BRUSHING AND FLOSSING "EXCUSE BUSTERS" TO THE RESCUE

The American Academy of Periodontology challenges the public to quit making excuses for not brushing and flossing by offering the following "excuse busters." A good at-home oral hygiene routine will help ensure a beautiful smile, prevent periodontal disease—a major cause of tooth loss in adults, and guarantee a lifetime of smiles.

1. My hands are too big and I have no dexterity. If dexterity problems are the excuse, a power floss holder or automatic tooth brush may solve this problem.

2. Floss pushes food further into the pocket. Not only does floss loosen food in between teeth, but its primary function is to remove the invisible film of bacteria that constantly forms between teeth. Floss cleans about 30 percent of the tooth’s surfaces in places that the toothbrush cannot always reach.

3. When I floss, my gums bleed. Floss does not cause your gums to bleed, but not flossing daily could. That’s because flossing may help prevent gingivitis, the mildest form of periodontal disease. Gingivitis causes the gums to reddened, swell and bleed easily. Gingivitis is often caused by inadequate oral hygiene and can be reversible with professional treatment and good oral home care.

4. My teeth are cleaned professionally twice a year, so I don’t have to brush and floss. It’s important to get your teeth cleaned and examined twice a year, but a daily at-home oral hygiene routine is equally as important. When plaque is not removed daily, it can turn into a hard substance called calculus/tartar in less than two days. Daily cleaning helps minimize calculus formation.

5. It takes too long. Thorough brushing and flossing takes less time than shaving or applying make-up.

6. Brushing and flossing gets in the way of family time. Actually not brushing and flossing can take away from family time. Research suggests that periodontal diseases can pass through saliva, common contact of saliva through family time such as kissing may put your loved ones at an increased risk for contracting periodontal diseases, and more trips to the dentist.

7. Losing teeth is part of aging anyway, so brushing and flossing won’t help. The image of grandparents’ teeth in a glass is an image of yesteryear. More people are keeping their natural teeth longer with brushing and flossing.

8. My teeth are too tight for the floss. If you have tight spaces between your teeth, polymer floss that’s ADA approved may slide in between your teeth easily.

9. I damage my gums when I floss. If the correct technique is being used, gums will not be damaged. Read below for the correct way to brush and floss. Or, if you prefer, ask your dental care provider for a refresher in oral hygiene technique.

HOW TO BRUSH AND FLOSS

Now that that your brushing and flossing excuses have been "busted," you'll want to make sure you're using the right technique.

Use floss that is 18 inches long. Wind most of the floss around your middle finger and the remainder around a middle finger of the opposite hand. Gently insert the floss between the teeth using a back-and-forth motion, guiding the floss with your forefingers. Guide the floss to the gumline and curve the floss into a C-shape. Slide it into the space between the gum and tooth until you feel light resistance. Repeat this process between every tooth and don’t forget the back sides of your back teeth.

Begin brushing your teeth by cleaning all outside surfaces with your toothbrush at a 45-degree angle where your gums and teeth meet. Gently move the brush in a circular motion several times. Apply light pressure to get the bristles between the teeth. Use this same method on the inside of the back teeth. When cleaning the inside surfaces of the upper and lower front teeth, hold the brush vertically. Make several gentle back-and-forth strokes over each tooth and its surrounding gum tissue. To clean the biting surfaces, use short gentle strokes. Do not forget to brush your tongue.

The American Academy of Periodontology Patient Page is a public service of the AAP and should not be used as a substitute for the care and advice of your personal periodontist. There may be variations in treatment that your periodontist will recommend based on individual facts and circumstances. Call 1-800-FLOSS-EM for a free brochure on periodontal disease.
Maintaining and Protecting Your Oral Hygiene Equipment

Do you know what car oil and toothbrushes have in common? Both are designed to clean away dirt and contaminants, should be replaced every three months or sooner, and both become ineffective when deterioration sets in. You know when it’s time to change your car oil, but do you know when it’s time to replace your toothbrush?

Look at the toothbrush. Are the bristles bent or frayed? When was it last replaced? The American Dental Association (ADA) says that toothbrushes should be replaced every 3-4 months, or sooner. When bristles become worn-out, they lose their effectiveness.

In a study published in the *Journal of Clinical Dentistry*, people were given new and artificially used toothbrushes (these brushes were worn down by a machine to simulate three months of use). The new toothbrushes removed significantly more plaque and gingivitis - the earliest stage of gum disease, than the worn brushes.

In addition to the wear and tear your toothbrush goes through everyday, overtime it also can become contaminated with bacteria, blood, saliva and toothpaste. Although the Centers of Disease Control and Prevention (CDC) is unaware of any adverse health effects directly related to toothbrush use, a recommendation is to rinse the toothbrush thoroughly with water following brushing and to tap off excess water. You may also want to consider the following to protect your toothbrush from bacteria:

- **Do:**
  - Wash your hands before and after brushing.
  - Allow the brush to air-dry after each use. The bacteria most harmful will die when exposed to oxygen.
  - Store the toothbrush in an upright position, so water drains from it and it dries faster.
  - Replace it every 3-4 months or sooner if the bristles appear worn or you’ve had a cold or flu to prevent possible reinfection.

