toothpick is the object most often choked on by Americans.

The Liberty Bell sounded from the tower of Independence Hall on July 8, 1776, summoning citizens together for the first public reading of the Declaration of Independence by Colonel John Nixon.

Like fingerprints, everyone’s tongue print is different.

President John Adams, President Thomas Jefferson, and President James Monroe all passed away on July 4th.

32% of Americans cite bad breath as the least attractive trait of their co-workers.

Calvin Coolidge, the 30th President, was born in Vermont on July 4, 1872.

The average American eats around 5 1/2 gallons of ice cream a year, more than any other nationality. The late President Reagan declared July National Ice Cream month. It is also the month the most ice cream is sold.
We are happy to announce that one of our team members, Mary, will be attending an Alliance for Smiles Medical Mission to Zhangzhou, China this July. The purpose of Alliance for Smiles is to repair children’s broken smiles by providing free comprehensive treatment for cleft lip and palate deformities in underserved areas of the world. Alliance for Smiles is able to bring smiles to children all over the world because of the generosity of those that donate. There are many ways to donate to Alliance for Smiles, funds, car donation, volunteer time, and even medical supplies. We would like to wish Mary a very safe and successful trip to China! God bless you Mary!

If you are interested in finding out more about Alliance for Smiles you can visit their website at www.AllianceForSmiles.org.

Mastership in the Academy of General Dentistry  By Tammie P. Watts

Congratulations to our Dr. Eric Jackson on being awarded Mastership in the Academy of General Dentistry (AGD)! This explains the new "MAGD" after his name. In June, Dr. Eric and his wife Lauren flew to the AGD’s national meeting in Philadelphia, PA where he was bestowed this great accolade. In the 60 year history of the AGD (1962), only 2,818 have earned Mastership. That’s less than 1% of all dentists. Only 96 other dentists in the world achieved Mastership in the AGD in 2012.

To attain Mastership, members of the Academy must first have attained Fellowship, and then earn an additional 600 approved continuing education credits in each of the approved dental disciplines. Including the 500 required Fellowship hours of continuing education, a total of 1100 hours must be completed. Dr. Jackson has been working towards his Mastership for the past 6 years and we are all quite proud. Congratulations to Dr. Jackson on this great achievement!

For more information regarding Mastership or the Academy of General Dentistry, visit their website at www.agd.org.
Recurrent herpes labialis -RHL, (cold sores) and recurrent aphthous ulcers - RAU, (canker sores) are two of the most common oral lesions experienced in the general population. This article will discuss etiology, appearance and possible treatment.

Recurrent herpes lesions are experienced by up to 40% of the adult population and up to 80% of adults carry the virus latently and test seropositive by the age of 30. Many of the seropositive never experience an outbreak during their life. RHL lesions are caused by the herpes simplex virus type 1 and transmitted by direct contact with the secretions from herpetic lesions. This can happen as early as the first time a newborn is hugged and kissed by a Grandparent in the hospital after delivery. Once acquired, the virus lies dormant in nerve endings until reactivation is triggered by stressors. These stressors can include anxiety, daily stress, infection, common cold, sunlight, mensturation, and even dental treatment. Recurrent herpetic lesions present most commonly around the lips at the junction of the red border of the lips and the skin on the face. They are preceded by a tight itchy feeling and eventually appear as numerous small micro-blisters that coalesce and form a surface crusty scab 5-10 mm round. They are self-limiting and typically heal without treatment or scarring within 10-14 days. It is important to note that the liquid under the scab is filled with very potent live virus particles which if contact occurs, can easily affect others and even other areas of your own mouth. Don’t share drinking glasses, change tooth brushes, be careful with hugs and kisses. A second less common location is a small cluster of very painful blisters on the hard palate that never scabs over. Treatment for lesions of the lips include an OTC paste called Abreva. Patients report good success if applied 4-6 times a day starting at the first tightness or itching. Prescriptions include antiviral, both topical creams and systemic pills. It is important to note that any treatment will not prevent outbreaks, but will only lessen the severity and length of the outbreak. Never use the pastes interiorly.

