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THE DENTCARE

Your Monthly Health Care Magazine

Brightening smile the world over

Oral Health in Children

The Myth and Reality of
OROFACIAL CLEFT

Smile Your Stress Away

**Monsoon
Health Care**

Exclusive with

Padmashri Prof. Dr. A. Marthanda Pillai



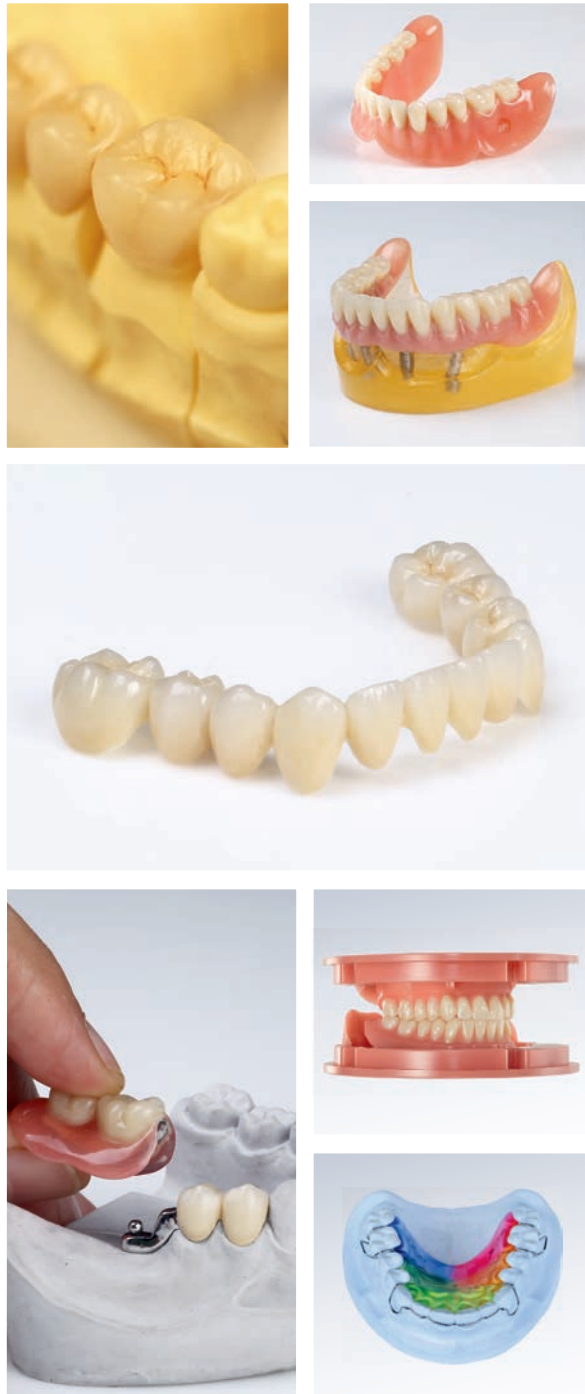


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Dear Reader,

You remain in the pink of health because of unsung heroes who have sacrificed the larger part of their precious lives to keep you robust.

Doctors truly deserve more than just a day in July. Everyday should duly be a reserved celebration for their perennial dedication to the ministry of healing mankind.

This thought would seem rather farfetched in an age where we are constantly questioning our own souls for an answer to if man is really kind anymore??

I do agree that every profession is falling victim to these harsh times. The medical one too is not without its share of controversies.

Unfortunately, it is when the human in the doctor surfaces that things go awry. It takes a lot of moral strength to withhold from the enticing pursuit of the unethical. The guardians of this noble creed need to be earnestly vigilant in these trying circumstances.

Dentcare has warm reason for a Duchenne smile. We are blessed to have brightened forty million smiles world over – a moment we owe to the unflinching spirit of the forty thousand dental professionals who have touched these lives. In gratitude, we prevail as your passionate partner in the pursuit of excellence.

On the other side of success is the more daunting fear of failure – a ground for immense stress for many – the lasting effects of which could even strain your oral health. Brushing was never a mistake in this regard provided you ascertain if you have got it right from these pages.

Virtual consumption in our lives is yet another disturbing cause, today. Are our heads well protected from its vicious onslaught? A Helmet has a profound role to play, otherwise!!!

A word of advice – Choose to eat healthy to beat obesity.

If you are still looking for a chance to flaunt your pearly whites, do not hesitate to glance through the diverse array of world class options we have in store for you @ DentCare.

Yours truly,

Prof. (Dr.) George P. John

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It's Doctors' Day!!

*Respect the white coat that doctors wear;
Respect the stethoscope with which they hear;
Respect the prescriptions they write so dear;
Respect doctors for they do truly deserve!*

*Doctors do dare to treat every disease;
They do their best to get their patients well;
Some of them are doyens, pioneers rare;
Some do miraculous feats, at which all stare!*

*Wish doctors all, 'A Happy Doctors' Day!
Thank them for their hard work and pray on all day;
Remember, they do keep diseases at bay;
And do their jobs in a noble way!*



*Dr. John Celes is the pseudonym of **Dr. A. Celestine Raj Manohar**, an Indian Doctor who has specialized in General Medicine. He was the Dean and Professor of General Medicine at IRT Perundurai Medical College, Tamil Nadu, India. He is a versatile writer who has composed more than 4000 poems, of which 200 plus poems pertain to Medicine. His poems have been published on the famous website 'PoemHunter.com' which has given him international recognition as a poet.*

'THE DENTCARE' Wishes all Doctors a very Happy Doctors' Day!

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Lessons Learned from Failures

Mr. John Kuriakose

Managing Director, DentCare Dental Lab Pvt. Ltd.



In the postmodern era, many people are afflicted with **Atychiphobia** (abnormal and persistent fear of failure) that they are easily shattered in the face of adversities. Failures in the examination can make students and their parents fall miserably into the nadir of despair. There are also many schools that screen studious and non-studious students and permit the studious ones to appear for Board examinations.

When it is not possible to obtain the desired ranks in the Entrance Examinations, many think that their lives have ended prematurely. In addition, their kith and kin would taunt and disparage them by equating them with those who have excelled in the examinations. There were also isolated events of committing suicide when students failed to secure the expected scores in the examinations.

Is this the right perspective to deal with failures?

Henry Ford, the founder of the Ford Motor Company once remarked, "One who fears failures limits his activities. Failure is only the opportunity to more intelligently begin again."

You can learn many lessons from failures. Failures will help you understand yourselves, enable you to identify your uncongenial lifestyle, help rectify your unhealthy tendencies, assist you to seek new avenues and give you the strength to 'forge ahead' further. Failures will also help you gather courage and persistence to face challenges of life successfully.

When many students achieve success in the examinations, a few fail miserably. Even though these children fail in the examinations, they may have capabilities in other fields. You should learn that nobody is superior or inferior to others.

I shall recount a simple story. Long ago, a Tribal Chief, Thevan was moving along a verdant forest with two of his companions; a monkey and an elephant. After striding for a long time, they reposed under a tree that was loaded with sweet and delicious fruits.

The monkey climbed up the thorny tree and plucked some fruits. All of them ate the fruits and satiated their hunger and fatigue.

After a while, they resumed their walk. On the way, the Chief thought to himself, "this monkey is far better than the elephant". After a long journey, they arrived at a trench. It was too wide to jump across. After a while, the elephant dragged in a heavy trunk from elsewhere and put it over the channel and all of them safely crossed over it. It made the old man understand that everyone has their own capabilities which become apparent at the appropriate time only.

Never should you brand your children as incompetent on the simple reason that they have failed in the examinations. The fear of failure makes many children think that there is no purpose in living and end their lives prematurely; before they really know what actually life is: many of them run away from their home while some get addicted to drugs and alcohol.

Many of these children gradually become criminals or mentally deranged and wander about aimlessly, discarding moral and ethical values. In addition, a few of them end up in terrorist groups. Had teachers and parents viewed failures as a stepping-stone and taught the children accordingly, these youngsters would not have gone astray. More than that they would have become promising youths of strong values, capable of helping others cross the chasm of failure successfully.

I choose to give a piece of advice to the young students. Instead of fearing failures, scrutinize them closely before making appropriate rectifications and go ahead enthusiastically with an adamant faith in the Almighty God. Remember your 'life' is precious and priceless. You should live for the progress and welfare of your Family, Society and Nation and for the glory of the Lord. May God give you the composure to crush the setbacks of life 'underfoot' and help you scale the zenith of success. ☞



Influence of Stress on Oral Health

We live in a time where life is very fast-paced and challenging. It requires facing and coping with challenges of varying intensity at different points in time, which can be mentally exhausting, leading to tremendous stress and anxiety. Stress is shown to have detrimental psychological and physiological effects. These physiological effects also extend to the oral cavity.

Poor oral hygiene maintenance

It is less likely that a good daily oral hygiene routine would be a priority for a person who is stressed or anxious. Not brushing and flossing regularly and efficiently puts one at a greater risk for tooth decay and gum disease.



Dr. Eric Mario Shailander A.
Consultant Periodontist
Bengaluru, Karnataka, India

Bruxism

A stressed individual has the tendency to subconsciously grind or clench his teeth while asleep. This is clinically referred to as 'Bruxism' and is considered a parafunctional habit. Bruxism can cause aggressive wearing away of the enamel and chipping away of the tooth structure. This damage is irreversible and can cause tooth sensitivity, including changes to the vertical dimension of the face. The occlusal table also gets altered and can lead to a flattening of the grinding surface of the teeth involved. This can cause food to get impacted between teeth, leading to periodontal infection.

Chronic stress causes the muscles in the body to be in a constant state of tension due to reflex reaction / mechanism. Clenching and grinding of teeth makes jaw muscles sore, making it hard to open and close your mouth or even chew food. Bruxism can also affect the periodontal structures by increasing the load beyond the normal tolerable threshold, causing a cascade of events that eventually lead to periodontitis.

Effects of Teeth Grinding

- > Broken dental restorations and tooth sensitivity
- > TMJ disorders and Facial pain



Hormonal imbalance

Stress causes a negative hormonal imbalance in the body through various physiological signalling mechanisms. These changes have a direct influence on the production of saliva. Reduced salivary production can cause dryness of the mouth (Xerostomia). A frequently dry mouth causes a rapid build-up of plaque and increased incidence of caries. Dry mouth can also cause the tongue to become very sensitive.

Hormonal changes can also lower your immunity against infections, due to a breakdown in the protective factors. This also increases fungal and other opportunistic infections. Aphthous ulcers may appear as red lesions with a white or yellow centre on the inside of the cheeks or lips, the tongue, the upper surface of the mouth or the base of the gums. They may cause burning sensation in the mouth, pain, inflammation, fever and swollen lymph nodes.

