

DO YOU SPEAK DENTAL ?!!!

Do you see the *need* ?

A series of several parallel white lines of varying thicknesses, slanted diagonally from the bottom left towards the top right, crossing the right side of the text.

- What is the “averagely literate” individual knowledge of dental terminology?

So if I told you that:

Tooth number 11 needs a pulpotomy to take out the pain followed by a root canal treatment then a crown lengthening procedure to optimize proper crown prep. And seating.

Do you understand what you have been told verbaly (which means you have to stop looking at the screen NOW)

YES or NO

WHERE IS THIS KNOWLEDGE COMING FROM?

OR



SPEAKING ABOUT THE AVERAGE LITERATE
INDIVIDUAL, BUT WHAT ABOUT THE SUB-AVERAGE
NEEDY PEOPLE WHO MOSTLY SEEK THE SERVICE
AT FEDERALLY FUNDED ORGANIZATIONS LIKE
HOSPITALS AND CHC.

NOW DO YOU SEE THE **NEED?**

► First of all,

What is the Dental practice concerned with?

IT'S EVERYTHING CONCERNING THE ORAL CAVITY SUBDIVIDED INTO:

1- HARD TISSUES

2- SOFT TISSUES



ORAL CAVITY AKA MOUTH 😊

SOFT TISSUES



- ▶ 1- Lips: consists basically of muscles and minor salivary glands.

Fact #1 : People look old when they loose their teeth.

SOFT TISSUE

2- Tongue: A very interesting organ with endless uses...



Fact #2:

-The only muscle in the body which has an origin but no insertion.

Fact #3:

-The 2nd fastest route of medicine delivery after the IV injection.

SOFT TISSUES

3- Cheeks:

Hosts almost all the muscles of mastication and one of the major salivary glands AKA Parotid salivary gland.



Cheeks

that's what you get for being cheeky

SOFT TISSUES

4- Sublingual area... AKA floor of the mouth, which has the 2nd major salivary gland.

and

Submandibular area: Shelters the 3rd major salivary gland. Starts typically from beneath the chin until the beginning of the neck AKA Adam's apple AKA Hyoid bone.

SOFT TISSUES

5- Gingival tissues:

Along with the periodontal ligaments (PDL), they have a very essential function, when being healthy; in supporting the teeth AKA the attachment system.

Fact # 4: Teeth are not embedded in the bone they are attached to the bones by PDL fibers.

- Keep the hygiene biannual visits.

SOFT TISSUES

6- Soft palate + Hard palate:

AKA roof of the mouth which is basically constitutes of some muscles and minor salivary glands.

Fact #5 Oral soft tissues are highly reactive, So it is highly advised to address any roughness or sharpness whether in the teeth due to lesions or in prosthetic appliances; As any chronic irritation to soft tissues might induce precancerous or even cancerous lesions.

HARD TISSUES

1- Jaw bones AKA **Maxilla** (Upper) & **Mandible** (Lower), and both are articulating through the **Temporomandibular** joint AKA TMJ.

TMJ: is the joint that allows you to eat and speak. 1-2 cm in front of the ear tragus.

This joint assembly is very sensitive to any alteration in the teeth, So it might undergoes many complication due to prolonged teeth absence or defective restorations/ replacements, so you have to keep them all.

Also it's prone to many degenerative changes due to aging process as well as many systemic diseases.

HARD TISSUES

Teeth

Comprise more than 95 % of the dental office encounters.

Humans replace two sets of teeth through a process termed (shedding).

- I. Primary AKA Deciduous AKA Milky teeth.
- II. Permanent AKA Adult teeth.

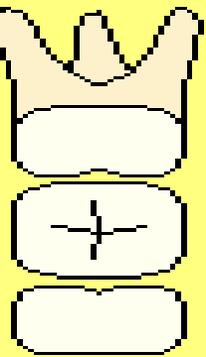
TO SPEAK ABOUT THE TEETH WE HAVE TO NAME EACH TOOTH

Many systems are employed to name the teeth, here we follow the American system!!! REALLLLLLLY 😊

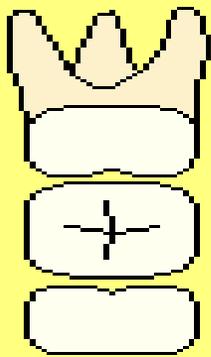
- The American system uses letters for the primary teeth and Numbers for permanent teeth.
- We start by the last tooth in the upper right quadrant then keep going until the last tooth in the upper left quadrant then go down to the last one in the lower left quadrant and keep going to the last tooth in the lower right quadrant.

