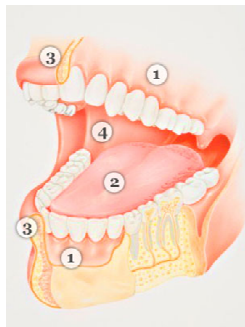




## Getting to Know Your Mouth

You talk, kiss, smile and chew with your mouth – but how much do you know about the structures that make up this important part of your body? The parts of your mouth include your gums (1) (the tissues that house your teeth and their roots); your tongue (2) (a muscle that helps you talk and contains taste buds, the small sensory organs on the base and side of the tongue that detect the flavors of food); your lips (3); your palate; and the inside of your cheeks (4). Your jaw is the joint that hinges the top and bottom sections of your mouth, allowing you to open and close it.



are easily identified, starting with number 1 all the way in the back of the mouth on the top right side. The numbering goes all the way around the mouth, ending on number 32 at the very back of the mouth on the bottom right side.

Teeth help you chew your food, making it easier for digestion. Each type of tooth has a slightly different shape and performs a different job. Incisors are the teeth that you use to take bites of your food. Canines are your sharpest teeth and are used for ripping and tearing food apart. Premolars and Molars are also used for chewing and grinding food. Third molars are commonly known as wisdom teeth. These are the last teeth to develop and do not typically erupt until age 18 to 20. Some people may never develop third molars at all.

Teeth are made of parts you can see and some you can't. The visible part of the tooth is called the crown, which you can see poking out from your gums. Below the gum is the root, which extends below the gum line and anchors the tooth into the bone. Your teeth contain four kinds of tissue and each does a different job. Enamel is the visible substance that covers the tooth crown. Harder than bone, enamel protects the tooth from decay. Enamel is made up of phosphorous and calcium. Underneath the enamel you find Dentin,

which is calcified and looks similar to bone. Dentin is not quite as hard as enamel, so it is at greater risk for decay should the enamel wear away. Cementum is the tissue covering the tooth root and helps anchor it into the bone. It is softer than enamel and dentin; the best way to protect this softer tissue from decay is by taking good care of your gums. Cementum has a light yellow color and is usually covered by the gums. But with inadequate dental care, the gums may become diseased and shrink, exposing the cementum to harmful plaque and bacteria. The pulp is found at the center of your tooth and contains the blood vessels, nerves, and other soft tissues that deliver nutrients and signals to your teeth.

Your mouth is important. Don't take your teeth or oral health for granted. For good dental health, brush and floss your teeth regularly, avoid smoking, eat a healthy diet, and see your dentist and hygienist regularly for dental cleanings and checkups. A healthy mouth makes for a healthy body... and a pretty smile.

If you have ever had any dental treatment complete, you may have heard your dentist refer to the teeth by numbers (1-32). The tooth numbering system is used by dentists for uniquely identifying and referring to a specific tooth. But how are those teeth numbered? Adult teeth are divided into four types: molars (the last three teeth on both side of the mouth on the top and bottom), premolars (next to the molars), canines (next to the premolars), and incisors (the four front teeth on both the top and bottom). You have 12 molars, 8 premolars, 4 canines, and 8 incisors. Teeth are numbered so that they



Check out page two (2) for more information about our EVENING and SATURDAY hours.



### Have you seen our blankets??

Have you seen the fleece blankets in our waiting room? They are part of our effort to provide blankets for Alliance for Smiles! This fantastic organization provides free surgery for children with cleft lips and palates. Teams of medical and dental professionals travel around the world surgically correcting these conditions and change lives. Every child who has surgery is given a blanket. To many of these impoverished families, this blanket is one of the nicest gifts they will ever receive. We would love your help providing these blankets!

Under the television in the waiting room you'll find two baskets containing large fleece squares. Help us create these blankets while you wait by tying knots according to the instructions. It's very easy and quite relaxing! If you like, feel free to take an unfinished blanket and return it when it's completed. Just ask the front desk for a "blanket making kit" and you'll have all the necessary supplies and instructions! Thank you so much for

taking time to help these children! Alliance for Smiles changes lives with each medical mission trip and you're helping support them.