Ulcers are non-contagious and usually resolve spontaneously within a week or so. They may also make it difficult for a person to maintain good oral hygiene or chew and swallow food

Chronic stress causes the muscles in the body to be in a constant state of tension due to reflex reaction/mechanism

properly. Reduced immunity can also delay or prevent efficient healing, especially after dental procedures.

Oral lichen planus

Oral lichen planus is a chronic inflammatory condition that affects mucous membranes inside the mouth. They may appear as white, lacy patches; red, swollen tissues, or open sores. These lesions may cause burning, pain or other discomfort. Lichen planus is believed to be a hyper reaction to viral infections due to stress.



Poor choice of diet

Stress eating or comfort foods usually involve junk foods that are high in carbohydrates and sugars which, when coupled with poor dental habits, cause an increase in dental caries and periodontal infections. A poorly nutritious diet or not eating enough at regular intervals due to stress can also cause additional harm, as a result of acidity and regurgitation.

Poor coping mechanisms

Poor coping mechanisms to stress, such as smoking, drinking, chewing tobacco or substance abuse have either direct or indirect effects on oral health and at times, they can even have a synergistic detrimental effect as well.

Psychological problems

A lot of psychological issues may also arise due to stress. Sometimes a pseudo-perception of a non-existent problem may be observed in stressed individuals. They are usually diagnosed when no

visible clinical signs are evident: for example, 'burning mouth syndrome', which presents with a sensation of burning all over the mouth. It does not seem to respond to medication. Other issues include a feeling of itchiness in the gums, constant pain in the jaws, and even complaints of bad breath or bleeding in the mouth, even if it does not exist.

Irregular dental visits

A stressed individual is less likely to maintain regular recall visits to the dentist. A dentist can identify stress situations and can help manage and enhance your oral routine during stressful periods.

Conclusion

Everyone faces stressful situations in life in one way or the other. But a chronic stressful state where a person is unable to cope with the situations can be hazardous. It is always beneficial to speak to those around you or even seek professional counsel, when situations become hard to handle. This can help you maintain and lead an overall good, healthy life. @



Monsoon Click



Baby Meenakshi Jayan, Kollam, Kerala, India / Photo Courtesy: Santhosh Kumar, Kavanadu

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Monsoon Health Care

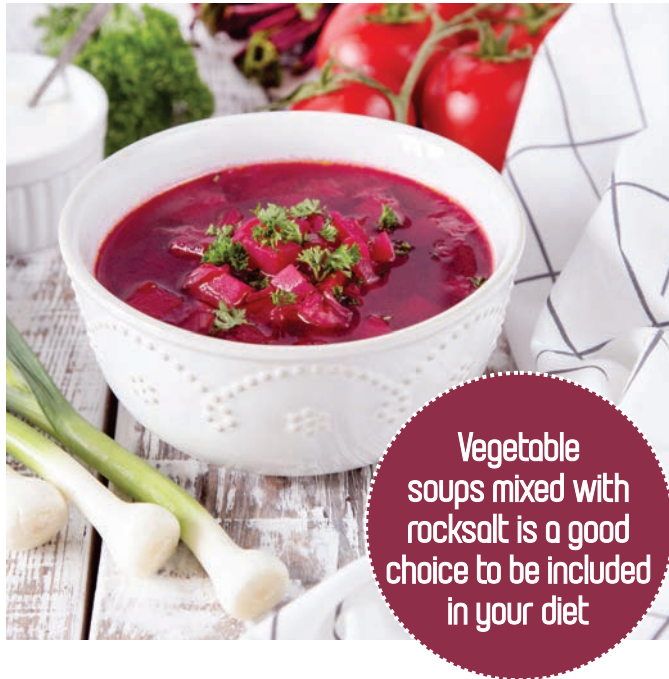


Dr. Parvathy S.
Assistant Medical Officer
Aneppil Sreedhanvanthari
Ayurveda Hospital
Kollam, Kerala, India

Monsoon is popular for its romantic background with the lullaby of rain. But regarding health, it is the time for many epidemics, as the atmosphere is prone to more microbes. Due to sudden change in the climate, the immunity of our body becomes compromised, making us susceptible to many diseases.

Ayurveda and Monsoon

According to Ayurveda, Monsoon comes under Varsha Ritu (rainy season). During this season, our digestive power is weak and the immunity is low. Hence, we have to adopt Varsha Ritu Charya (specific lifestyle for the rainy season) to overcome its ill-effects.



Regimen

Since the atmosphere is loaded with microbes in rainy season, you have to change your day-to-day activities slightly to avoid getting infected / sick easily.

A few simple tips

- ⦿ Avoid sleeveless dresses and keep the body fully covered
- ⦿ Skin and hair should be given special care, as there are chances for moisture retention which in turn, leads to health hazards
- ⦿ Day sleep should be avoided
- ⦿ Panchakarma therapy, the ultimate mind-body healing experience for detoxifying the body, strengthening the immune system, and restoring balance and well-being is recommended during this season, as it helps detoxify the body
- ⦿ Hot water bath is effective in managing body pain and keeping the body warm
- ⦿ As and when your feet get wet, make sure that they are dried thoroughly
- ⦿ Use of fumigants is recommended for disinfection and keeping the surroundings warm

Diet

As the digestive power decreases, our diet has to be adjusted to suit the declining appetite. In general, following a healthy diet is essential for a healthy living.

- ☑ Use fresh, warm and easily digestible food
- ☑ Cooled boiled water should be used for drinking
- ☑ Cow ghee, green gram, lentils, rice and wheat are preferred
- ☑ Ginger and green gram can be included
- ☑ On cooler days with heavy rain, sour and salty food mixed with ghee is advised



- ☑ Use of grape wine and honey can be practiced
- ☑ Vegetable soup mixed with rock salt is also a good choice
- ☑ Avoid leafy vegetables and uncooked salads
- ☑ Red meat is hard to digest and hence, minimize its use
- ☑ Buttermilk can be used instead of curd
- ☑ Wash all the vegetables and fruits thoroughly before use
- ☑ Frozen and stale food is to be avoided

Prevention is better than cure

Make sure that you take medical treatment as soon as you get sick. For preventing epidemics during Monsoon season, you have to start taking precautions from the summer season onwards by keeping the environment clean and hygienic.

During Monsoon, you also have to take necessary precautions by making specific changes in your lifestyle. According to Ayurveda, abrupt changes in diet and lifestyle to suit the seasons are not good. These changes should be gradual, i.e., over a period of 15 days, to help your body acclimatize to the new lifestyle.

Enjoy a happy Monsoon with a healthy body. ☒

10 Brushing Mistakes We Make Every Day!!!

Though you have been brushing your teeth for years, you will be surprised to learn that you have not been doing it properly. There are several common mistakes that you make when it comes to brushing your teeth. Just a small adjustment can help you get on the way to better habits.

Ten common brushing mistakes you might be making



Dr. Mayakha Mariam
Dental Practitioner
Pathanamthitta, Kerala, India



1 You pick the wrong toothbrush

A toothbrush helps clean or clear away the food particles that are stuck between your teeth. You may be using a power toothbrush or a manual one. The key factor is that it should have soft bristles. The bristles should be soft enough to bend in, to get right under the gum. This will help remove the bacteria and plaque on your teeth and gums. Plaque is a soft and loose layer that forms on the surface of your teeth. It can cause gum disease and tooth decay. A soft brush is very effective in cleaning your teeth.

People generally think that the harder the bristles are, the more they help in cleaning their teeth. But that is not necessarily true. The use of hard toothbrush or even a medium one for a long period can damage your gums and abrade your teeth.

2 You use the wrong toothpaste

There are different types of toothpaste available in the market and each one claims to be the best. A few are:

- ⦿ Anti-cavity toothpaste
- ⦿ Periodontal toothpaste
- ⦿ Toothpaste for sensitive teeth
- ⦿ Fluoride toothpaste
- ⦿ Whitening toothpaste

Do you know that there are certain types of toothpastes only meant for sensitive teeth? I am sure that not many know this. I have seen a whole family using Sensitivity toothpaste. In fact, this type of toothpaste is meant only for the population, especially the elderly who have sensitivity towards sweet, cold or hot foods. That is where you might be making a mistake. No matter how good toothpaste is, all you need to know is which type is the best one for you. Your dentist can help you find out the best one for your teeth.





3 You do not brush long enough

Proper brushing takes at least a couple of minutes. You might be surprised that most people in a hurry do not even come closer this duration. It will be good, if you consider brushing one minute each on both the upper and lower teeth. You can use the stop watch on your phone. Another fun way to make sure that your kids brush long enough is to use a small two-minute hourglass / sand timer. Headphones are yet another easy way. If you can brush while listening to your favorite song of 2-3-minutes duration, it will help ensure that you have brushed for two whole minutes.

There are also electric toothbrushes with self-timer to help you get on track. Two minutes is sufficient enough for the toothpaste ingredients to act on the dirt and bacteria. If you do not brush your teeth long enough, your teeth may not get clean enough. If you leave behind bacteria on the tooth after brushing, it may lead to serious problems, such as gingivitis or periodontitis. Additionally, according to recent studies, heavy plaque formation in the mouth leads to plaque build-up in the arteries, which in turn, can lead to a heart attack.

5 You give too much gap between brushings

Same as your body, your teeth need regular cleaning too. The food remnants or plaque on your teeth should be cleaned off at an interval of every 12 hours. There is always a risk of plaque build-up on your teeth, if you do not brush often. Plaque can lead to calculus, a yellow lining on the base of the tooth that meets the gum. This is often the first cause of gum disease which may lead to the inflammation of the gums and bleeding during brushing. That is why, it has been recommended that everyone should 'brush twice a day'; once in the morning and once at night. Brushing the tooth twice a day will help improve your oral health, besides boosting your overall well-being.

4 You go back and forth

You need to brush your teeth vertically to remove the dirt. Brushing hard in back and forth direction will not help remove the pieces of food stuck between your teeth. Moreover, brushing with too much pressure can cause abrasion of the enamel and gum tissue, which in turn, contributes to tooth sensitivity. This is usually evident from the horizontal cuts seen on the teeth in elderly people, due to years of horizontal brushing, especially with a hard toothbrush.



