



# Word Of Mouth

Produced for the fun of it!

Fall 2007

## fromtheoffice

So, here is the newsletter. This is kind of a long letter but what the heck! Everything in the office seems to be going quite well. I am still trying to find a permanent addition for a hygienist on Monday. We have tried many and it is difficult to find that magic person! If anyone knows of anyone, I sure would appreciate it. For that matter, we are always looking for great people. Have the usual list of Office Gossip and have some info on Veneers and Mini Implants (no they are not for small people). Have a piece about Casa Pacifica and the new contest (yes, we are resurrecting the fun). In addition, we have a guest speaker that I will leave a surprise who she is. Oh darn, I told you she is female ... at least I did not tell you that she is a hygienist in our office!

### Here's A Little Office Gossip

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| <ol style="list-style-type: none"> <li>1. No pregnancies in the office.</li> <li>2. Still in the same location (temporarily).</li> <li>3. No new babies.</li> <li>4. Some employees have new dogs and are now dog crazy and should be committed.</li> <li>5. Ben is working three days a week instead of two (people like him, go figure!)</li> <li>6. Kathleen's kids are almost taller than I</li> </ol> | <ol style="list-style-type: none"> <li>am (I do not want to hear small people jokes).</li> <li>7. "Knocked Up" became a popular movie making those previous two words "acceptable to all people!" Read last newsletter!</li> <li>8. I'm not getting older or getting gray hair.</li> <li>9. Debbie did it ... read inside.</li> <li>10. Have a page about Focus Dental Institute with pretty pictures!</li> </ol> |
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## New Contest To Make Dinero

(Money)

In the good old days of Dan's Dental Madness, we had a dessert contest where people would make desserts for our staff. We would judge and they could make 200 buckaroos if we liked it.

That is over and very passé. Our new contest is so much better and does not take much of your time and essentially none of your money. Sound too good to be true? Oh, seniors and senioritas, it is very true. All you have to do is think of the perfect flavor for prophylactic paste. Ok, prophylactic paste is what the hygienist uses when she polishes your teeth. Usually they will ask you what flavor you would like. Personally, I am still waiting for Margarita flavor. One of my patients already suggested "New Car" but I am not sure that leather smell would taste very good.

Do not call us with your choice but mail or email it to us. Sorry, I do not trust the front office staff; they will take it for themselves. May the best taste win. By the way, I am contacting the manufacturer of the prophylactic paste and letting them in on the contest. I hope that the winner can have some made up ... or not!

*The fun (yes, this is fun) starts on November 1, 2007 and ends on December 31, 2007.*

*Thank you for all your referrals. We appreciate them!*

# MINI IMPLANTS

Ever have the feeling that you know something and you want everyone else to understand what you know? Well, my friends, this is one of those times. No, it is not a religious experience! Many of these people who do not understand about them include Oral Surgeons, Orthodontists, General Dentists as well as other specialists. Those of us who have “seen the light” use Mini Implants when traditional implants cannot be utilized. For example, many times when we want to place an implant we find that we do not have enough bone to surround the desired implant.

## When this happens, we have used one of five approaches:

1. Keep the space open and do not place a tooth.
2. Add more bone through a series of surgeries and then place the implant.
3. Make a cemented bridge that cuts down the other teeth.
4. A removable partial that has the tooth on it that comes in and out of the patient’s mouth.
5. Move all the other teeth forward to fill the space.

These mini implants have limited uses but they are extremely valuable for many people and situations. So Dan, where do you use them? I am glad you asked; one example is to help secure a lower denture. A large percentage of people do not have comfort with their lower dentures. We can give them better security and function with these implants at a fraction of the cost of traditional implants. How much of a difference? 4. Mini implants and a new denture could cost \$4,000. Traditional implants and a new denture could be \$8,000-10,000. Once the denture is made, the implant placement and completion takes about 1 ½ hours. You leave with the completed denture in your mouth with the implants working. In addition, my patients have had very little discomfort after placement. Regular implants will take many weeks to complete and the denture needs to go to the lab to be retrofitted. In addition, if your existing denture is fine, we can place mini implants and retrofit your denture in the same 1 ½ hours. Cost for implants only and converting your existing denture could cost around \$2,000-2500. This cost could vary depending how many implants placed. There are no medical conditions preventing us from using this implant. We routinely use them on elderly patients because healing is so quick. Generally, root form implants are the best long term treatment. We do not use these mini implants when we have a lot of stress. For example, they are not good for replacing molar teeth (the back ones). The rule of thumb is to use a regular implant if possible and one can afford it and a mini when a regular will not work or if there are monetary constraints. Again, if you have an area of low stress then a mini will work.

## Here is an example:



### Implants placed on lower jaw

This lower denture is now secure and the patient can eat anything he wants without pain.