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# New Years Waiting Room Workout

The New Year is fast approaching and that means it's almost resolution time! Ahhh the annual challenge of self improvement only to realize you've stopped that improvement by April. Exercise is always one of the top resolutions made. We consulted our New Patient Coordinator and resident Oral Health Care Professionals fitness expert Pat M for some tips and tricks on how to keep those exercises resolutions going strong! Pat is a Certified Personal Fitness Coach with a tremendous love and knowledge for exercise.

Pat recommends keeping workouts simple to endure your workout continues all year long. She recommended three simple exercises you can do anywhere...even our waiting room!

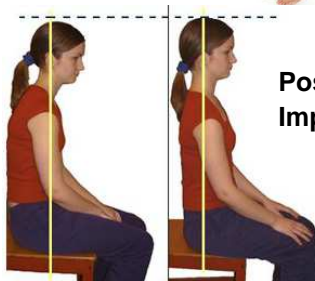
1. Chair squats (works your legs and glutes)
2. Calf raises (works your calves, hamstrings and glutes)



**Chair Squats**



**Calf Raises**



**Posture Improvement**

3. Posture improvement (works your core i.e. abs and lumbar)

AND...if anyone would like a complimentary demonstration on how to complete these exercise, feel free to ask Pat at our front desk.

Pat also recommended a few great dental New Year's resolutions...

1. Floss daily...a classic!
2. Buy that electronic toothbrush you've been considering and use it 2-3 times per day.
3. Cut down or quit soft drinks and increase your water consumption.

All great advice. Thank you Pat M.

**We strongly recommend that you consult with your doctor or fitness expert before starting this or any exercise.**

## New Thursday Evening & Saturday Appointments

To accommodate your scheduling needs, we are extremely excited to announce that starting June 2012 we will expand our hours to include **Thursday evenings and additional Saturdays each month!** We are always looking for ways to improve our patient care. We look forward to seeing you soon!

## Can you Handle the Tooth?

Several hundred years ago bad teeth were considered to be a rich man's disease. It was only the rich people who could afford to eat sweet things like Queen Elizabeth I, who had very bad teeth.

Each year, Florida Christmas tree growers produce over 120,000 freshly cut quality trees for the holiday season.

Cows do not have upper front teeth and

their bottom ones never stop growing.

In the 18th century people would sell their teeth to the rich people, who then used to make false teeth with them.

Holly berries are poisonous.

Commercial floss was first manufactured in 1882 and was made out of silk.

If you received all the gifts in the song "The Twelve Days of Christmas," you would receive 364 gifts.



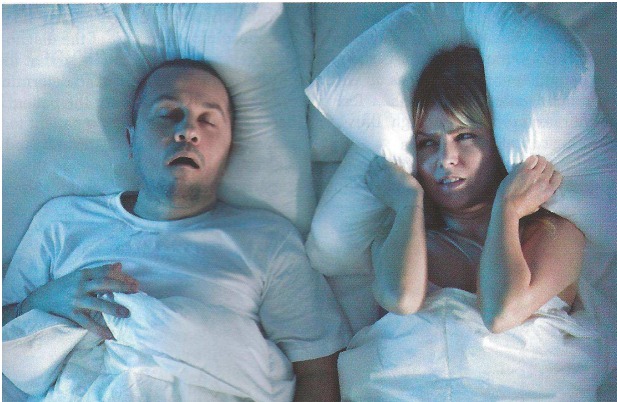
Say cheese! The calcium and phosphorous found in cheese is healthy for your teeth—it reduces the pH level in plaque and remineralizes the enamel.



# Adult and Pediatric Obstructive Sleep Apnea

By Eric G. Jackson, DDS, FAGS, FICOI, FADI

To most of the public, sleep apnea is marginally well known and poorly understood. The word “apnea” means “without breath,” which reveals an obvious problem for the well being of any individual. There are three types of sleep apnea: obstructive, central, and mixed. Obstructive sleep apnea (OSA) is caused by a narrowing of the airway where the soft tissues relax and collapse just enough to close off the throat. It will be the primary focus of this article. Central sleep apnea (CSA) is a breakdown in communication between the brain and the body during the breathing process. Mixed sleep apnea is a combination of both obstructive and central apneas. If left untreated, each of these conditions will affect a person’s ability to peacefully sleep through the night. Due to their apnea condition, their sleep will be interrupted as many as several hundred times because they will stop breathing for as long as a minute or more. In each case, the brain arouses the sleeper to wake up just enough to resume breathing.



stroke or death. Most significantly, it has been estimated that sleep apnea may decrease a person’s life expectancy by 10 or more years.