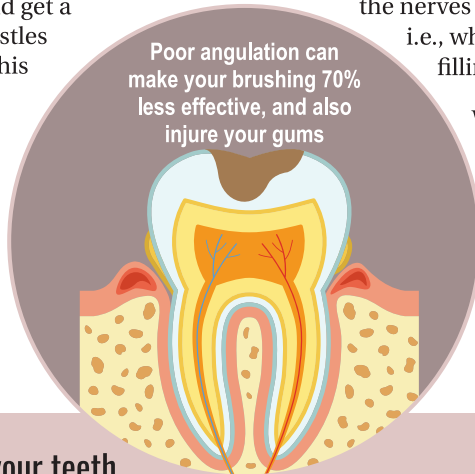
6 You forget the rest of your mouth

It has been a traditional thinking that brushing means brushing only your teeth. This is absolutely wrong! What about the bacteria and dirt on the remaining part of your mouth? Firstly, you should also brush your gums while brushing the tooth. Ideally, you have to brush the gum line as well. The gum line is the area where your teeth and gums meet.

Secondly, you should brush the tongue after brushing your teeth and gums. The cause of bad smell in the mouth is mostly because of the decayed food particles and odor-causing bacteria in your mouth / tongue. So you should consider it as essential to clean your tongue as well, with a toothbrush or soft tongue cleaner.

7 You hold on to your toothbrush too long

The average lifespan of a toothbrush is three months, if it is consistently used twice a day. After the stipulated period, you should discard it and get a fresh one, as the bristles would flare out by this time, leaving the bristles to angulate in wrong directions. Poor angulation can make your brushing 70% less effective, and also injure your gums.



8 You do not check out your own teeth

Often in hurry, you may not bother checking your teeth. Since you do not feel any irritation or pain, or you are in the belief that brushing has removed all dirt, you may not check if there is any cavity, or food lodgment. One thing you do not know is that a cavity does not hurt or give any sensation / alarm unless the bacteria enter the innermost part of your teeth, which contains the nerves and blood vessels. Only then, you feel toothache, i.e., when it is too late to save the tooth with a simple filling.

Why should you let the situation deteriorate? Here is what we can do. After each brushing, look in the mirror for any deposits on your gum line both on the outside and inside of your teeth. Secondly look for any black spots on the surface of each tooth. If you see any of these, consult your dentist and get rid of those hard deposits or black spots, as soon as you can.

9 You brush your teeth straight after or before eating

Now, there are a few people who are very conscious about their oral cleanliness and brush almost perfectly, spending a lot of time and effort. But they may also end up having issues. Here is yet another mistake, we might be making: that is, brushing right before breakfast and right after dinner. Yes, this is harmful. What happens after brushing is that the minerals are being rebuilt up on the tooth surface. Having food right after brushing also affects the remineralization pattern going on in your mouth.

On the contrary, soon after eating, your mouth holds an acidic environment. Brushing in this acidic niche can dissolve your enamel surface causing sensitivity. Therefore, it is best recommended to give a 30 minutes' gap between your brushing and eating and vice-versa.



10 You leave your brush overnight in the bathroom open

You might think that this is probably the least possible mistake you make. There are two things behind this. Firstly, many studies show that toothbrushes, which are left open in that bathroom, are likely to have fecal species on it. It is a proven fact!

Secondly, insects and crawlies may come and lick your brush at night. This is also unhygienic. So, the best solution is to keep it outside your bathroom, essentially undercover.

Conclusion

Curing a disease is always more expensive and cumbersome than its prevention. Brushing your teeth correctly will help prevent problems in future, leaving you with reduced dental bills. In short, the correct way of brushing not only helps save your teeth but also helps prevent many serious diseases! ☑



NIPAH VIRUS:

A Deadly Zoonotic Disease Part-II

What is being done to prevent or control this disease?

Prevention and control measures of Nipah Virus (NiV) infection focus on its immediate eradication by mass culling of infected and 'in-contact' pigs, along with the surveillance of the antibody of high risk farms to prevent its further outbreak. After culling, the burial sites have to be disinfected with Chlorinated lime. It is also recommended to use Sodium hypochlorite (bleach) to disinfect the contaminated areas and equipment.

Other important measures to check the spread of the infection are a ban on the transportation of pigs from one place to another within the affected country and also a temporary ban on pig production in the affected regions, along with improved biosecurity practices.



Dr. Arpit Sikri
Assistant Professor
Department of Prosthodontics



Dr. Jyotsana Sikri
Senior Lecturer
Department of Conservative
Dentistry and Endodontics

Sudha Rustagi Dental College and Hospital
Faridabad, Haryana, India

Proper education and the use of personal protective equipment (PPE) by the persons exposed to potentially infected pigs are necessary. Also, improved hygiene on the pig farms is essential. One of the most important biosecurity measures for the affected areas is to decrease the likelihood of bat reservoir hosts coming into contact with the pig farms.

Research into the development of vaccines for NiV has been going on in Australia and France.

Do's and Don'ts

Do's

1. Wash the hands with soap and water before and after meals and also after coming from the market or other places.
2. Maintain respiratory hygiene and cough etiquettes.
3. Consult your Doctor immediately, when you have symptoms similar to those of viral fever with neck rigidity. Do not self-medicate.
4. Healthcare workers are advised to use 'full barrier personal protective equipment' before examining patients.

Don'ts

1. Not to eat any fruit partially eaten or having bite marks of bats or other animals. Special precaution should be taken with fallen mangoes / fruits lying under the trees.
2. Stop the consumption of raw date palm sap.
3. Avoid visiting the infected regions.
4. Avoid going to crowded public places.

What a Dentist should know?



Nipah Virus can be readily inactivated by soaps, detergents and disinfectants. Routine cleaning and disinfection with Sodium hypochlorite and Glutaraldehyde is very effective. This Virus can be destroyed in 60 minutes with water at 100 degrees Celsius. Hence, it is advised that the entire instrument should be properly autoclaved before use.

Present outbreak of Nipah Virus Infection calls for taking a few precautions in dental clinics as well.

- Ensure the practice of Standard Precautions to prevent the transmission of diseases; e.g. double surgical gloves, proper eyewear to avoid aerosol contamination, double / multiple layer masks, and apron for doctors and assistants. N95 mask should be the mask of first choice.
- Use of barrier techniques and proper disposal of barrier materials are to be done.
- Hand washing / intensive hand washing practices should be followed after each case. Maintenance of personal hygiene is also very essential.
- Assistants should use rubber gloves while handling used instrument and medical wastes.
- Proper sterilization of entire instruments, including files and dental burs, gutta-percha, impression trays etc., after use.
- Disinfection of Impressions.
- Proper disposal of waste, including used needles and blades.
- Maintain proper record of patients and treatment. Also educate patients to inform their doctor when they themselves or their relatives have any signs and symptoms of Nipah Virus infection at the time of or after treatment.
- Identify the symptoms like fever, headache, drowsiness etc. lingering for a few days and go for proper medical check-up and care. (Remember the incubation period is 5 - 14 days; so the infected person can be asymptomatic, when he comes for dental treatment).
- Minimize bystanders in the treatment room.



Vaccines and antiviral therapies are necessary, not only to alleviate the health concerns of the general public, but also to reduce the risk to researchers working with NiV

You can also take the following Precautions

- Reschedule the appointments for 'Elective scaling', Crown preparations or Restorations to reduce splatter contamination. It is also better to put off Elective procedures and only emergency procedures need to be carried out.
- Emergency cases like dental extractions, drainage of abscess etc. should be done with extra precautions.
- Use of disposable drapes for patients is recommended.

Future Direction

Vaccines and antiviral therapies are necessary, not only to alleviate the health concerns of the general public, but also to reduce the risk to researchers working with NiV. For the development of vaccines / antiviral therapies, a number of experimental models exist: Golden hamsters and Guinea pigs are the models for antiviral drug testing, since they show similar histological lesions, whereas cats have been used as a model for successful Guanine nucleotide-binding proteins (G-proteins) subunit vaccine experiment.

Indeed, the development of vaccines does not appear to be a serious challenge, as a number of experimental vaccines have already been demonstrated to be effective in model animals. The key issues with the vaccines are their enormous cost and non-availability.



Conclusion

Human-to-human transmission of NiV has significantly contributed to the spread of this highly lethal pathogen in Bangladesh, India and Philippines. Human-to-human transmission is mainly due to the close contact with infected people. Basic infection control measures are very critical in controlling the transmission of NiV infection.

Holistic measures are necessary to prevent the spread of NiV infection in human and domestic animal populations. 'One Health approach', including education and 'healthcare improvement efforts' are also necessary to contain the transmission of this epidemic. [10]



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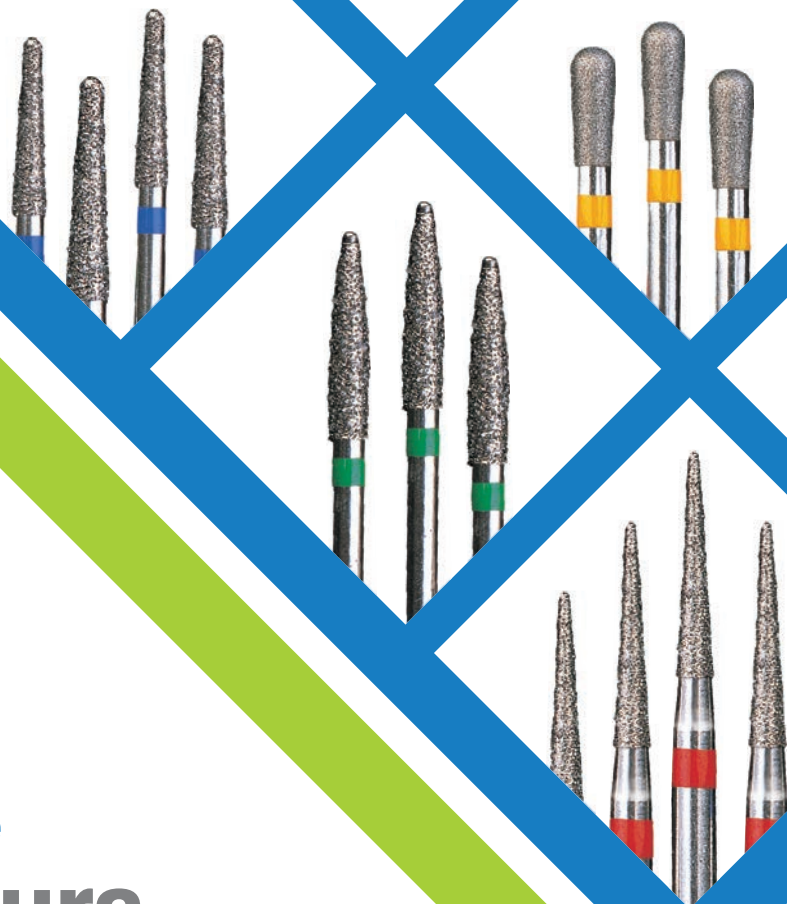
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HELMETS AND MOTORCYCLE Road Traffic Accidents

As an Ophthalmic Plastic and Reconstructive surgeon, I have had the misfortune to see the after-effects of Road Traffic Accidents (RTAs) on a nearly daily basis. The vast majority of RTAs in India involve motorcycles / scooters. Some of the injuries are so severe that sometimes, we may wonder 'what the hell' are we going to intervene.