PRIMARY TEETH CHART:

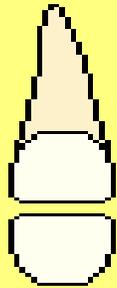
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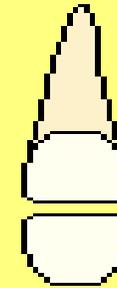
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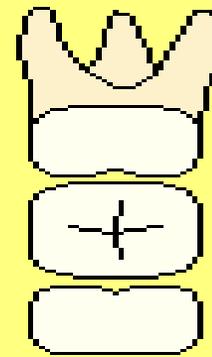
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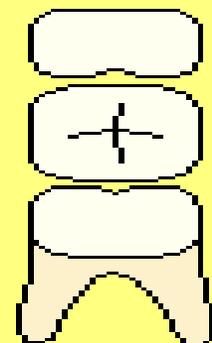
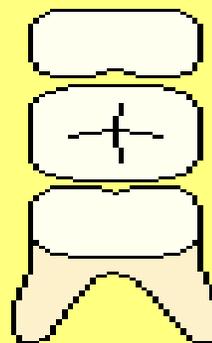
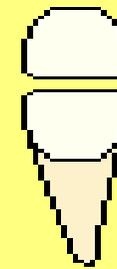
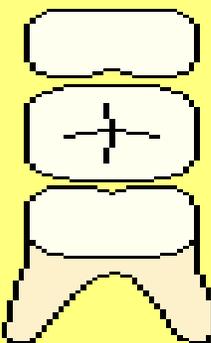
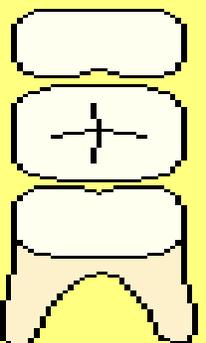
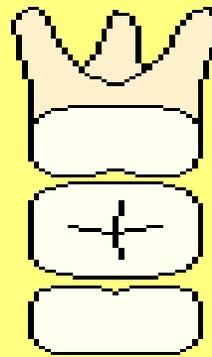
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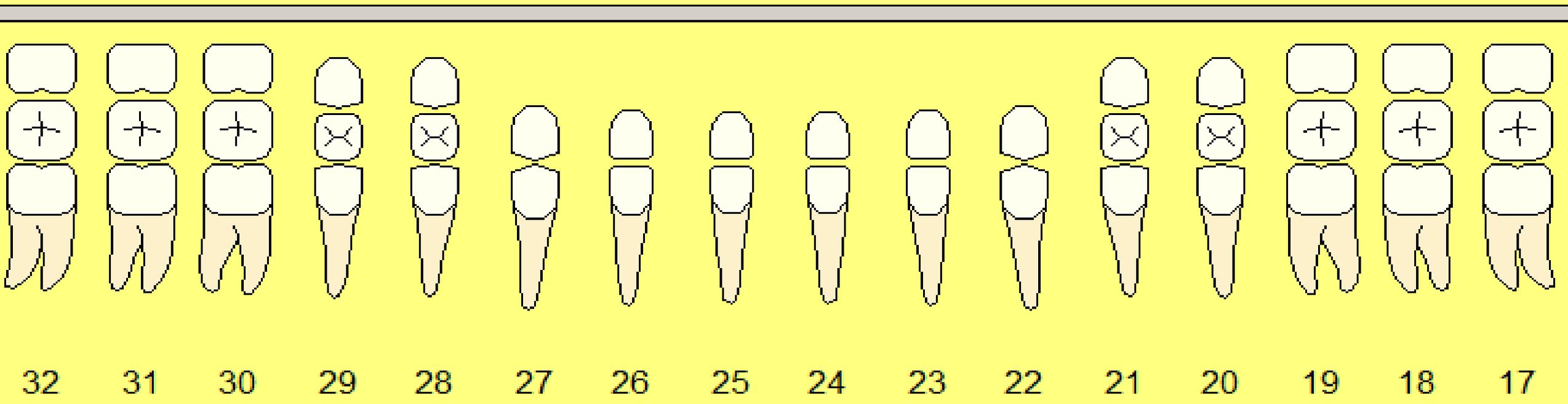
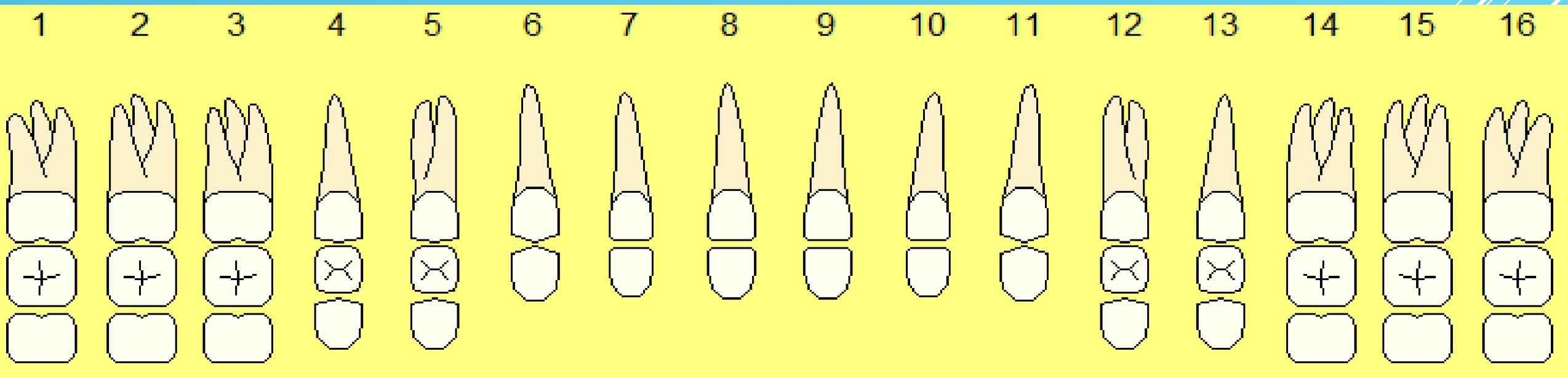
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PERMANENT TEETH CHART