It is important to note that snoring is not the same as sleep apnea. While the symptom of snoring typically occurs in most sleep apnea patients, the reverse is not true. Other possible symptoms of sleep apnea are excessive sleepiness, irritability, impotency, job impairment, cardiovascular disease, high blood pressure, depression, impaired concentration, morning headaches, xerostomia (dry mouth). In addition to these symptoms, there is an increases probability of being involved in a car accident due to resulting fatigue and decreased reaction time. These symptoms are fairly broad however, and often go ignored or unnoticed by the patient. Without fail the primary push to seek diagnosis and treatment for apnea symptoms is the urging of a sleep partner/spouse. It can be very difficult for the person sleeping next to someone with OSA due to the volume and regular spastic gasps for air/choking that occur nightly.

and poor grades are just a few of the potential side-effects of pediatric sleep apnea. These children are routinely being misdiagnosed with learning disabilities (LD), behavioral disorders (BD), and Attention Deficit Disorder (ADD)/ Attention Deficit Hyperactivity Disorder (ADHD). They are being treated with medication and their lives are being altered due to a condition they potentially don’t have.

**If you only take away one thing from this article (hopefully not!), here it is: NO CHILD SHOULD EVER SNORE.** This golden rule is what I try to impress upon all parents. Pediatric sleep apnea patients often exhibit two additional classic presentations: grinding/bruxism of their teeth while sleeping and oversized tonsils/adenoids. Along with snoring, parents can easily identify the nighttime grinding/bruxism without the help of a medical professional. If just one of these symptoms exists, I recommend investigating further with both the child’s dentist and pediatrician.

What kinds of treatments exist for the adults and children who suffer from OSA? For adults, the gold standard treatment remains weight loss and a continuous positive airway pressure machine (CPAP). This device is a mask/tube/tank system worn at night and actively forces air down the patients’ airway to keep it from collapsing. It works very well and is worn by millions of patients, but is often described as bulky, cumbersome, and uncomfortable. For those OSA patients that cannot tolerate the CPAP, a mandibular advancement oral appliance can be fabricated by your dentist in addition to the recommended weight loss. While there are multiple types of these devices, they each essentially reposition and hold your lower jaw forward from its natural resting position thereby keeping the airway from collapsing. Like the CPAP, these devices are not without some tradeoff. Potential changes to your bite/TMJ and bulkiness are two such possible tradeoffs. Another option available to is surgical correction, however it is typically my least recommended option.

According to the American Academy of Dental Sleep Medicine, over 12 million Americans currently have OSA. This number is around the same level of people with asthma (10 million) and diabetes (16 million). Men are twice as likely to have signs and symptoms as women. OSA is a progressive disease as it progressively worsens with age and with increasing weight. In 2005 the Yale University of Medicine published a study in the November 2005 *New England Journal of Medicine* stating that any form of sleep apnea doubles or possibly triples a person’s risk of

**CHILDREN ARE SUCEPTIBLE TO SLEEP APNEA AS WELL!** Pediatric obstructive sleep apnea is even less well known and less diagnosed than its adult counterpart and has become one of my primary lecture topics and passions. Nearly 1 in 5 children exhibit some sort of sleep disordered breathing ranging from mild snoring to obstructive sleep apnea. Like adults, these children are simply so tired from a lack of quality sleep that their personalities, behaviors, and schoolwork are affected. Acting out, difficulty to concentrate/learn, bed wetting, stunted growth, memory problems,

(Continue on Page 4)