Another great example concerns young people that are born without some of their teeth. One area is the upper laterals (on either side of the two front teeth). Traditional treatments have included: 1. Orthodontically close the space (very bad because it rarely looks good and creates a functional problem with all the teeth. 2. Cut down the teeth on either side of the space and create a fixed bridge (do not even think it!) 3. Removable partial that removed after or during meals (kind of a sexy thing on a date!) 4. Regular Implants (these are great if you have enough bone).

With Mini Implants, we have a procedure that causes very little bone and tissue trauma and great aesthetics. In addition, we do not need to touch the other teeth. You can see an example of how this works on a patient below.

The implant was placed on the right lateral and we also placed a veneer on the canine to the left of the implant.



Please ask us about them and tell others ... before they make the wrong uninformed choices. Yes, they are FDA approved! Yes, they integrate as other implants and yes, they are simple. Please understand that one of the largest Implant manufacturers in the world would love to own this company, but, alas, it is not for sale! Wish I owned it ... And yes I am very good at this procedure!

The industry average for success is about 95%, which is similar to regular implants.

# Perio Pocket-Cleaning vs Periodontal Maintenance

What is the difference between a regular cleaning and periodontal maintenance? If you have gone through periodontal therapy, scaling and root planning or "deep cleanings" you should know, but here is a review. A prophylaxis or regular cleaning is removal of plaque, calculus and stains from the tooth structures. This is the "polishing and scraping." It is intended to control local irritational factors (dirty, fuzzy teeth) and maintain health. Periodontal maintenance includes polishing and scaling as well as removal of microbial flora from the sulcular or pocket areas. As Dr. Smith would put it: cleaning out the "bacteria and its poop" from around the gums and in the places where you can't reach. The goals of periodontal maintenance are to prevent the recurrence and progression of gum disease, prevent any tooth loss from disease, and finding and treating any diseases in a timely manner. At every periodontal maintenance appointment some form of therapeutic treatment occurs-feels good doesn't it!

Thanks Holly for writing this article.



**For those of you who went to Willy's BBQ in Agoura, I am sorry to say that you have made it difficult for me to get a table at lunch. Stop going. Maybe Jack-In-The-Box will satisfy that food hunger you have.**

**CONGRATULATIONS  
DEBBIE!**

It is hard to believe that I have been practicing in Agoura Hills for twenty years; even harder to believe that Debbie has been in our office for twenty years. That is crazy. Why would she do that? Well we sent her off to Hawaii for her reward for lasting twenty years with me. We kept it a secret until the morning she left. Her husband, Mark did a great job of handling all the loose ends. He had a lot to do getting ready and getting her out the door. I believe most work went to figuring out what to do with her "dog child".

**20 YEARS!**

## Osteoporosis

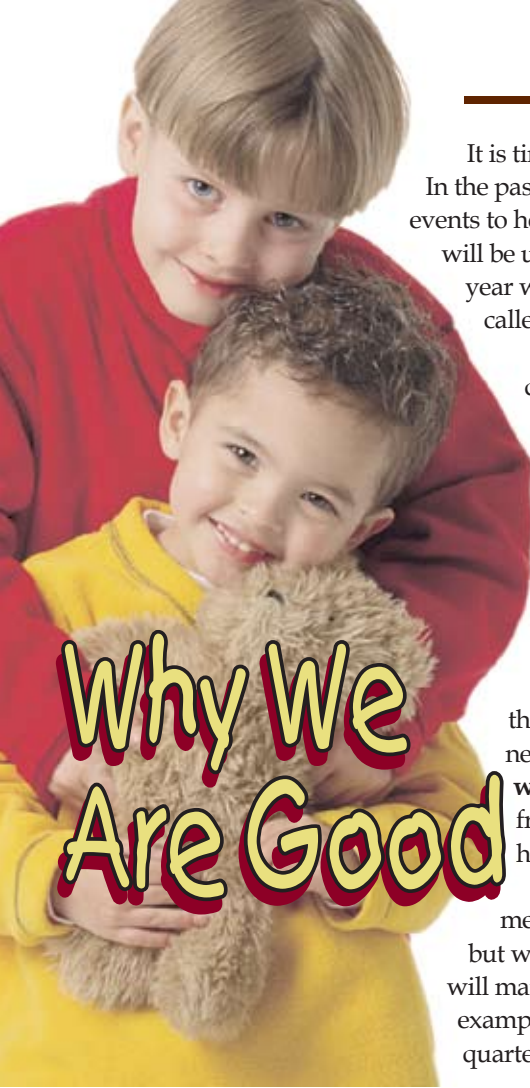
In recent years, many women are treated for osteoporosis with drugs that fall into a category called Bisphosphonates. Some examples are Fosamax, Actonel, and Boniva. Recently there have been some cases and a lot of media attention to some problems associated with these drugs. Most problems seemingly are associated with ONJ (osteonecrosis of the jaw). Yes, this does occur and hopefully I can shed some light on the subject.