$$32 - 20 = 12$$

Fact #6:

12 human permanent teeth don't have a primary predecessor.

Those are the 3 permanent molars in each quadrant.

PRIMARY TEETH

- 20 in total.
- 8 incisors 4 canines 8 molars.

Fact #7 No premolars in primary teeth.

* Unlike permanent teeth have two extra main functions beside eating and esthetics.

Fact #8 They serve as space maintainers for permanent successors.

Fact #9 The jaw growth centers are primarily stimulated by the chewing action of the primary teeth.

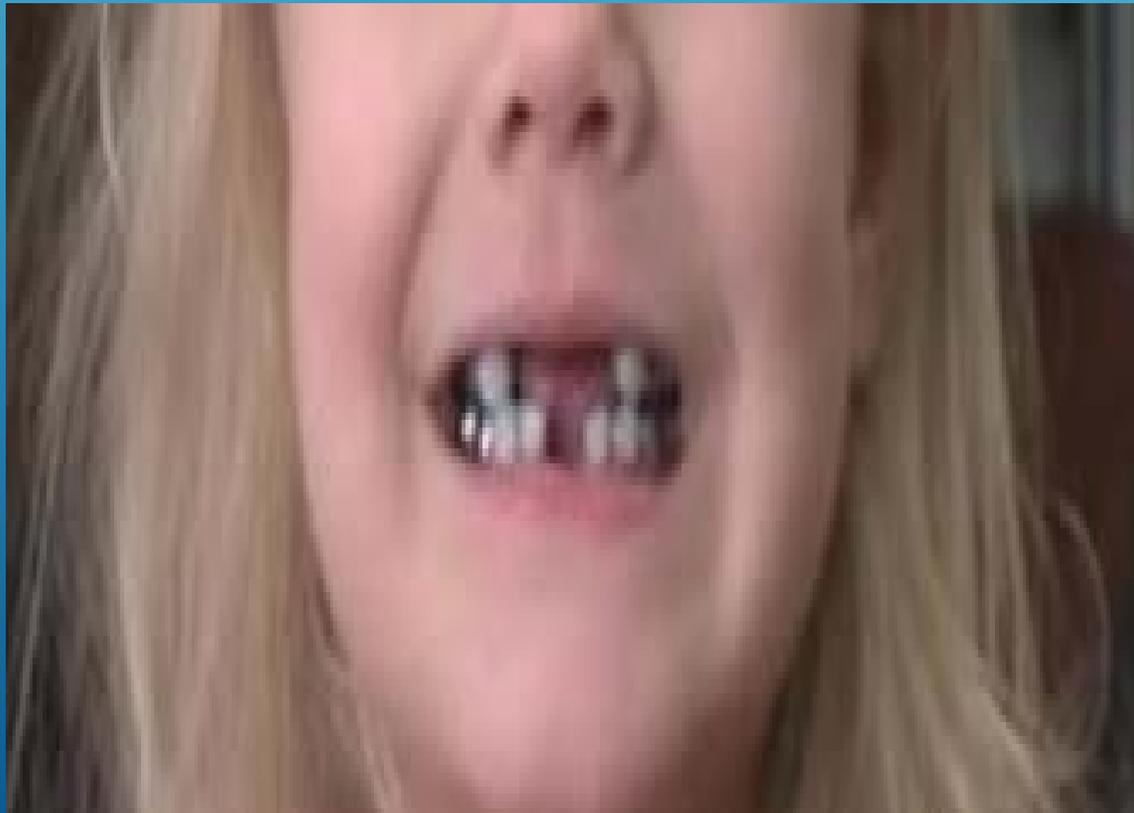
PRIMARY TEETH:

So failure of implying oral health concepts during early stages of child development will lead to premature loss of primary dentition which will result in :

PRIMARY TEETH

1- Mal nutrition and failure to thrive.

2- Poor esthetics.



PRIMARY TEETH

3- Loss of jaw space needed to accommodate permanent successors.



PRIMARY TEETH

4- Defective maxillary / mandibular growth, which results in severe facial deformation.



PRIMARY TEETH

Unlike the permanent dentistry, pediatric dentistry is focused on **BUYING TIME** rather than definitive solutions. Out of that concept pops up the only distinctive primary teeth procedure which is **pulpotomy**.

-Pulpotomy: is the primary teeth root canal treatment.

Other than that almost all the procedures are similar in purpose as well as materials.

