

# Common Misconceptions About Your Dental Health

## Congratulations on taking the first and most important step to total dental health: educating yourself!

With all of the information readily available at the click of a mouse, we must be careful to discern truth from fiction. The following “myths” are common misconceptions which mislead people concerning their dental health.

**MYTH #1 : For a mouth to be healthy, it must be germ free.**

**REALITY:** Our mouths, like our skin, are meant to have germs and still be healthy. They’re just not meant to have so many germs that the germs start destroying healthy tissues. That would be considered an infection.

**MYTH #2 : If I had an infection in my mouth, I’d know it, because it would hurt.**

**REALITY:** While there are occasional acute oral infections that do hurt, and hurt a lot (abscessed teeth, periodontal abscesses, etc), the day in and day out oral infection that leads to these acute infections and most of our other dental problem is a chronic, low-grade infection that doesn’t hurt.

**MYTH #3 : The main factors leading to dental problems and tooth loss are sugar, food, plaque and aging.**

**REALITY:** Actually teeth, gums and bone are all slowly destroyed by a painless, low grade, chronic oral infection. The mouth is meant to have some germs, like our skin. But when it has too many germs, to the point where oral tissues are being destroyed, it’s called an infection. Sugar and food don’t cause problems directly, but they do feed the germs that cause the problems. Plaque is the name we give to germs and the sticky substance they excrete that lets them adhere to teeth. Teeth don’t deteriorate with age, unlike skin, but if we have active infection, the older we are, the more time it’s had to do damage.

**MYTH #4: Tooth decay (cavities, dental caries, rotting teeth, etc) is the number one cause of tooth loss.**

**REALITY:** Actually tooth decay is the number two cause of tooth loss. Chronic gum disease and bone infection (periodontal disease, bone disease, gingivitis, and gum disease) is the number one cause of tooth loss. Since an infection causes all these things it could be said that infection is the only cause of tooth loss, apart from traumatic injuries.

**MYTH #5 : At least, if I have this infection, it only affects my mouth.**

**REALITY:** Unfortunately not. Infections cause inflammation. Inflammation is now considered to be a direct link to systemic illnesses, like diabetes and an even greater contributor to clogging of arteries than cholesterol. Studies have shown that people with uncontrolled oral infection are twice likely to die from heart attack or stroke. It is also known that women with uncontrolled oral infection have 2 to 10 times the number of premature births, depending on the severity of the infection. The elderly and infirmed can get aspiration pneumonia by inhaling these germs into their lungs.

**MYTH #6 : When I brush and floss, my gums bleed. I must be doing something wrong.**

**REALITY:** This shows there is something wrong (infection), but not that you're doing something wrong. In fact it shows that you're cleaning at least some of the infected areas, because those are the areas that are so eaten away by the infection that they bleed when they are touched. After proper office and home therapy, and sufficient healing time, there will be little or no bleeding when you brush and floss.

**MYTH #7 : When I brush and floss my gums don't bleed at all. I must be healthy.**

**REALITY:** Possibly, but not necessarily. Often an infection is present, but the patient doesn't know where or how to clean properly, so the hidden infected tissues don't get cleaned, and therefore don't bleed.

**MYTH #8 : If I use the right toothpaste and mouthwash, I'll be fine.**

**REALITY:** If that were true, 80% of us would be healthy instead of 80% of being unhealthy! Toothpastes and mouthwashes can have some benefits, but we can be perfectly healthy without them. Physically removing the infection from where it hides through proper in-office therapy combined with proper home therapy is the only way to get healthy and stay healthy.

**MYTH #9 : If I brush my teeth after every meal, I should be fine.**

**REALITY:** Brushing only cleans the visible parts of the teeth and gums. It doesn't get between the teeth or inside the gum pockets, yet that's where almost all of the infection is. Brushing teeth is like sweeping the parking lot at the entrance to the Howe Cavern- it needs to be done, but it's not the same as cleaning inside the Howe Caverns.

