

WHY SCIENTISTS HAVE FLAT FOREHEADS

Some things every Parent, Patient, and Dental Care Giver needs to know about
PREVENTITIVE DENTISTRY

Or my opinions after three decades of experience, practice, research, and teaching
A Brief History of a Scientific Odyssey Through Life

“Sometimes the obvious escapes everyone except the first one to see the obvious”

Andrew Brostek, Perth Australia

Many years ago I thought I was privileged to be one of the first to bring to the attention of organized dentistry the connection between gum disease and heart disease. What happened was a firestorm of objection from organized dentistry and demands akin to burning the heretic at the stake since “everybody knew” there couldn’t be a connection between the two. Over the years, I have taken great satisfaction in reminding my colleagues of that connection as the evidence grew and then became overwhelming.

Now we are going back and trying to tie in the loose ends and understand the extreme complexity of the interaction of inflammation and coronary disease, stroke, and other immunological disease. Unfortunately, we won’t have all of those answers in the lifetime of most of the people reading these articles but that won’t keep us from moving forward.

Recently, I had the honor of attending a course with several other shakers and movers in this profession of dentistry. One of the dilemmas facing us over the years has been the nagging problem of gingivitis, which is generally agreed to be the precursor to serious gum disease, and an indication of risk factors leading to heart disease. I addressed part of the solution to the problem in the article “Quit Brushing Your Teeth” earlier.

One of the things associated with gingivitis and gum disease is the type of bacteria that are called “spirochetes”. These are the bacteria that suddenly appeared during World War I associated with a then new disease called “trench mouth.” In looking back over the years, one of the anecdotal incidents that may be related to this worldwide pandemic is the pandemic of heart disease that started thirty years later after World War II. Probably the most interesting thing in this new twist in the investigation of the bacterial link is the full motion videos showing these spirochetes penetrating living cells then converting to a protective form called a “spore”. Researchers are now looking for that link in the evidence for proof that an infection can become latent and then reappear decades later affecting the cardiovascular system.

One of the things we were looking for in this seminar was visual proof of the new evidence. In looking back at the twenty-five year old microscope pictures I used in teaching the then new approach to managing gum disease, we may have those spores in those pictures, something we had looked at numerous times before over those two decades since, but failed to recognize. It now appears obvious. Flat Foreheads.

Making a very long Odyssey short, the question was asked “what can be done to create a simple, low cost, preventative measure that will kill these spirochetes and most other oral pathogens that most patients can manage?” The host of our group had invited a patient in who was having

chronic problems with gingivitis. What he is doing is teaching patients how to pack the area between the teeth and gums with plain baking soda using a toothbrush. Of course, the patient thought she was in compliance. However, what we saw was a very effective effort to maintain the brushing habits of the five year old she once was and she was avoiding her gums. She wasn't even close to packing her gums with baking soda. We taught her how to "feel" the baking soda and tooth brush bristles with her tongue as she packed the baking soda between her teeth and gums. Problem solved.

Baking soda is a very effective, better, and cheap substitute for most toothpastes, particularly in these hard economic times for some people. Used properly, it will help control gum disease, decay, it will help neutralize the acids that dissolve teeth and promote gum disease and decay, and it will freshen your breath. After packing the baking soda between the teeth and gums, use an interproximal brush to brush it out, then finish removing with a toothbrush.

That's why scientists have flat foreheads. This simple solution to solving "gingivitis" was staring us in the face and we didn't see it. We've tried to get around the innate traits we all share as humans, and the key to the changing ineffective habits to effective habits is trying something different. Packing the baking soda between the teeth then learning how to remove the baking soda effectively will retrain us into effective brushing habits. It's that simple.

Just another reminder: if you are now between jobs, it is very likely your children will be eligible for free dental care. If conservation of tooth structure and reduction of future dental procedures is important for you, your children, grandchildren, or friends, please contact us.

This and more articles are available on the www.jtimrailey.com website.
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The following are my opinions addressing some of the things every patient needs to know about "Dry Mouth", after three decades of experience, practice, research, and teaching.

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