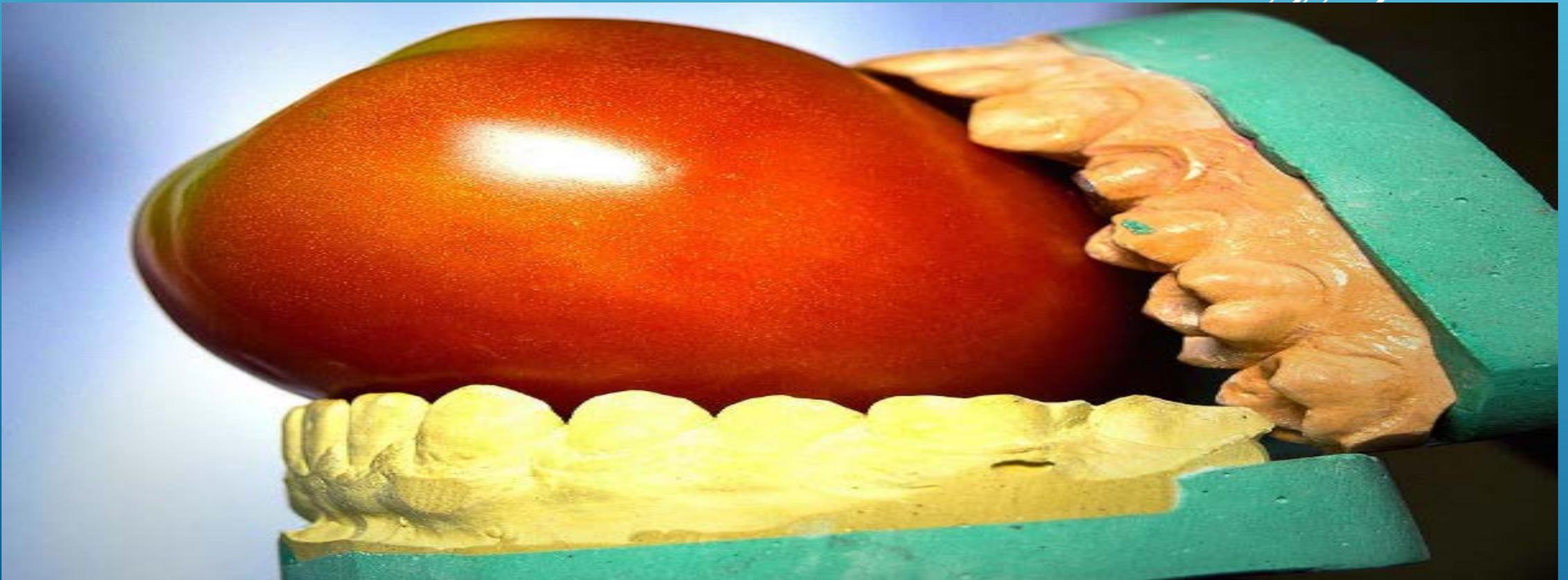
PERMANENT TEETH:

- 32 in number.
- 8 incisors, 4 canines, 8 premolars and 12 molars.
- Sequence of shedding/eruption is of more significance than the chronological time.

PERMANENT TEETH:

After each meal you wash you tableware, right?

Treat your teeth the same way please 😊



PERMANENT TEETH

Ques.: When do we have to brush our teeth?

Ans.: Right after each meal. By the way breakfast is considered a meal... Waking up in the morning isn't a meal... So Brush your teeth after breakfast **NOT** when you wake up **OR do both.**

PERMANENT TEETH

Ques.: Do I have to brush all my teeth?

Ans.: NOOOOOOOOOOOOOOOOO

Brush only the ones you plan to keep!!!!!!!!!!!!!!