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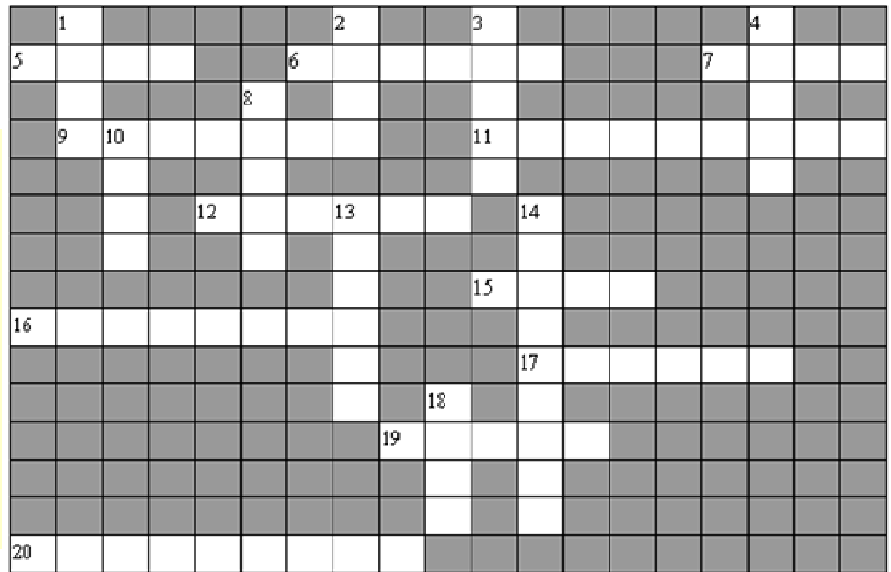
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## *Flossword Puzzle*



### ACROSS

5. \_\_\_ Frost (1996, 1998)
6. The \_\_\_ Stone (2005)
7. \_\_\_ Christmases (2008)
9. Babes in \_\_\_\_\_ (1996)
11. The \_\_\_\_\_ Before Christmas (1993)
12. \_\_\_\_\_ All the Way (1996)
15. \_\_\_ Claus (2007)
16. National Lampoon's Christmas \_\_\_ (1989)
17. Miracle on 34th \_\_\_\_\_ (1947, 1994)
19. I Saw \_\_\_\_\_ Kissing Santa Claus (2002)
20. It's a \_\_\_\_\_ Life (1946)

### DOWN

1. All I \_\_\_ for Christmas (1991)
2. Die \_\_\_ (1988)
3. Home \_\_\_ (1990)
4. The \_\_\_ Express (2004)
8. The \_\_\_ Christmas Tree (1964)
10. Don't \_\_\_ till Christmas (1984)
13. How the \_\_\_ Stole Christmas (2000)
14. A \_\_\_\_\_ Carol (1938, 1951, 1971)
18. I'll be \_\_\_ for Christmas (1998)

(Answers on the bottom of page three)

### Adult and Pediatric Obstructive Sleep Apnea (Con't)

For pediatric patients, initial treatment involves non-invasive methods such as improving sleep patterns, increasing sleep hours, and weight loss. If ineffective, a tonsillectomy is the next option typically discussed with an ENT. Decades ago tonsillectomies were commonplace for many children and often completed to address chronic sore throats, infections, etc. It is likely that many of these children had OSA as well and inadvertently received the proper treatment for that disease. These days the pendulum has swung the opposite way, and tonsillectomies are performed far less often...hence the increase in pediatric OSA! Along with adenoidectomies, tonsillectomies free the airway of obstruction and provide a clear path of breathing for the growing child. We at Oral Health Care Professionals have excellent working relationships with several talented ENTs in the area who routinely complete surgical procedures to address pediatric OSA. I have personally witnessed dramatic improvement in the quality of life for both pediatric patients and their parents. Nearly 20 years ago, one of my colleague's sons suffered

from pediatric OSA and exhibited many of the negative behavioral and educational side-effects mentioned earlier. He pushed for the tonsillectomy & adenoidectomy as treatment, with resistance from many individuals who were pushing for a diagnosis of LD/ADD. He was successful and once the surgery was completed, the boy exhibited dramatic changes. Consistent bad behavior became normal childhood behavior and poor grades completely reversed. His son graduated high school at the top of his class and is currently a successful young adult. Obviously this story is an example of the dramatic importance of curing pediatric OSA, and not an example of guaranteed results. It does show that proper diagnosis and a simple surgery (that few if any children remember if completed young enough) to treat the condition can have a profound impact on the child's future.

This article provides only a limited glimpse into the topics of adult and pediatric sleep apnea. If you have any further questions or would like to know more, please do not hesitate to contact me at the office. Of course, feel free to schedule a consultation appointment with me if you, your spouse, or your child exhibit any apnea symptoms mentioned. Thank you.

### News Bites with Laura

**According to the American Dental Association, poor oral hygiene is a major factor in gum disease for everyone, but it is even more so for a person with diabetes. Good oral hygiene and regular dental check ups are essential in preventing gum disease. Be sure to tell your dentist and hygienist that you have diabetes so that he can detect any signs of early gum disease.**