Recurrent aphthous ulcers are less common than RHL however it is my experience that for the affected (5%-60% of the population depending on the study) outbreaks are more frequent with some patients unfortunately progressing from one outbreak right into the next with barely a pain free period. Etiology of canker sores is not fully understood. They are not viral or bacterial however they appear to be an autoimmune breakdown in the surface lining of the cheeks and gums. They appear as 1mm-10mm raised red ovals with cratered grayish-yellow centers. They self heal in 7-10 days. Triggers of aphthous ulcers include sensitivity to Sodium Lauryl Sulfate (the foaming agent in tooth pastes), Iron and zinc deficiency, hypersensitivity to dairy and gluten, stress, trauma and genetics. Treatments include OTC pain relieving topical gels (Orajel, Kank-A), and prescription rinses, steroid creams. Non-foaming tooth pastes (Synsodyne and Verve) help prevent recurrent outbreaks.

If you have any questions feel free to ask Dr. Wascher, Dr. Jackson, or your Hygienist.

**Tooth Fairy Day!!**

Next **Tooth Fairy Day is Friday, September 21, 2012 from 9:00 am to 1:00 pm.** Call to schedule your reservation today! Tooth Fairy Day is a free event for everyone, no need to be patient.

During Tooth Fairy Day, Parents and child accompany the dentist to one of the rooms where the child can go for a ride in the dental chair, squirt water and air from the instruments and become familiar with being in the dental office. The child then gets to meet the Tooth Fairy. The child receives a goodie bag and picture with the Tooth Fairy to take home.
Enter to Win a 32GB Apple I-Pod Touch

Win a 32GB Apple I-Pod Touch courtesy of Oral Health Care Professionals, LLC. You have a chance to enter the Bi-Annual drawing three different ways.

Three ways to enter:
1. Send us an e-mail from your e-mail address with the words I-Pod Touch in the subject line and enter your name in the e-mail and we will enter your name in the drawing.
2. “Like” Oral Health Care Professionals, LLC on Facebook.
   - Link from our website for convenience (www.OralHealthCareProfessionals.com)
3. Become a Twitter Follower of our tweets.
   - Link from our website for convenience (www.OralHealthCareProfessionals.com)

Pick 1, 2 or complete all 3 for maximum entries and chances to win! Drawings are held June 1st and December 31st of each year. Winners will be notified by the office. Non-Winners will continue to be eligible for the following contest. Good Luck!!

Reminder for College Students

It’s hard to believe that we’re already midway through collegiate summer break. With only six weeks left before some schools resume their classes, is your college student overdue for a dental cleaning? Give the office a call and we’ll get those teeth cleaned and polished before fall semester begins!

Did you get your 2012-2013 Dental School Form Completed?

Elementary schools will be back in session before you know it! Don’t forget about the required Illinois Dental Examination form! All Illinois children in kindergarten and grades 2 & 6 are required to have an oral health evaluation by a licensed dentist. This requirement includes all public, private, and parochial schools. Each child is required to present proof of examination by a dentist prior to May 15 of the school year. These examinations must have been completed within 18 months prior to the May 15 deadline. We always have extra school forms on hand here at the office. Give us a call and we’ll schedule an exam and cleaning right away.

For more information visit: http://www.isbe.state.il.us/research/pdfs/dental_information.pdf and for blank forms visit: http://www.idph.state.il.us/HealthWellness/oralhlth/DentalExamProof10.pdf
When Should I Take my Child to the Dentist?

By Eric G. Jackson, DDS, MAGD, FICOI, FADI

Without a doubt, one of the questions I most often get asked is “when should I bring my child for their first dental visit?” Parents often receive conflicting advice due to the multitude of sources and opinions available these days. With this article, it’s my intention to provide you the facts and reasons behind the recommendations to allow you to determine what is best for your child.