Those are the lucky ones who at least get a chance to be taken to the hospital, after a road traffic accident. Many die on the spot of the accident or on their way to the hospital, due to severe head injuries, blood loss and / or mental shock. In many of these cases, the head is the most commonly injured part of the body.

With the advancement in technology, the speed of

vehicles has also increased in alarming proportions, which accounts for the increase in high impact crashes, producing even more ghastly injuries than ever before.

A team consisting of myself, a Maxillofacial surgeon and a Neurosurgeon along with several 'residents of various Specialties' took a little more than eleven hours to piece the shattered face of a victim together. We had to put in an incredible number of Titanium Implants to reconstruct his face.

However, even the prolonged surgical procedure could not bring him back to his former look. After the first one, several more surgeries were required, but all of them produced diminishing outcomes.



Dr. Reghuraj S. Hegde
Consultant Ophthalmologist
Bengaluru, Karnataka, India

Every time when the lucky ones get to the hospital after a road traffic accident, the first question I used to ask them is;

“Were you wearing a helmet?” or “Were you wearing a seat belt?” depending on the type of vehicle they were riding at the time of the accident.

The second question I used to ask them is;

“Who was travelling with you?”

Inevitably, almost without exception, the victims would not have been wearing a seatbelt or a full-face helmet / 'half helmet' / 'industrial helmet'. A 'half helmet' is meant only to fool the traffic police, as it cannot help protect the wearer's head during a Road Traffic Accident.



Usually, the pillion riders on motorcycles hardly ever wear a helmet and hence, on many occasions, they had to pay the price; sometimes, even more than that of the riders. When I asked why they had not been wearing a helmet / seat belt, the answers I invariably got were the following:'

- It was a short distance, so I did not think that it was necessary' (You need not have to travel to the Himalayas to get into a vehicular accident) '
- I forgot' (I wonder if they forget to eat too) '
- I was a pillion rider' '
- I am a lady' (a woman's skull is as vulnerable to injuries as a man's)
- It was hot'
- Nobody wears a helmet in my village'
- The other driver was drunk'

And one more answer which they were probably too hesitant to tell was,

- Wearing a helmet will cause hair loss / make my hairstyle ugly' (I do not know how important that is on a dead body or a disfigured face)

Looking at the above answers, one will really wonder, whether anyone of them values his / her own life. It seems that saving their life is everyone else's responsibility. There were instances when the helmeted riders escaped unscathed while the un-helmeted pillion riders got injured badly. This reveals the inevitable role of helmets in reducing serious injuries to the head during an RTA.

Certain cinemas / advertisements have also contributed to people's apathy towards wearing helmets, as actors in these films were doing motorcycle stunts without wearing helmets, which in turn, have negatively influenced the youth to ride motorcycles without wearing helmets.

The dangers of not wearing a helmet are not restricted to the youth alone. One of the most pathetic things is that in the majority of cases, parents were seen riding motorcycles wearing a helmet while their children riding pillion were bareheaded.

A typical 'Indian family on Scooter / motorcycle' consists of 4-5 members. In most cases, all of them were not wearing helmets except the rider. They might be seen travelling and balancing on a two-wheeler like a circus man. It might seem that they were living for making the journey together on a motorcycle.

Why do people take so much risk in riding motorcycles with their loved ones without wearing helmets, excepting the riders, when they want to get to some place? How much time or money do they really save by riding so recklessly?

A significantly large number of women / girls, mainly from lower socio-economic strata, suffer facial trauma and head



injuries due to RTAs. Most of them were not the riders. In most cases, the husband / brother / father who rode the bike was wearing a helmet while the pillion riders, who were their wives, sisters or daughters, were not wearing ones.

While riding a vehicle, you should always remember that your own driving contributes only to a part of the reasons, if any, for RTAs. Many accidents happened mainly due to reckless driving / overspeeding.

Occurrence of an accident is not always the results of your poor driving skills. It does not matter whose fault it is; if a road traffic accident happens, it is your life that is at stake. Therefore, you should take as many safety precautions as possible to help save your life from dangers.

It took an inordinately long time for Government of India to bring in the legislation, making helmets mandatory for pillion riders as well. Some quarters even asked for helmets to be made optional for women (as if their heads are made of some different material than men's). Even now, the law has been partially enforced only in metro cities while in small cities, towns and villages, it is yet to be enforced.

The steady increase in the number of RTAs all over India shows that the legislation has not been effective in stemming the tide. In fact, India ranks first in RTAs and deaths in the world. The public often consider that it is really inconvenient to wear helmet or seatbelt' and feel that the law has been enforced only to let the police officers to make extra buck via bribes.

The police personnel are not helping it either. They are not taking stringent action against the offenders. Many policemen are seen riding an official motorcycle without wearing helmets. The traffic



policemen often let 'the scooter family' pass by. When persons who are in authority do not seriously take action to enforce the law, how will the public be expected to take it seriously?

Even now, many people may question the idea of enforcing the legislation making helmets mandatory. When a person dies on the road due to an RTA, especially for the simple reason of not wearing a helmet, the country loses a valuable resource, since the country has already invested its limited valuable resources for that person to grow up and get educated.

It is the loss of the country when a person dies in an RTA. Hence, the country is bound to take steps to minimize the loss. For that the Government has to enforce many laws in the best of public interest, such as banning addictive drugs, limiting alcohol or tobacco use or wearing helmets / seatbelts mandatory.

I used to ride a motorcycle for eight years during my college days. However, it took only one year of my ophthalmology residency to make me sell my motorcycle and avoid using motorcycles altogether, after seeing hundreds of victims of RTAs with multiple eye and face injuries.

I used to love riding motorcycles. Still I do it, when I get the chance. However, I do not drive in the city because I am worried that someone will knock my bike down, despite of my taking all the necessary precautions.

What is inscrutable is that people spend thousands and sometimes, even lakhs of rupees on expensive motorcycles, but they refuse to spend a little amount on a safe full face helmet with an Indian Standards Institute (ISI) Certification.

Department of Transportation (DOT) / Economic Commission for Europe (ECE) certified helmets are comparatively better than ISI certified helmets, when it comes to crash tests. A helmet cannot guarantee that you will not get injured during an RTA. ☒



Occurrence of an accident is not always the results of your poor driving skills. It does not matter whose fault it is, if a road traffic accident happens, it is your life that is at stake

POSTURE

in Everyday Activities

– Part II



Dr. Sunil Paul Pathrose
Consultant Orthopaedic
Surgeon
Kochi, Kerala, India



Dr. Suresh S. Pillai
Consultant in Orthopedics
and Spine Surgery
Kozhikode, Kerala, India

At work or At home

If you suffer from backache, analyze your activities at home and at work and adapt your environment to put you at ease.

When you consider doing a task at home, ask yourself the following questions:

- Can the effort be minimized? For example, ask the help of someone else.
- Will you have to stand in an unnatural posture?
- Does the task entail repetitive movements, such as bending and twisting your body? If so, take breaks at fixed intervals.
- Is the task too strenuous for you?
- Can you lift and carry the objects properly?
- Does the task involve continuous postural stress?
- Does the task involve repetitive stress? For example, driving heavy vehicles over a rough and bumpy ground.

If you think that you can do the task, plan it out with the following guidelines

- Fully concentrate on the task. If your mind is distracted, or you are under pressure, the risk of back injury may increase.
- Try to anticipate pitfalls before starting the task.
- Wear appropriate clothing: For example, sweat clothes.
- Make sure that you can stand properly, without stooping; with adequate space around you.
- Lift and handle the objects carefully.
- Buy necessary tools to make your task easier.
- Avoid unnecessary stress to your body.
 - Put the objects on a suitable work surface to avoid stooping; use a trolley or another device to reduce your effort. If you can lift an object easily with one hand, use the other also to help reduce the possible stress.



When lifting

- ✓ Keep your legs bent
- ✓ Keep your back straight

Housework

Much of the work in running a house is stressful, especially if you have back pain. But with careful planning and adaptation, you can reduce the stress and strain in the following ways:

✓ Kitchen

An ergonomically designed kitchen will pay dividends. For most jobs, the 'worktop' should be slightly lower than your elbow. The kitchen sinks need to be at elbow height, so you are not forced to stoop, when washing things. When standing at a sink or worktop, rest one foot on a low stool or foot rail, since this is beneficial for your lower back.

✓ Bathroom

When washing your hair, kneel down and use a



shower hose.

✓ Washing clothes

Put the basket on a low chair before emptying the washing machine. Keep the 'washing line' at a sensible height so that you need not have to strain to reach it.

✓ Ironing

Make sure that the ironing board is at the right height to avoid stooping.

✓ Bed-making

Squat down or kneel by the bed when you tuck in the sheets.

✓ Cleaning

Use a long-handled implement and kneel down, where possible, to clean. Keep your spine straight instead of bending from the waist.

Caring for children

Looking after young children involves stooping over the bed, lifting, carrying etc. Pay special attention to the way you lift and watch for unexpected problems. For example, children may struggle when they are being picked up.

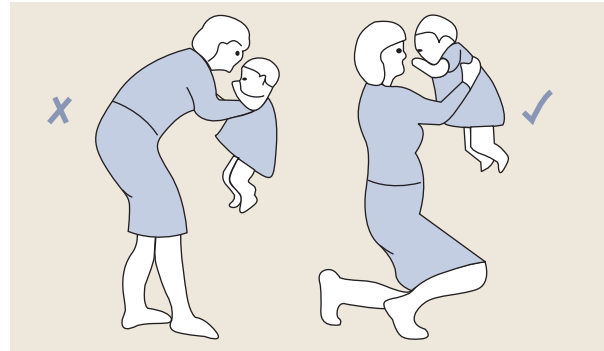
Children are not the sole cause of back pain, but they certainly constitute a risk, especially for women. It takes up to five months for the ligaments of the spine and pelvis to tighten up after childbirth. So, if you are a 'new mother', you will be particularly prone to developing back strain from weak and overstretched stomach muscles, improper postural lifting techniques etc.

