Treating Periodontal Diseases is all about reducing your risk of damage occurring from bacteria and plaque causing inflammation in the living tissues that surround your teeth.

Our Preventative Plaque Control Training Program

Since bacterial plaque is the main cause of periodontal / gum disease, it follows that most people are not effective and consistent at removing plaque on a daily basis. Since there is no cure for periodontal / gum disease (because there is not a cure for plaque) and since plaque forms constantly on the teeth (whether you eat or not) periodontal / gum disease can come back if you do not effectively remove all the plaque from the teeth every day. Effective plaque control (oral hygiene) is therefore one of the most important action steps needed to help prevent the return of periodontal disease.

Daily plaque control is very important! Periodontal / gum disease is the major cause of adult tooth loss. It affects three out of every four adults. Replacing lost teeth is the most expensive form of dental treatment. By making an investment of time into your daily plaque removal, you may be able to avoid thousands of dollars of replacement dentistry. Usually only ten to fifteen minutes a day are required to fully cleanse your mouth of these harmful bacteria.

To help you control the disease and prevent re-infection, we have developed comprehensive preventive plaque control (oral hygiene) instructions. This will help ensure predictable treatment and long-term success.

During the active phase of your treatment, we will spend as much time as we feel you need to perfect your plaque removal skills. Please be patient with the process and with us. We will monitor your progress and review your techniques frequently (whenever we feel you need additional instructions).

You may occasionally have sensitive teeth following periodontal procedures. This can happen when unwanted deposits (plaque and tartar) are removed from root surfaces, temporarily leaving teeth sensitive to temperature change, acids produced by oral bacteria, and even touch.

This sensitivity can make you reluctant to brush and floss the areas that were treated, yet it is very important that you keep gently brushing and flossing to remove the plaque. If this plaque is not routinely removed, sensitivity will persist and root decay (cavities) may occur. A desensitizing tooth paste (with potassium nitrate) or concentrated fluoride gel (0.4% stannous-fluoride or 1.1% sodium-fluoride) may alleviate some of your discomfort.

If your teeth are especially sensitive, consult with your periodontist or dentist. This could be a sign of the need of a tissue (gum) graft or root canal treatment.
Brushing

- A soft bristle brush is the most beneficial. Hard and medium texture tooth brushes can abrade the gum and cause recession. Additionally, soft bristles can flex into hard to reach areas.

- If the bristles of any toothbrush are worn, bent or frayed, replace the brush. A worn out brush will not clean the teeth properly.

- Starting on the inside (tongue and palatal side) of the teeth, place the brush at a 45-degree angle to the tooth where the gums meet the tooth.

- Using a small circular motion, with gentle pressure, brush each tooth individually working your way around the upper and lower teeth for at least 2 minutes. In areas where the brush does not have enough space to lie horizontally, such as the lower front teeth, hold the brush vertically.

- Repeat the above steps on the cheek side of the teeth, allowing 2 minutes for this area.

- Brush the chewing surfaces (occlusal surfaces) of both upper and lower teeth.

- Brush the tongue and the roof of your mouth (palate).

- If the gums are inflamed some bleeding may result, but this usually stops after 2 weeks of brushing and flossing.

Automatic and electronic toothbrushes are safe and can be effective for most patients. They are especially helpful to patients with dexterity problems (e.g. arthritis, stroke, muscular dystrophy), but they are appliances and therefore only as effective as the individual and techniques utilized. Please consult with your periodontist or dental professional regarding the products and techniques that are best suited to you.

Toothpastes

- Toothpastes vary widely in their ingredients and effectiveness.

- The most basic concept to remember is that there are specific pastes for specific goals.

- Fluoride toothpastes can reduce tooth decay, but do nothing for periodontal disease.

- Tartar control toothpastes will reduce the formation of tartar (calcified dental plaque or calculus) above the gumline, but if you have sensitive teeth they will make them worse. They also do nothing for calculus below the gumline, where it seriously worsens Periodontal Disease.

Flossing

The most vulnerable area of the gum to periodontal disease resides between the teeth and below the gumline. Even the best brush designs cannot clean these areas. There are many different types of dental floss. Flossing is the most effective way to reach these areas. Technically, flossing may be difficult to master, but repetition will soon make flossing a secondary habit that can be done effortlessly.