“So when DO I take my child for her first dental visit!?” The traditional “cookie cutter” answer to this question has always been “around the age of three” but, times, and recommendations, change. I feel strongly that the modern, proper answer to this question is very family and patient specific. If forced to paint with a broad brush, I agree with the recommendations of the American Academy of Pediatric Dentistry (AAPD). According to their website, the AAPD advises a child’s first dental appointment should occur “when the first tooth appears, or no later than his/her first birthday.” At first read, this may sound a bit crazy or incomprehensible, or no later than his/her first birthday.” At first read, this may sound a bit crazy or incomprehensible! The average patient in our office possesses what I term a very high “Dental IQ.” For over 30 years, our patients have practiced good oral hygiene and have passed that along to their children and grandchildren. Unfortunately, the same cannot be said for the average dental patient nationwide. To the many people, even basic concepts such as the importance of biannual dental cleanings and quality brushing/flossing habits are foreign. Often, these people have not been educated as to WHY dental care, especially early dental care, is important. The classic example of this mentality that I use is a person who is resigned to the inevitability of getting all their teeth removed and dentures made. Just because your parents and grandparents had dentures by the time they turned 30 does not mean that you are destined for the same fate! The AAPD’s recommendation is clearly devised to educate the PARENTS of the child and stop the cycle of dentally uninformed generations from propagating their beliefs. I completely support the concept of what I call “Early Intervention, Early Education.” This concept is the primary reason for the 6-12 month recommended first appointment, and is why the focus is on discussion and less on cleaning.

Perhaps the most severe result of lack of early intervention is termed “Baby Bottle Tooth Decay.” This serious condition affects far more children than you might think, and has severe repercussions on not only the baby teeth, but the permanent teeth and the patient’s outlook towards dentistry as well. In much the same manner that prior generations put babies to bed on their stomachs, they also would commonly give babies bottles of milk in their cribs at night. These children would drink throughout the night and continuously bathe the teeth in milk. This is extremely detrimental as milk has very high sugar content. Decay rapidly progresses through the teeth, especially the front teeth on the upper jaw. Pictures of this can be seen above. This devastating condition is perhaps the foremost reason that new parents should bring their child for a dental visit when the first baby tooth erupts. By reaching new parents at this time, dental professionals can educate prior to any damage to the teeth.

If parents have had an “Early Intervention, Early Education” appointment with an older child, they will often inquire as to any updates at their own hygiene appointment, and defer the newest child’s appointment to an age when a traditional dental cleaning can easily be completed. For most children, this is around the age of two or three years old. Every child is different and some acclimate to the dentist at different rates. This is why over 20 years ago we at Oral Health Care Professionals created “Tooth Fairy Day” and host it twice per year. This complimentary day serves as a low stress high fun method of desensitizing preschool age children to visiting the dentist. By attending Tooth Fairy Day, children acclimate to the dental operatories, sitting in the dental chair, having air/water squirted, and most of all, having a stranger examine their teeth. Each of these things is very foreign and can be quite scary for a child. Young patients that are hesitant at Tooth Fairy Day flourish at their next appointment as much of the “newness” has been removed from the equation. For a video and more information about Tooth Fairy Day, please visit our website at www.OralHealthCareProfessionals.com/Tooth-Fairy.
Across

4 The Statue of Liberty was crafted in ______.
5 “I pledge allegiance to the ____ of the United States of America, and to the Republic for which it stands, one Nation under God, indivisible, with liberty and justice for all.”
6 In 1776, about 2.5 million people lived in the newly independent United States, according to the U.S. Census Bureau. In 2011, 311.7 million ____ celebrated July 4th, 2011.
7 Nine places have “_______” in their names. The most populous one is New __________, PA with a population of 4,464.
8 Benjamin Franklin wanted the turkey to be the national animal but was out voted when John Adams and Thomas Jefferson chose the bald ______.
9 The major objection to being ruled by _______ was taxation without representation.
10 On July 6, 1776, the Pennsylvania Evening _____ became the first newspaper to print the Declaration of Independence.
12 The first __________ Day celebration west of the Mississippi occurred at Independence Creek and was celebrated by Lewis and Clark in 1805.
13 The stars on the original American flag were arranged in a ______ to ensure that all colonies were equal.
14 The first Fourth of July party held at the _____ House was in 1801.
15 The national anthem is actually set to the tune of an old English drinking song called To Anacreon in ________.

Down

1 The __________ of Independence was signed in 1776.
2 Both Thomas _________ and John Adams died on Independence Day, July 4, 1826.
3 The Declaration of Independence is considered to be the founding document of the United _____ of America.
9 The Declaration explained the justification for the separation from the ______ crown.
11 The Liberty Bell was cast in ________.

Answers to the Flossword Puzzle on the bottom of page 3.

NEWS BITES WITH LAURA

Please let your dentist or hygienist know of any NEW medications you are taking or any recent changes in your medical history (surgeries, etc.) when you have a dental appointment. Side effects of medications can affect your mouth, as can certain medical conditions. The more information we have helps us to take better care of you.

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