Lifting a child

When you lift a child, follow the basic rules of lifting. Those who have back pain should squat down by the side of the bed with one foot firmly on the floor and pick the child up. You should also keep your back straight, while lifting your child with both hands underneath your kid's shoulders.

Standing up

When you stand up, let the strong leg muscles bear the load.



Pay special attention to the way you lift and watch for unexpected problems. For example, children may struggle when they are being picked up

Basic exercise during an episode of back pain

Certain types of exercises can help reduce back pain. So, try to stay active. Remember, not all exercises are appropriate for everyone. If you experience substantial pain while doing an exercise, discontinue it and seek the help of a doctor.

Monitor your loin before selecting an exercise. Walking on a level ground is the safest form of exercise that can be begun, once the acute pain subsides. Begin with a 10 minute walk and gradually increase the duration to 30 minutes or more. Increase the distance and pace in tune with your tolerance. After you have finished walking, take a 10-minute break to cool down and then, do simple back muscle stretching exercises. ☒

Sports

It is difficult to identify the type of sports that expose a person more to the risk of back problems. However certain items or movements can aggravate the existing problems. If you are prone to recurrent back problems, be alert to sharp twinges or intermittent aches. When you notice any of these, redouble your preventive exercises to get relief.

Warming up and cooling down are also essential before and after doing any sports.

General Fitness

General fitness helps you naturally have a relaxed posture and helps reduce the likelihood of injuring yourself, besides helping you recover more quickly from illness. If you have a recurring back pain from poor posture, take up exercises to help you keep fit, once an episode of acute pain dies down.





Change of perspective

Ergonomics in the workplace means focusing on people; the work conditions are adapted to them and not the other way around. Regarding ergonomics, according to the Zahnärztlichen Mitteilungen magazine, after the IDS in 1971 experts “in Cologne in 1962 still had no ideas, in Stuttgart in 1965 it was pityingly laughed at as a fad, in Cologne in 1968 it was the focus of vigorously contested viewpoints and in Munich in 1971 it was recognized as a general body of thought.” And today?

At the last IDS as well as at other important international trade fairs in 2017, the focus was more on the machine – the digitalization of dentistry. Opinions on this are divided. There were definitely good examples of how digital technology can also support dental technicians in very specific ways during their routine tasks. This includes an

innovative video microscope (EASY view 3D Dental Viewer, Renfert). It is an alternative to the stereo microscope, magnifying spectacles etc. and facilitates a healthier posture.



Fig. 1: A video microscope facilitates a healthier posture than classic enlargement tools do.

Health problem areas

The Federal Institute for Occupational Safety and Health names the following problem areas regarding the posture of dental technicians: the upper body is curved during general work and leans back slightly. For more delicate work the head tilt increases. In extreme cases, the head axis runs parallel to the floor, the viewing distance reduces partially to < 15 cm, the angle is tilted downwards > 38° to the horizontal plane. The movement space for the arms, the lighting etc. are also problematic. (1)



Fig. 2: Unhealthy posture Ergonomic posture

In particular, the classic microscope with fixed ocular position restricts the freedom of movement. A bent back, a rigid head / neck posture and an uncomfortable seat height are typical. The eyes have to be tensed up (and without spectacles) held to the eyepieces. The intensive light causes a tiring shrinkage of the pupils. The consequence of such stresses are strains, signs of fatigue and the associated increased error and failure rates.

Modern alternatives

That there are other ways of doing things, is shown by the exemplary EASY view 3D Dental Viewer, whose development was supported by the Federal Institute for Occupational Safety and Health. The basic version includes a camera unit with integrated daylight LEDS (5,000 K), a 3D monitor along with polarization glasses, mouse (control unit), foot switch (for screen shots) and a USB flash drive.

The dental technician has an upright seated position when working and looks in the direction of the monitor; the head and neck can be moved freely. There is a prevailing natural ambient light and wearing glasses is unproblematic. For viewing objects, routine processing and quality control there is a 15 x and a 20 x enlargement in 2D and 3D mode as well as four different object modes for a material-optimized image reproduction to choose from.

Appeal

The back hurts, the eyes are burning... What does the dental technician do? He carries on... In the long term, all stakeholders pay the price for this. Absences due to illness present an enormous economic burden to businesses. Most of the medical certificates issued in 2016 were for musculoskeletal disorders, every second one of these for the back.[2] Also, in over 20 % of all cases of occupational disability, the cause was in the skeleton and musculoskeletal system.[3] Only employees who are healthy in an holistic sense can render the services necessary in a future-oriented business. Ergonomic work conditions have a significant proven effect on productivity and quality.



Fig. 3: More freedom of movement = less tensions > better performance.

Sources

(1) Brochure: Safety and occupational health for dental technicians. Tips for a healthy workplace for dental technicians, by the Federal Institute for Occupational Safety and Health

(2) DAK health insurer 2017 health report

(3) Morgen & Morgen, independent consultancy

Mira Ross-Büttgen has been a freelance editor and

PR copywriter in the field of healthcare / dental since 2007. Computational techniques in dentistry in particular is regarded as her specialty: From 2009 to 2015 she was Deputy Editor-in-chief of the journal DIGITAL_DENTAL_NEWS. With her PR - & media services close to Düsseldorf she supports specialist media, industry, as well as laboratories and surgeries throughout Germany.

<http://blog.renfert.com/en/author/mross/>

Oral Health in **CHILDREN**

The foundation for healthy permanent teeth in children and teenagers is laid during the first years of life. The twenty primary teeth are already there in the jaws at birth and typically begin to be visible when a baby is between 6 months and 1 year. Most children have a full set of twenty primary teeth by the time they are 3 years old.





Dr. Aparna Babu
Periodontist and Implantologist
Mumbai, Maharashtra, India

When teeth first come in, some babies may have sore or tender gums. Gently rubbing your child's gums with a clean finger, or a wet gauze pad can be soothing. You can also give your baby a clean 'teething ring' to chew on. If your child is still in pain or cranky, consult your dentist or physician.

Baby teeth are very important for your child's health and development. They help him or her chew, speak and smile in a better way. These teeth also help hold space in the jaws for the permanent teeth that are growing under the gums.

When a baby tooth is lost too early, the permanent teeth can drift into the empty space, making it difficult for other adult teeth to find room when they come in. This can make his / her teeth crooked or crowded. That is why starting off with good oral care can help protect both the primary and permanent dentition for long in infants.

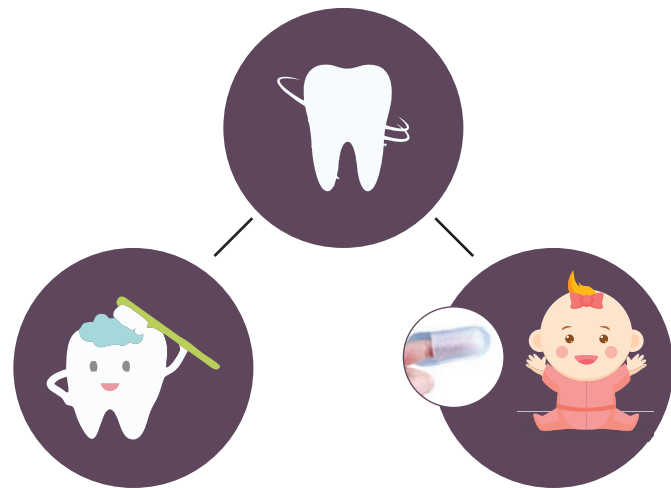
When should you start taking your Child to the Dentist?

You should take your child to the dentist, after the first tooth comes out and not later than the first birthday. A dental visit at an early age is a 'well-baby visit' for their teeth. Besides checking cavities and other problems, the dentist can show you how to clean the child's teeth properly or manage certain habits like thumb sucking.



How to Care for Your Child's Teeth?

Teaching your child good oral care habits at a young age is an investment in his or her health that will pay lifelong dividends. You can start by setting an example; taking good care of your own teeth will help your child know that oral health is something very important or anything that makes tooth brushing fun, like brushing along with your child, letting him / her choose his / her own toothbrush or encouraging him / her to follow proper oral care regimen etc. It is also important to care for your baby's teeth from the beginning. Here is what you can do:



- ⊙ Begin cleaning your baby's mouth during the first few days after birth by wiping the gums with a clean, moist gauze pad or washcloth. Tooth decay can occur in baby teeth also. A baby's four front teeth usually push through the gums at about 6 months of age, even though some children do not have their first tooth until they are 12 or 14 months old.
- ⊙ For children younger than 3 years of age, start brushing their teeth as soon as they begin to come out, with a small amount of fluoride toothpaste, equivalent to the size of a grain of rice. Brush their teeth thoroughly twice a day (morning and night) or as directed by the dentist. Also ensure that they use the appropriate amount of toothpaste.
- ⊙ For children between 3 and 6 years of age, use a pea-sized amount of fluoride toothpaste. Brush their teeth thoroughly twice a day (morning and night) or as directed by the dentist. Also ensure that they do not swallow toothpaste.
- ⊙ Until you are comfortable that your child can brush on his or her own, continue brushing your child's teeth twice a day with a child-size toothbrush and a pea-sized amount of fluoride toothpaste. [E]



Healthy Eating for Doctors



Ms. Susan Itty
Clinical Nutritionist
Kochi, Kerala, India

Nutrition is important for everyone. **Healthy eating** means eating a variety of foods that give you the nutrients to help maintain your health and have energy. These nutrients include protein, carbohydrates, fat, water, vitamins, and minerals.

As working professionals, we get so involved in our work and busy schedule that we tend to take the very important part of our life, i.e. eating and drinking very lightly.

We usually work in shifts and as a result of our busy schedule, we may often either skip our meals or overeat the next time. Such eating habits are not only wrong but also very unhealthy. These habits account for major health related issues, such as weight gain, weight loss, gastric problems, low blood pressure, anemia, etc.

A few tips to help set your eating habits right

01 Do not skip meals

One of the very important parts of healthy eating habits is not to skip meals; skipping meals can cause gastric issues and may deteriorate your health. We tend to skip meals due to time pressure or overburden. If you are in such a situation, go for some healthy, readily available small bites, such as cashews, raisins, oat biscuits, etc.



02 Breakfast is the most important meal of the day

Never skip breakfast. It should also include dairy products, toasts, and fruits. Skipping breakfast may contribute to low energy and dehydration, which in turn, can lead to health hazards. So, even if you are getting late to the Clinic, pick up a tetra pack of flavored milk and a fruit; but never skip this too.



03 Eat small and frequent meals

Instead of heavy meals, eat small and frequent meals. Heavy meals often contain more calories than most people need. Eating a large meal can also make you feel sleepy and inert.