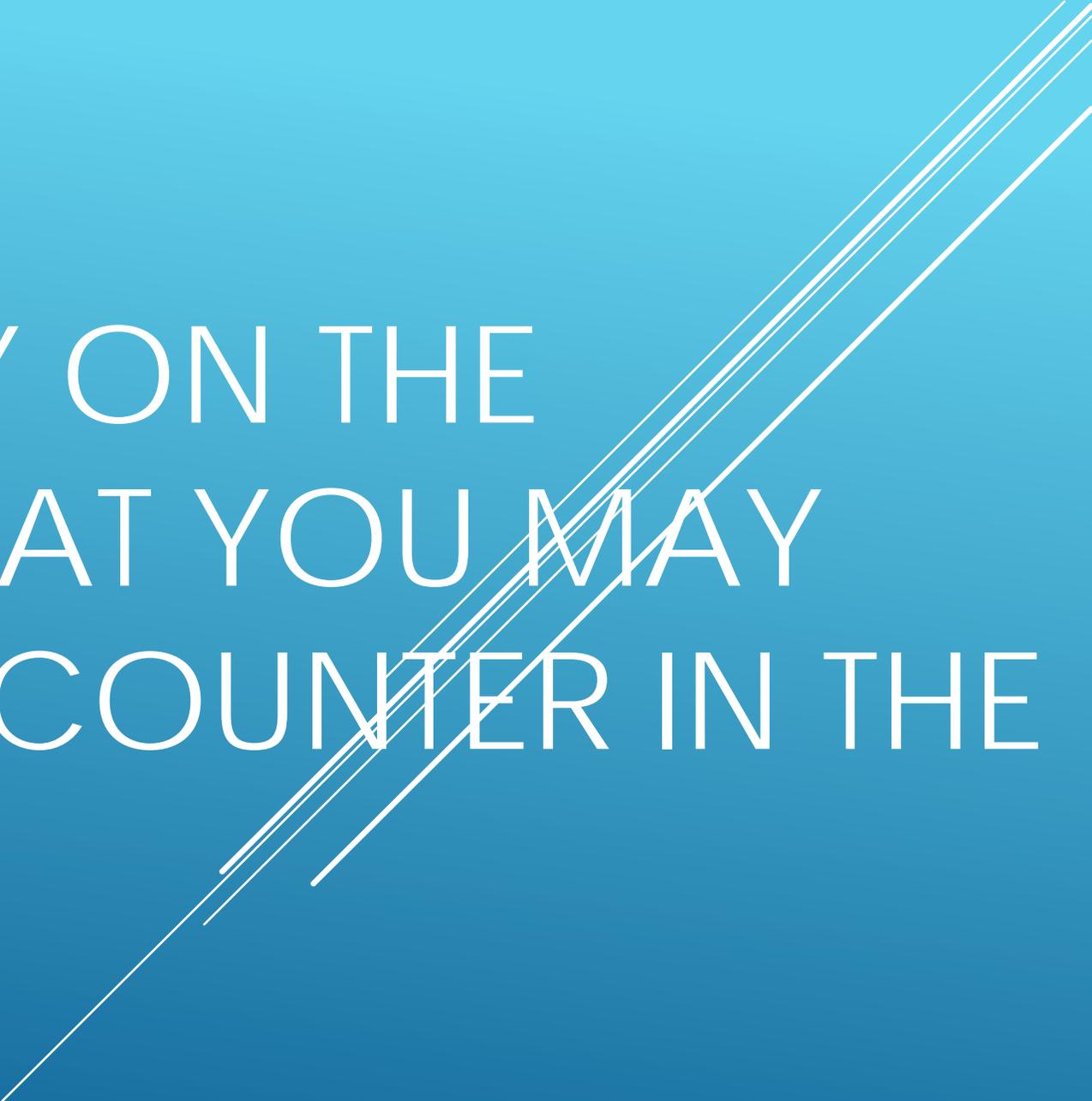
PERMANENT TEETH

Ques.: Do I have to floss all my teeth?

Ans.: YES.. Each Tooth has 3D having at least 5 surfaces; brushing is cleaning only 3 out of 5 surfaces so we have to floss to clean the other 2.



A QUICK SURVEY ON THE
PROCEDURES THAT YOU MAY
COMMONLY ENCOUNTER IN THE
DENTAL OFFICE.

The image features a solid blue background. In the bottom right corner, there are several thin, white, parallel lines that originate from the right edge and extend towards the center, creating a sense of movement or a graphic element.

TEETH FILLINGS:

1- Remove the decayed tooth structure.

2- Fill it with either the traditional (silver AKA metal) or the Modern (tooth colored AKA composite) Filling material.

Fact #10: Teeth decayed lesions / fillings are classified according to the number of involved / restored surfaces.

ROOT CANAL TREATMENT

Needed If the decay invaded the Pulp (AKA Nerve)...

Dentist will use files, complex instruments and techniques to clean the pulp chamber and canals. Routinely due to assumed massive decay will need to put a Post (AKA Pin) in one of the canals then build-up the tooth Core.

Might require multi visits.

CROWNS

Regularly Porcelain facing fused to either metal or ceramic.

Also due to assumed massive tooth structure loss in RCT teeth, they often requires crown coverage for protection.

Regularly requires 2 or more visits.

EXTRACTION:

Either simple or surgical (for impacted teeth, most commonly the wisdoms), both requires the same precautions, like:

- 1- No hot drinks or food, no smoking for the day.
- 2- Intentional cold drinks for the day.
- 3- No M.W. or rinse for the day, starting from the next day do warm water/salt MW.
- 4- Drink !!!!!!!!!!! Your medication.