- **Don't:**
  - Share your toothbrush. According to the CDC, the exchange of body fluids from sharing toothbrushes could increase the risk for infections.
  - Re-use or share the same disinfecting solutions or mouthwash to disinfect your toothbrushes. This may lead to cross-contamination.
  - Routinely cover toothbrushes or store in closed containers. This creates a humid environment that is more susceptible to bacterial growth.
  - Use a community toothbrush holder. If you must, clean it often, and make sure the bristles do not touch one another.
  - Touch the toothpaste tube to your toothbrush.

"Brush-Up" on Brushing Your Teeth and Gums

Now that you're committed to maintaining your hygiene equipment, you'll want to "brush up" on your technique.

**Selecting a toothbrush:**
Look for a toothbrush that has the ADA Seal of Acceptance and soft-bristles. The size and shape of the brush should fit your mouth.

**Step-by-Step:**
To clean the outside surfaces of your teeth, position the brush at a 45-degree angle where your gums and teeth meet. Gently move the brush in a circular motion several times using short, gentle strokes. Apply light pressure to get the bristles between the teeth. This should not cause discomfort. Use the same method on the inside of the back teeth. Move the brush in short, gentle but firm strokes, keeping it angled against the gumline.

To clean the inside surfaces of the upper and lower front teeth, hold the brush vertically. Make several gentle back-and-forth strokes over each tooth and its surrounding gum tissue.

To clean the biting surfaces of your teeth, use short gentle strokes. Since the toothbrush can clean only one or two teeth at a time, change the position of the brush as often as necessary to reach and clean all tooth surfaces. If you have any questions, ask your periodontist or dental care provider.

Don't forget to floss. There's no clear answer on whether it's better to floss first then brush or brush then floss. Flossing first may loosen plaque, which can then be brushed away with your toothbrush.

Don't skip the professional visits. Professional cleanings at least twice a year are necessary to remove calculus from places your toothbrush and floss may have missed. And, a professional evaluation can determine if you have periodontal diseases.
Oral Hygiene

Choosing the Right Tools for Your Teeth and Gums

The best way to prevent periodontal diseases and keep your teeth for a lifetime is through brushing, flossing, and regular dental visits that include a periodontal evaluation. However, with so many products filling up the oral hygiene aisle, it is hard to know which option is right for you.

A common option is the manual toothbrush; a small brush with a long handle that is used to clean the surfaces of your teeth. If you use a manual toothbrush, select one with soft- or medium-bristles that allows you to reach every surface of each tooth.

If you are looking for a different option than the manual toothbrush, the electric toothbrush can be a good alternative. An electric toothbrush is also a small brush on a handle but with electric power moving the brush head. Electric toothbrushes allow the user to simply place the bristles on the tooth while the vibrations do the cleaning.

So which brush should you choose? Every person is different, so before making your choice, talk to your dental professional about which option is right for you.

Whatever brush you use, follow these tips:

DO:
- Use a minimum amount of toothpaste. Too much toothpaste means that you have to tighten the checks and lips to accommodate the extra toothpaste material. This excess can prevent you from getting to the back teeth to brush properly.
- Allow the brush to air-dry after each use. The most harmful bacteria will die when exposed to oxygen.
- Replace your toothbrush every 2-3 months or if the bristles on your toothbrush are bent or frayed. A worn-out tooth brush will not clean your teeth properly. Also replace the brush if you recently had a cold or flu. This will prevent reinfection.

DO NOT:
- Share your toothbrush. According to the Centers for Disease Control (CDC), the exchange of body fluids from sharing toothbrushes could increase the risk for infection.
- Apply too much pressure as this can lead to gum recession and erosion of tooth enamel.
- Routinely cover your toothbrush or store it in a container.
- Touch the toothpaste tube to your toothbrush.

And of course, don’t forget to floss ‘em! Research published in the Journal of Periodontology found that tongue and tooth brushing in combination with dental flossing significantly decreased gingival bleeding by 38 percent after a two-week oral hygiene program. There’s no clear answer on whether it’s better to floss first then brush or brush then floss. Flossing first may loosen plaque, which can then be brushed away with your toothbrush.

For more information on brushing techniques talk to you dental professional or call 1 (800) FLOSS-EM and ask for a complimentary copy of the American Academy of Periodontology’s How to Brush and Floss brochure.

Leave it to the Pros

Daily brushing and flossing will keep the formation of dental plaque to a minimum, but it won’t completely prevent it. A professional cleaning will remove hardened calculus in places your toothbrush and floss have missed.

In addition, your dental professional should be able to tell you your “probing depths.” A healthy probing depth of one to two millimeters with no bleeding represents a healthy mouth. Probing depths of three to four that bleed generally need more than a simple cleaning. They may require a procedure called scaling and root planing. When probing depths reach five millimeters or greater you may require surgical treatment to restore lost bone. Keep this pocket size guide to oral health in mind and be sure not to skip your next appointment!