04 Mindful eating

Always be mindful while you eat. Close your laptop and files for 10 minutes and focus on the food while you are eating. When you eat a meal, it is very important to focus on the food and enjoy it. It not only gives your mind a break to rejuvenate but also helps the body digest the food easily.



05 Sit down and eat

Make sure that you are sitting comfortably, while you are eating. Also, utilize this time to de-stress, as the mood not only affects the quantity of food you take, but also determines how well your body will absorb the nutrients.

06 Liquid intake

You are working all day on the floor, so make sure that your water consumption is high. Therefore, 1 liter of water and 2 liters of enriched liquid like fresh juices, soups, buttermilk etc. is what is required by your body. For water intake, fill a bottle of water and take it sip by sip. This will help your body flush out unnecessary toxins.

07 Carry your own food

This will help reduce your chances of eating junk or fried food. If you do not have time to cook, then prepare your meal a night before, and keep it in the refrigerator, since this is much healthier than eating junk or fried food.

08 Avoid alcohol

Alcohol consumption will dehydrate you, lower your inhibitions and increase your appetite. So on weekends when you consume alcohol to relax and de-stress, limit its quantity. But it is better to avoid it altogether.

Doing simple exercises and eating 'fresh and healthy' food would keep you fit for long

Conclusion

We all know what to do and what not to do, but still we forget to follow it or simply ignore it.

Sitting all day may cause to put on some extra fat on your body. To avoid this, do some simple exercises, such as running or brisk walking and eating 'fresh and healthy' food. Remember, skipping meals or temporary abstinence from food will not help reduce over absorption of fats. Food is a very important part of our daily routine and it helps determine our mood to a great extent. So Eat Healthy and Stay Fit. ☒

Smile

Your Stress Away

One of the most powerful things the world shares is the smile. A smile is capable of cutting through all barriers. A smile has no age, gender, color or culture. No matter where you are in the world, what language you speak, or whatever be your social status, a smile is universally understood by everyone.

A simple smile has more influential power than you may think. Each time you smile, you throw a positive feeling in your brain. The act of smiling activates neural messaging that benefits your health and happiness. For children, smiling activates the release of neuropeptides that helps fight off stress.

Neuropeptides are tiny molecules that allow neurons to communicate with others. They facilitate messaging to the whole body when you are happy, sad, angry, depressed, or excited. The feel-good neurotransmitters - dopamine, endorphins and serotonin, will also be





Dr. Mathews Baby
Senior Lecturer



Dr. Litty Prince
Intern

Department of Public Health Dentistry
Mar Baselios Dental College
Kothamangalam, Kerala, India

released when a smile flashes across your face. This not only helps relax your body, but also helps lower your heart rates and blood pressure.

Over the past few years, scientists have examined 'the healthy aging benefits' of humor and laughter. Numerous studies reveal that laughter promotes physical, emotional, intellectual and social well-being.

A recent study at the University of Kansas, the United States of America suggests that laughter may also offer health benefits, even if a person is to fake a grin / laughter. Tara Kraft and her colleague Sarah Pressman, Psychological scientists, University of Kansas, the United States of America investigated the benefits of smiling and found that smiling is a tool for stress reduction. They tested the effects of two types of smiles: Standard smiles, which use the muscles around the mouth only, and Duchenne smiles (also called genuine smiles), which engage not only the muscles around the mouth but also those around the eyes.

The Study participants were instructed to complete a series of stressful tasks. Immediately after the completion of the stressful tasks, the participants who were trained to hold a neutral expression during the test had higher heart rates compared to those ones who were instructed to smile. Those with the Duchenne (genuine) smiles had the lowest heart rates; but surprisingly, even the participants who were forced to smile with chopsticks in the mouth, experienced a decrease in heart rates.

The study, which was published by the Association for Psychological Science, shows that smiling can help reduce stress, even if a person does not feel happy. "The next time you are stuck in traffic or are experiencing some other type of stress," says Sarah Pressman, "you might try to hold your face in a smile for a moment. Not only will it help you 'grin and bear it' psychologically, but it might actually help your heart health as well!"

Smiling when you are upset about something is the last thing you will feel like doing. It will feel unnatural and awkward to smile when you are upset. Try smiling when you are alone and give yourself as much time as you need to begin and end the process. The more you try to apply this strategy, the easier it becomes to boost your spirits effortlessly each time.



Not only does a smile encourage you to release negativity, but it also helps have a positive influence on those around you. Smiling is infectious and elicits positive remarks and reactions from those around you.

A smile creates a spark of light that helps warm your heart and helps soothe the body, mind, and soul. This light guides you as well; it helps improve your mood, lower your blood pressure, boost your energy and relieve your stress.

If you are feeling stressed, the best thing you can do is crack a smile to get relief. ☺



Padmashri Prof. Dr. A. Marthanda Pillai in a tête-à-tête with The DentCare

An Iconic
Brain-mender who has
Salvaged Lives from
Neural Labyrinths

Padmashri Prof. Dr. A. Marthanda Pillai is a reputed Neurosurgeon of India. He was the Head of the Department of Neurosurgery, Government Medical College, Thiruvananthapuram, Kerala, India. Presently, he is the Chairman and Managing Director of Ananthapuri Hospitals and Research Institute, Thiruvananthapuram.

He graduated from Government Medical College, Thiruvananthapuram and specialized in Neurosurgery from Christian Medical College and Hospital (CMC) Vellore, Tamil Nadu, India. After which, he practiced there till 1978. Later, he joined as a Tutor in Government Medical College, Thiruvananthapuram and worked there for a few years. Subsequently, he went to England for further specialization and training in Neurosurgery. He served as the National President of Indian Medical Association (IMA) in 2014.

Dr. Pillai was bestowed with the Padma Shri Award in 2011 in recognition of his meritorious service in the field of Neurosurgery and also in performing brain and spinal surgeries for poor patients free of cost.

Q/A

In an exclusive chat with
'The DentCare', he speaks out his mind

1) What has drawn you to the field of Neurosurgery?

It was a very challenging field, when I decided to take it up. Now, it is much more challenging than ever before. Sometimes, we feel satisfied when we have done something to help our patients and other times, we feel very bad, when our patients do not get well as expected. But most of the time, we feel satisfied that we could virtually save a life. All these encouraged me to choose Neurosurgery.

2) What are the common Neurological Disorders seen now?

Every disease, which affects any other organ of the body, can also affect the brain; right from birth defects, trauma, stroke, tumor to degenerative diseases. Metabolic disorders, epilepsy, mental disorders, road traffic accidents etc. can also affect the brain.

3) What are the causes and treatment options of Paralysis? How can we prevent it?

If you experience Paralysis, you will lose the function of a specific or widespread area of your body. Sometimes a numbing sensation

can occur before total Paralysis sets in. Paralysis can also make it difficult or impossible to control the muscles in the affected body parts.

Many factors contribute to Paralysis and the most important one is Hypertension. When high blood pressure is left unchecked, the risk of Paralysis grows even further. You may start feeling slight headaches, shortness of breath, visual problems or a drop in energy, if suffer from Hypertension. Sleeplessness or increased stress is a risk factor contributing to Paralysis.

There are several possible reasons for temporary or permanent Paralysis. It can be as a result of damage to the brain or spinal cord or other parts of the nervous system, due to Stroke, Trauma, Parkinson's disease, Poliomyelitis, Cerebral palsy, Peripheral Neuropathy, Spina bifida, Multiple sclerosis, Guillain-Barre Syndrome (GBS) etc.

One should check up High Cholesterol, as it is strongly connected to High Blood Pressure which is a risk factor for Paralysis. Excessive consumption of liquor / intoxicants, excessive tobacco use and tension are also responsible for Paralysis.

The treatment plan depends on the underlying causes of Paralysis. Having control over Blood Sugar, Blood Pressure and Cholesterol along with proper Exercise and sound sleep can not only ward off Paralysis but also many other diseases.

4) What would be your advice for a Stroke Patient?

Stroke may not be a one-time event. Regular meditation and exercise can help reduce the risk of subsequent strokes. Meditation significantly helps stroke survivors reduce their mental fatigue during stroke recovery. For better treatment outcomes, you have to look into the underlying causes of stroke and address them effectively.

Diabetes, Cholesterol, Sedentary lifestyle etc. are contributing factors. So lifestyle and dietary changes, along with proper



exercise are imperative in bringing the condition under control.

Keeping your weight within a healthy range for your age and gender, eating foods that are good for you, doing at least 30 minutes of moderate exercise, quitting smoking and stopping alcohol consumption are also found very effective in controlling stroke.

5) Does Aging Affect Brain function?

Ageing affects every part or organ of the body; it affects the brain more than any other organ. The Brain has less regenerative capacity than other organs: it is a group of cells that has an intricate network. There are around 100 billion cells in the brain, with 50000 interconnections! The brain cells cannot be duplicated / reproduced by a computer device. Once the brain is damaged, it is almost impossible to reestablish all the 50000 connections of each cell. That is why recovery from traumatic brain injury is more difficult compared to that of any other organ. When your brain starts failing, this may contribute to slow failing of other organs as well.

A person ages and dies as a result of gradual decrease in the brain function. The degree of its degeneration depends on the percentage of brain capacity you have used. There are areas of the brain that are literally dispensable, since we are not using the

whole of our brain. When you use a part of your body, there is a corresponding blood flow to a certain part of the brain.

Leading an active life, using the brain for thinking and processing, engaging your mind etc. will help keep your brain active and healthy for long.