REMOVABLE COMPLETE AND PARTIAL DENTURES

Denture whether complete or partial are **Removable** by name, So have to be removed and cleaned after each meal with a tooth brush.

It might be metal framework, covered by pink acrylic or whole acrylic and teeth are always acrylic.



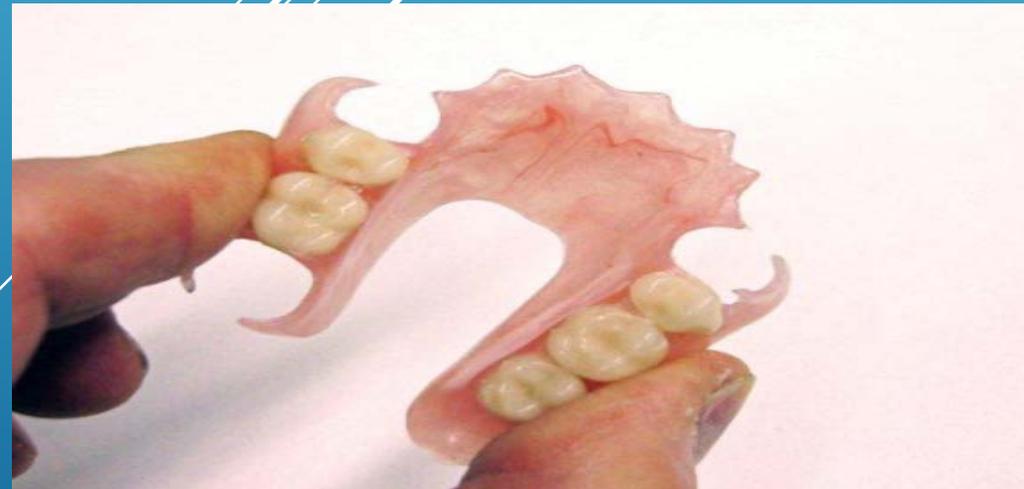
METAL FRAMEWORK



RIGID ACRYLIC



FLEXIBLE ACRYLIC (AKA FLEX BASE)



REMOVABLE COMPLETE AND PARTIAL DENTURES

Well brushed and Soaked by night.

Fact #11 Shall be kept wet all the time.



DENTAL MATERIALS

The interpreter scope to the dental material shall be as extended as possible. However it should include but not limited to allergies due to dental materials, material color and biocompatibility and to know that each and every material used is ADA approved.

TREATMENT PLAN/TIME FRAME

Oral health almost always includes a multi-visit procedure. This shall be emphasized clearly and coherently to the patient. The patient must understand the treatment plan, and to know exactly how long this process will take. This understanding is the corner stone of the whole process. They have to know