- Begin with a piece of floss that is 18 inches long.

- Lightly wrap most of the floss around the middle fingers of each hand, then grasp a length of about one inch between your thumb and index fingers.

- Gently insert the floss between the teeth. A slight "sawing" motion may be necessary to pass the floss between the tight contacts.

- Curve the floss into a tight "C" shape, pulling it against one tooth until you feel tight resistance.
• Move the floss up and down against the side of the tooth, extending two to thee millimeters below the gumline.

• Remember that there are two tooth surfaces that need to be cleaned in each space. Continue to floss each side of all teeth. Be careful not to cut the gum tissue between the teeth.

• Do not forget the back side of the last tooth on both sides, upper and lower.

• As the floss becomes frayed or soiled, a turn from one middle finger to the other will bring up a fresh section.

• When you are done, rinse vigorously with water to remove plaque and food particles. Do not be alarmed if during the first week of flossing your gums bleed or are a little sore. If your gums hurt while flossing, you could be doing it too hard or pinching the gum. As you floss daily and remove the plaque, your gums will heal and the bleeding should stop.

• Do this at least once a day.

**Interdental brushes**

Occasionally you will be instructed to use a small, conical shaped brush for additional cleaning between your teeth.

These are particularly advantageous when there are larger spaces between your teeth.

• The handle comes in either a single or double-ended style. The inter-dental brush refills also come in a variety of sizes and styles.

• To place the brush tip in the handle, you must first press on the latch to release it. You then insert the wire stem of the brush into the small hole and snap the latch shut.

• You can dip the brush into several solutions that are recommended such as Listerine, ACT fluoride, or a prescription antimicrobial known as Perioguard or Peridex.

• When using an interdental brush, starting on the inside (tongue or palate), place the brush in between the teeth, making sure the brush is placed near the gumline and in contact with tooth surfaces.

• Gently take brush in and out for 5 repetitions to remove plaque on the tooth surfaces.

• Repeat this technique on the outside (cheek surface) of the teeth.

• The interdental brushes should be used twice a day.

**Gum Stimulator / Rubber Tip**

• Place rubber tip between teeth and apply light pressure in a circular motion to massage the gums. This may also remove plaque in between tooth surfaces.

• Repeat from tooth to tooth.

**Oral Irrigators**

The only way to remove plaque between your teeth is by utilizing floss, interdental brushes, or a gum stimulator (rubber tip) to mechanically debride the area. However, if you absolutely are not able to utilize floss, interdental brushes, or a gum stimulator due to certain health conditions that limit your hand / wrist movement, oral irrigators may rinse the areas between your teeth.
Rinsing

There are several brands of over-the-counter mouth rinses which claim to kill germs that cause gum disease. However, you still must floss at least once a day to mechanically remove all the bacteria and plaque on the tooth surfaces.

- Rinse vigorously for as long as the manufacturer advises to dislodge plaque and food particles that have been loosened by the brushing and flossing.

Tongue Cleaners / Scrapers

The top surface of the tongue is a haven for plaque! Brushing the tongue is helpful, but using tongue cleaners / scrapers is far more effective. Do this every night! You'll be surprised how much plaque you remove and how this contributes to breath freshness!

Check Your Work

Dental plaque is hard to see unless it is stained. Plaque can be stained by chewing red "disclosing tablets" sold at grocery stores and drug stores or by using a cotton swab to smear green food coloring on the teeth. The color left on the teeth shows where there is still plaque. Extra flossing and brushing will remove this plaque.

How should I choose oral care products?

Choose products that carry the American Dental Association Seal of Acceptance – an important symbol of a dental product's safety and effectiveness.

Professional Cleaning

Daily brushing and flossing will keep dental plaque and calculus (tartar) to a minimum, but a professional cleaning (maintenance care) will remove calculus in places your toothbrush and floss have missed or cannot reach. Visit your periodontist, as he or she is an important part of your program to prevent or to stabilize gum disease. Keep your teeth for your lifetime.

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