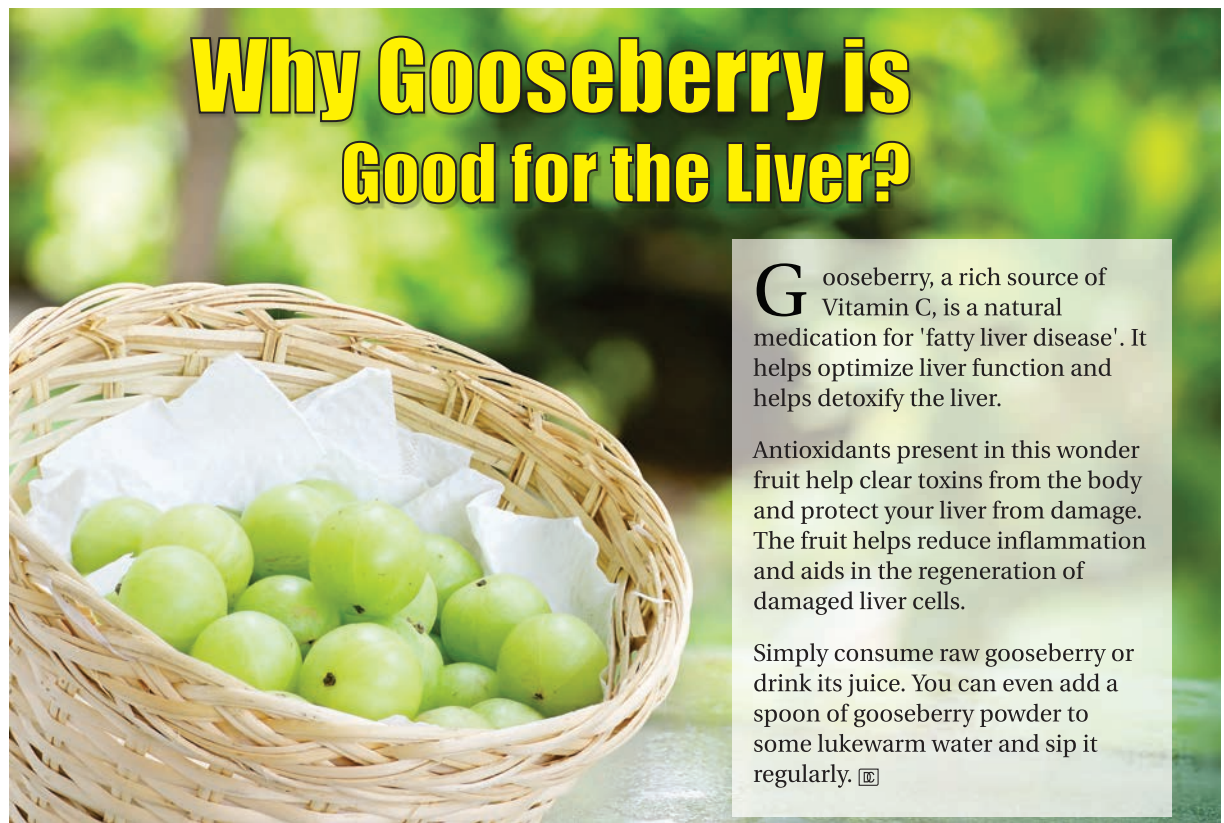
6) What would be your advice to the younger generation who wishes to be an effective doctor?

As generations pass on, people are becoming more intelligent, versatile, resilient and adaptive to the situation, due to evolution: if you have an aptitude for it, choose this profession. This is a field requiring a high level of social commitment. You have to practice medicine with sanctity.

7) Would you relate any memorable moments?

There are a lot of situations that have given me very much relief and satisfaction. There are occasions when I thought that I could not save the lives of patients; but somehow, I was able to resuscitate them, which gave me immense relief and complacency; whereas there were also situations that made me dissatisfied when I could not save the lives of patients, even though I tried my best. ☺

For The **DentCare**
Interviewed by **Ms. Nisha Philip Xavier**

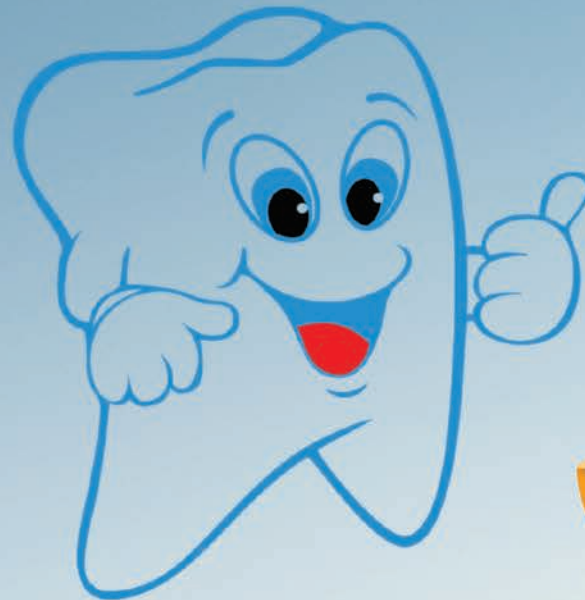


Why Gooseberry is Good for the Liver?

Gooseberry, a rich source of Vitamin C, is a natural medication for 'fatty liver disease'. It helps optimize liver function and helps detoxify the liver.

Antioxidants present in this wonder fruit help clear toxins from the body and protect your liver from damage. The fruit helps reduce inflammation and aids in the regeneration of damaged liver cells.

Simply consume raw gooseberry or drink its juice. You can even add a spoon of gooseberry powder to some lukewarm water and sip it regularly. ☺



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OBESITY and Periodontitis

Periodontitis has long been considered an 'old man's disease', as more than half of people aged 55 or above have it. It is a bacterial-induced chronic inflammatory disease.

Obesity is defined as a condition of abnormal or excessive accumulation of fat. It has a wide range of etiological factors, including genetic, biological, social, and behavioral factors, which all lead to an imbalance between energy intake and expenditure. Increased sedentary lifestyle and a high caloric diet have created a worldwide obesity epidemic.

Over the past few decades, obesity has increased substantially among populations worldwide. It is now considered the sixth biggest crucial factor contributing to morbidity worldwide, and it is reported that a decreased life expectancy in the future may be the result of increased rates of obesity.

Obesity, as recognized by the World Health Organization (WHO), has been known to be one of the predisposing factors for a majority of chronic diseases, ranging from cardiovascular disease to cancer.



Dr. Bindu R. Nayar
 Professor and Head
 Department of Periodontics
 Government Dental College
 Thiruvananthapuram, Kerala, India

The measuring tool used to classify an individual as obese or overweight is the Body mass index (BMI Quetelet Index 1998). The Body mass index (BMI) or waist circumference will help determine whether a person is obese. BMI is calculated using a person's weight in kilograms divided by the square of height in meters.

According to the World Health Organization, a person with a BMI equal to or more than 30 kilograms (kg) / meter square (m²) is considered to be obese.

Obesity, which is considered as a large-scale public health dilemma, is linked to the development of a chronic low-grade systemic inflammation that can lead to obesity-related disorders, including Metabolic syndrome, Type 2 Diabetes, Insulin resistance, Dyslipidemia, and Cardiovascular diseases.

Obesity is a major health problem in the world and its prevalence is increasing in alarming proportions. Overconsumption of energy dense foods, along with reduced opportunities and encouragement for physical activity / exercise has also contributed to the problem.

visceral fat along with a modest amount of fat in the 'gluteofemoral region'.

Obesity is a state of low-grade inflammation, due to an increase in the release of tumor necrosis factor - α (TNF - α) and Interleukin - 6 (IL- 6). They are the two cytokines important for the regulation of B-cell, also known as B lymphocytes (they are a type of white blood cell of the lymphocyte subtype) function. The state of low-grade inflammation is fueled by cytokines that adjudicate inflammation.

Obesity increases the chance of destructive periodontal disease by 35 percent. In an obese individual, there will be increased clinical attachment loss and deeper periodontal pockets. The primary cause of obesity and periodontal disease is inflammation. Human fat cells secrete 12 types of inflammatory cytokines, including IL- 6 and TNF - α , which alter the metabolic mechanism of the cytokines in the body, leading to low-grade systemic inflammation.

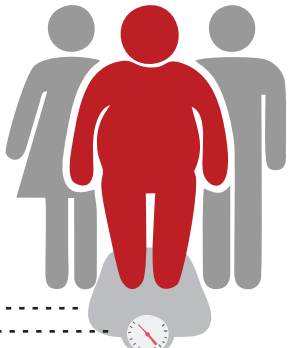


Obesity increases the chance of destructive periodontal disease by 35 percent. In an obese individual, there will be increased clinical attachment loss and deeper periodontal pockets

BMI

=

$$\frac{\text{Weight (kg)}}{\text{Height (m)} \times \text{Height (m)}}$$



According to the World Health Organization, a person with a BMI equal to or more than 30 kilograms (kg) / meter square (m²) is considered to be obese

In obese people, adipose tissue is an inactive organ that stores triglycerides. The liver of an overweight person decreases the uptake of insulin and increases gluconeogenesis, which help elevate the triglycerides levels because of high levels of free fatty acids.

In men, obesity is parallel to an increase in abdominal and visceral fat while in women, it is distributed by the enlargement of subcutaneous and

For each unit increase in BMI, there will be a 5% increase in the progression of alveolar bone loss and for each '1 centimeter' (cm) increase in waist circumference, there will be 1 to 2% increase in the progression of probing depth and clinical attachment loss. An obese patient who presents with periodontal disease has a higher risk for cardiometabolic disease compared to those with a healthy weight.

The inflammatory nature of obesity may have a role in increasing the susceptibility to periodontal diseases. The disease of obesity is characterized by a chronic inflammatory state in which metabolic alterations in the body contribute to a change in an individual's immune response.

When there is an excessive intake of food for a long period, the body begins to demand more insulin to metabolize the heavy glycemic load. Over time, this causes hyperinsulinemia, excess insulin in the bloodstream, leading to insulin resistance, since fat cells are unable to take up and use insulin effectively.

Insulin resistance is often followed by hyperglycemia or high blood sugar. Excess insulin in the bloodstream can also disrupt lipid metabolism in the liver and trigger hyperlipidemia, i.e., abnormally elevated levels of fatty acids (triglycerides and cholesterol) in the bloodstream. The body identifies excess fatty acids in the blood and initiates an inflammatory response.

This metabolic destabilization contributes to a stress response similar to that of in periodontal disease. The inflammation associated with both these conditions produces excessive amounts of TNF - α , a cytokine that initiates immune response by regulating other immune cells, leading to further insulin resistance and inflammatory stress.

Adipocytes (fat cells) also play a role in metabolic regulation, and their hyperactivity in obese individuals produces an excess of both pro-inflammatory and anti-inflammatory mediators. In proper balance, these hormones help keep the immune system functional, but in the presence of advanced periodontal disease, pro-inflammatory mediators from the infection will combine with the mediators from the adipocytes and can adversely affect the balance, causing a progression of the disease process.

Leptin is a polypeptide hormone derived primarily from adipose tissue. It is produced mainly in the adipocytes of white adipose tissue. The amount of leptin present in the body is proportional to the cumulative fat present in the body: so lean people have lower levels of leptin while obese ones have higher.

Leptin affects hypothalamus through its receptor

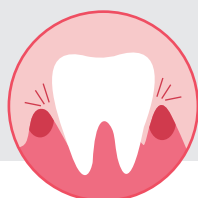


The interventions aimed at preventing and reducing obesity through eating balanced diet and physical activity / regular exercise may be effective in improving general health and reduce obesity

(Lep R) which is specific for leptin and regulates adipose tissue mass. It decreases the intake of food by upregulating anorexigenic neuropeptides, like melanocyte stimulating hormone, and downregulating the anorexigenic factors.