What occurs is that sections of the jawbone die and have to be removed by a surgical procedure and then, hopefully, healing will occur. Sometimes it can be very disfiguring and leave people without teeth and some of the jaw. The drug works by destroying the cells that cause bone to be destroyed. This is counter intuitive because if we do not destroy the bone then the bone should be very strong. But, and there is always a but, to make new bone you need to destroy the old bone first. Without these little pac men we would not have any new bone made. Hence, osteoporosis occurs. Mostly postmenopausal women are affected. Physicians, not knowing that this is a problem, have prescribed these drugs for years. Therefore, we as Dentists have removed teeth, done periodontal therapy, placed implants and done root canals without knowing that these procedures can be what triggers the ONJ. So what do we do about the problem? Nobody is really sure exactly what to do and every group of Specialists have a different protocol but I can tell you what our office is doing.

First, the incidence of occurrence with the oral drugs is extremely low and of all the oral drugs, Fosamax might have a little higher incidence. This fact is difficult to ascertain because all this is so new. If you have taken the drugs by shot (IV) then the incidence of problems is much higher. I have not seen it but a few specialists I know have had a few cases. Bisphosphonates take a long time to do there job. For example, IV takes 6-12 months to work. The oral ones can take three years to be effective. So how does it affect our office? If you are on IV Bisphosphonates, we will not do root canals, extractions, root plannings, and implant placement until we have an OK from your physician and a statement from you accepting the potential consequences. If you are on oral Fosamax or another oral, we are OK to do all procedures within the first three years of taking the meds. Over three years we will ask you to have a blood test that is specific to this drug called a CTx test given by Quest Diagnostics Lab. This test is inexpensive and very helpful.

I am not trying to alarm people but just give some information. I hope that all physicians are more aware of what is going on and give people some options. Please understand that this class of drugs is very effective and we just have to weigh the pros and cons of taking them. On the other hand, I am not for giving all women over 40 this drug as a preventative means of dealing with osteoporosis.





# Why We Are Good

It is time for us to give back to our community again. In the past, we have done walk-a-thons and other exciting events to help raise money for local charities. Well, this time it will be up to you on how successful we are at giving. This year we are focusing on a local Ventura County group called *Casa Pacifica*.

Here is the quick synopsis of what Casa Pacifica does. This organization helps kids who are neglected, abused or have serious emotional problems. In addition, they also help families in need. Their Camarillo Campus has both Crisis care and live in treatment for a variety of problems including medical care, schooling, counseling and short-term housing. These kids are not lucky like most of our kids; they do not have the basics that we all take for granted. Casa Pacifica needs to raise 10% of all money needed from private donations. This year they need to raise over 2 million dollars so they can get the other 20 million needed to run the program. All the money goes to help and not run a huge bloated bureaucracy. These kids need our help; we can be their saviors and make a difference. Please look at their website [www.casapacifica.org](http://www.casapacifica.org) for more definitive information. Many times, we think we are immune from problems that the rest of the world has to deal with. Well we are not and we should all help whether you donate time or your money.

So Dan, enough already, what is the deal? Over the next 12 months, we will create a method for our patients to contribute to the program. I promise that we will not be obnoxious but we will have envelopes to send money directly to Casa Pacifica. In turn, the Office (me) will match your dollars at 50% of what you give. I know this is higher math so we will have an example. You give to Casa Pacifica a dollar (a bill with Washington) and I will give 50 cents (2 quarters). I will do this up to me contributing 25,000 dollars.

**THE FUN STARTS OCTOBER 1, 2007.**

**No amount is too small and I promise you will be happy for doing something to help our community. At the end of the year, we will have a party for all those who contribute (that I have matched) whether it is 50 cents or 10,000 dollars. And yes, the party will be centered around the usual In and Out truck that we always have at these soirées.**

## officeinformation

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Information included is not dental or medical advice. For your specific information be sure to consult our office. If you do not wish to receive this newsletter, please contact us directly.

## Housekeeping



The front office people have asked me to relay some messages to you. Please pay attention!

1. Do not wait until December and ask for an appointment for the filling or crown that was originally planned in March. We realize that you want to get it on your insurance this year but we book up at least four to six weeks in advance and this creates some "tightness" on all of us here!
2. We try to confirm all of the patients for the next day. You also have a card that has the day and time of your appointment on it. We help you by calling you to remind you. We are being nice. We are playing nice. When you do not show up after confirming the appointment then that is not nice. Therefore, we charge you. Everyone can forget once and we will not charge. Do it again and expect to fork over the cash.
3. The same scenario occurs if we cannot get a hold of you to confirm because we have the appointment time set aside for you. The first time no problem.
4. If you want to make your teeth lighter and have the procedure done quickly and easy, then book for a *BrightSmile*™ visit. The cost is usually between 300 and 400 dollars and it takes about 2 hours of your time. Nothing gets it done better than this process. Price varies depending on what the Company runs as a special every month. We do not set the fee nor do we collect the money.
5. *Sonicare*™ electric toothbrushes are one of the best methods of cleaning your teeth ever. It is simple to use and the results we have been seeing for the last ten years have been remarkable. Nobody we know sells them for less because we are not in the business of making money on toothbrushes. We also stock the replacement brushes should you need them.



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