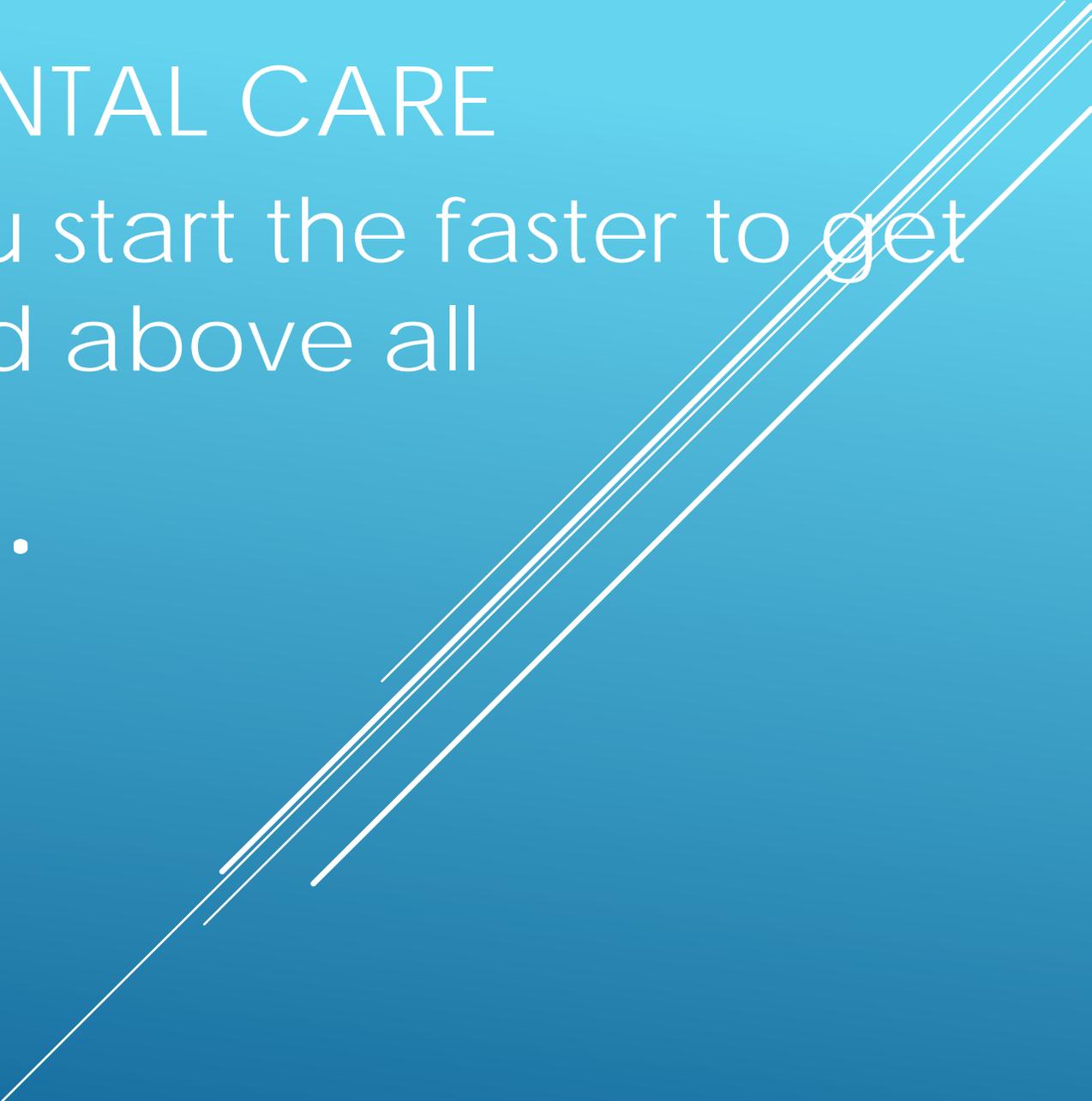
“What” as well as “When”

to expect the outcome of the treatment.

F-MOTIVATION FOR DENTAL CARE

Fact #12: The sooner you start the faster to get done, the lower cost and above all

the best prognosis.

A series of several parallel white lines of varying thicknesses, slanted diagonally from the bottom left towards the top right, located in the lower right quadrant of the slide.

CULTURAL/RELIGIOUS VARIATIONS

Examples of that:

Ramadan month (holy month for Muslims), usually they refrain from dental treatment through this month.

Muslim population (females > males) don't feel comfortable towards physical contact gestures, like shake handing and hugs, especially if they are wearing the head cover (veil-hijab).

CULTURAL/RELIGIOUS VARIATIONS

The Yemenis people (males > females) are regularly consuming a narcotic domestic plant, and this is culturally acceptable over there, so the provider shall do an attentive oral cancer screening. Also this plant texture is abrasive to teeth so it might reflect as generalized wear of the teeth.

So the interpreter might need to give the provider a heads up if any of these lesions encountered.

DOCUMENTATION

The patients generally must understand what forms are they signing, and how these forms are used. The language of the document shall be understandable to the patient with average literacy, otherwise it will convey to the patient a feeling of being rejected or in other words

"they don't care".

INSURANCE COVERAGE / LIMITATIONS

This comprises an essential part of the decision process. For example what teeth are covered for Root Canal treatment and what are not, so the patient got to decide either to pay out of pocket or consider other treatment options that might be covered.

POINT OF VIEW FROM THE OTHER SIDE OF THE LIPS





THANK YOU!
ANDREW FAHMY