**MYTH #10 : The main reason for flossing is to remove pieces of meat, apple skin, or other foods that get stuck between our teeth.**

**REALITY:** That's one reason but far from the main reason. Floss is by far the most effective, though imperfect, means of removing germs from our gum pockets (which exist 360 degrees around each tooth like a turtleneck collar), as well as from hidden surfaces of the teeth, and the diseased skin lining the gum pockets. A brush doesn't have a chance of reaching these areas. Unfortunately, very few people floss, and the few that do are seldom much healthier than those

who don't because they don't know specifically what they're trying to accomplish, what techniques to use, and what type of floss to use.

**MYTH #11 : You can look into your mouth and see what needs to be cleaned.**

**REALITY:** When we look into our mouths, only a small portion of the surface area of our teeth and gums is visible. The unseen surface area of our teeth and the inside of our gum pockets may actually be greater than the visible surfaces, depending on how bad the pockets are. These pockets, or spaces between the gum and teeth can range from 1/16' deep to over 1/2' deep, all the way around the tooth. If we added up the surface area of the unseen germ world, it would be about the size of the palm of our hand. Imagine having an infected area that big for a lifetime and not doing anything about it! Yet most people don't even realize this hidden germ world exists, let alone doing anything about it.

**MYTH #12 : If I have my teeth examined and cleaned every 6 months, I should be fine.**

**REALITY:** Not necessarily. "Cleaning" is a layman's term. Like "prevention", it's often are, however, many different procedures, codes, instruments, techniques, and reasons for using them geared towards "cleaning" teeth and gums. It all starts with a diagnosis. Healthy? Unhealthy? Level of disease? Amount of tartar? Pocket depths? Number of teeth? Amount of bone loss? The diagnosis determines the cleaning procedures and the time required. You may not be getting the "cleaning" appropriate to your situation.

**MYTH #13 : If a chronic mouth infection doesn't hurt, it must be difficult to detect.**

**REALITY:** Actually, it's very simple to diagnose. One thing the infection does is make our gums pockets deeper, so we measure them. Since the infection infiltrates and erodes and ulcerates the skin inside the gum pockets, they bleed easily when touched. We check for this when we measure the pocket depths. The infection also inflames the gums, changing their appearance. It makes gums tender to the touch. It dissolves away the bone under the gums, which we can see on x-rays. All of these signs are easy to observe, which leads to a standardized diagnosis of disease level, which in turn leads to a standardized treatment regimen.

**MYTH #14 : Because this chronic infection of the teeth, gums and bone is a bacterial infection, antibiotics can be used to treat it.**

**REALITY:** Systemic antibiotics are carried by the blood. They work wherever there is good blood flow. Unfortunately there is no good blood flow on the surfaces of teeth or in the gum pockets. Multitudes of germs would survive and act as reinforcements to replace whatever germs the systemic antibiotics did kill. Also, remember that the mouth will always have some germs to restart the infection, and we can't be on antibiotics continually. The only thing that works is controlling the infection by way of physically removing the germs with proper in-office and home care procedures. There is a minor role antibiotics play using new methods of placing time release antibiotics in deep infected pockets that are

inaccessible to physical removal procedures. In either case, there's no way to get rid of oral infection for good, since our mouths will always have some germs which can multiply. Instead we control the germs down to a sub-infectious level.

**MYTH #15 : Treatment for this infection must be painful.**

**REALITY:** Not necessarily: It's similar to getting fillings done in the sense that most people opt for local anesthetic for some of the procedures and don't feel anything because they are numb. Many patients go without any anesthetic and do fine. Many parts of the treatment are totally painless without anesthetic. After some of the procedures the teeth and gums may feel "dull achy" for a while, and then feel better than ever because they're no longer infected. Don't confuse any of this with gum surgery. It's not. These are non-surgical cleaning procedures, commonly called "soft tissue management".

Thanks very much for reading this report. I hope that we've cleared up some common misconceptions about dental health, and that you found this report to be helpful. If you have questions or comments, please feel free to call us, or request an appointment to discuss your dental health concerns personally with Dr. DiBona.

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