Leptin has been related to a number of systemic diseases. Its role in cardiovascular diseases has been related to its activity in the regulation of myocardial blood flow. Literature suggests that it has a role in myocardial infarction, stroke, and obesity related hypertension. Leptin levels are associated with higher levels of C reactive protein (CRP) which is a marker of chronic inflammation and a strong indicator of cardiovascular and coronary heart diseases. The relationship between both of them is independent of other factors.

The interventions aimed at preventing and reducing obesity through eating balanced diet and physical activity / regular exercise may be effective in improving general health and reducing obesity. [10]



The link between Gum Disease & Heart Disease

Research indicates gum disease may increase the risk of heart disease



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Virtual Consumption: The Fatal Tryst



A social network addict often finds these platforms as a free space to frequently idealize his / her self-image and get instant satisfaction from feeding his / her egocentric desires



Ms. Nasnin Nasser
Guest Lecturer
Department of English
Bharat Matha College
Thrikkakara, Kerala, India

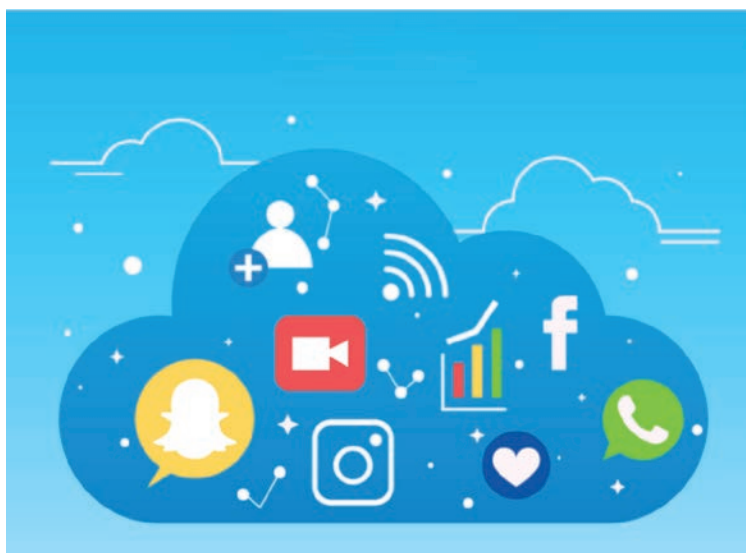
Social Networking has been a predominant phenomenon for the last few decades in our society, which enables us to connect, share and communicate ideas and interests to people all over the world. The benefits of these virtual communities in different arena are substantial, as they allow us to widen our circle of friends and contacts on personal and professional levels.

While it proves to be assisting our business endeavors / organizations by reaching out to clients and consumers within no time, it also brings educational benefits to students and teachers by online sharing of study materials and topics, opening them to different views and perspectives.

But apart from these positive sides, are there not dangers lurking behind Social Networking which proves to be more dominating, especially among our students and teenagers? Not to be a part of a Social Networking site is unimaginable for today's youth who waste more than half of their time fidgeting on their digital gadgets. Even a sixteen-year-old teen would say that it is a part of his / her daily routine to peep into his / her Facebook profile every fifteen minutes to get informed of the latest updates.

For modern people, especially youth, a day without it would be as restless as a willow in a windstorm, i.e., they might think as if they do not really exist or their self-identity will whoosh of in the absence of this virtual consumption.

The pursuit of pleasure in one form or another is inescapable in human life. The unquenchable desire to share, connect and belong



Global Social Media Usage



Total
Population



Active
Internet Users



Social
Network Users

to the virtual world is a part of this pursuit, which has caused the emergence of various Social Networking sites, such as Facebook, Twitter and so on. The frequent usage has gradually shifted from the label of virtual communities for connecting and sharing with people of common interests to virtual platforms which help satisfy our ego and self-image, by flaring up the narcissistic tendencies of the present day world.

Many of the users take it as a motive to maintain their self-esteem and sociability while others see it as a means for self-expression which otherwise they think would remain unventilated, as the lost voices in this loud world. Whatever be the motives, whether justifiable or unjustifiable, they may often lead to addictive self-absorption or lack of self-control. A social network addict often finds these platforms as a free space to frequently idealize his / her self-image and get instant

satisfaction from feeding his / her egocentric desires.

Instead of the intended positive results of Social Networking to be more sociable and considerate, the proliferating issues by these online habits cause the enhancement of an individualistic culture, which encourages the users to spend hours updating their profiles with a wide range of emotional exhibitions and adopted attitudes.

The impact of this virtual consumption and the obsession to project one's life in the lime light, like that of a celebrity, becomes more intense when these sites can easily facilitate inappropriate online behavior and victimization, especially among our postmodern youth.

In the present day world, people are least bothered about keeping their personal details private. They unnecessarily disclose their personal information and uploaded photo albums, without thinking about the dangers lurking behind such actions.

The hectic desire to establish one's identity by posting both necessary and unnecessary matters often results in potentially destructive comments and suggestions on one's profile from the dangerous world outside, which in turn, paves the way for the degradation of one's personal and public image / integrity. Also there emerges the trend of taking it as the most suited means of humiliating and embarrassing one's enemies by posting inappropriate content on their walls.

Cyber bullying serves as an interesting sport for the revenge seekers who get easy access to the targeted person. To most of them, the pleasure they draw from the virtual world is so immense that they speak of it as the "most intoxicating" experience.

Some people may confess that the often unrecognized personal motive behind the addictive use of Social Networking sites serves as a kind of compensation for their low interactive ability in the real world or as a solution for their



introversion, while it acts as a reinforcing agent for the highly extrovert individuals.

Today we have hardly any time and sensitivity to stop and enjoy the beauty of nature and appreciate the subtle charms and real moments of our lives, since nothing can satisfy our blunted psyche, as we are restlessly fidgeting on our latest gadgets and busily sneaking in to others' social network profiles.

It is high time for rethinking and self-realization from the individual side, as the government authorities and law enforcement agencies have no remarkable role in interfering with the users' rights. Hence, the real effort and transformation should take place within each one of us, to be aware of the hidden dangers by limiting 'over virtual consumption' so as to help us lead a healthy life. [10]

In the present day world, people are least bothered about keeping their personal details private. They unnecessarily disclose their personal information and uploaded photo albums, without thinking about the dangers lurking behind such actions



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The Myth and Reality of Orofacial Cleft

Part - I

The human face is a corridor of emotions, a gateway to verbal and nonverbal communication, and a criterion for social acceptance and mate selection. It is a key that generates an impression in the minds of those with whom a person interacts.

A pleasant facial appearance helps awaken positive feelings and reactions in those around a person, but altered facial appearance and speech, which can be easily observed by others, may generate negative feelings / impressions. The aesthetics of facial structures help determine not only a person's beauty but also his or her personality, intelligence, social class, trustworthiness, social skill, popularity and overall goodness.

While sitting in my outpatient clinic the other day, an adolescent girl came for a review. After the initial introduction, she confided in me that she wants to correct her nose at all cost. She was born with cleft lip and palate. We had corrected the deformities of her lip and palate. Now, it is time for correcting her cleft nose as well.

Children born with cleft lip and palate suffer from many psychological problems like lowered self-esteem and difficulties in social interaction. They are often sidelined from the mainstream and as clinicians it is our collective responsibility to help them lead a confident life, just like everyone else.



Dr. Varun Menon P.
Assistant Professor
Department of Oral and
Maxillofacial Surgery
Jubilee Mission Medical
College and Research Institute
Thrissur, Kerala, India

Orofacial cleft, due to its particular location in the orofacial region, can be particularly distressing; and parents of the affected children are usually ashamed of / uncomfortable with bringing out their children to public events. Congenital facial impairments remain a source of social and mental distress to both the affected child and the families. In fact, cases of infanticide associated with cleft lip have also been reported in the literature.

The earliest documented history of Cleft lip and Palate (CLP) was based on a combination of religion, superstition and charlatanism. The people of ancient Greece ignored the existence of these deformities, while Spartans and Romans killed these children, as they were considered to be harboring evil spirits.

Facial deformities were mostly looked down upon and such infants were alienated from the tribe or cultural unit and left to die in the wilderness. This practice is still prevailing even today in certain African tribes.

In Sparta (a city in Greece), the unfortunate new-borns were abandoned on Mount Tagete, while in Rome, they were drowned in the Tiber (river) or thrown off the Tarpeian rock. Plato, the Greek philosopher, far from opposing this practice, justified it in his book, the Republic that it was a means of removing ill omens and preserving the soundness of the race.

In India, the incidence of CLP was found to be 1.09 for every 1000 live births. Many believed that CLP was due to the “act of fate” and some believed that CLP was a punishment, due to a sinful act of the previous

birth. The ancient people linked CLP to the adverse effect of solar eclipse or starvation during pregnancy. In the past, it was also very common that CLP was the result of a curse, an act of evil spirits or retribution for past sins.

'Cleft' means 'split' or 'separation'. During early pregnancy, separate areas of the face develop individually and then join together. The lip usually closes by 5 to 6 weeks after conception and the palate by 10 weeks. If some parts do not join properly, the result is a cleft. Cleft will vary in both type and severity.

What is Cleft Lip?

A cleft lip is an opening in the upper lip between the mouth and nose, which occurs when proper fusion does not take place during pregnancy. It can range from a slight notch in the cultured portion of the lip to a complete separation in one or both sides of the lip, extending up to the nose. A cleft on one side is called unilateral cleft while on both sides is called a bilateral cleft.

A cleft lip may include a separation of the bones of the upper jaw and / or upper gum. This may range from a small notch in the gum to a complete division of the gum into separate parts.

What is Cleft Palate?

A cleft palate is an opening in the roof of the mouth in which the two sides of the palate do not fuse, or join together by the 10th week of development. The back of the palate (towards the throat) is called the soft palate and the front (towards the mouth) is known as the hard palate. If you feel the inside of your mouth with your tongue, you can notice the difference between the soft and the hard palates.

A cleft palate can range from just an opening at the back of the soft palate to a nearly complete separation of the roof of the mouth (soft and hard palates).

Facial deformities were mostly looked down upon and such infants were alienated from the tribe or cultural unit and left to die in the wilderness. This practice is still prevailing even today in certain African tribes





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Causes of Cleft lip and Palate

Although a complete understanding of why cleft lip and cleft palate occurs is not yet known, there appears to be an association with a combination of genetic and environmental factors. Many factors contribute to cleft conditions, including heredity, prenatal nutrition, drug exposure, and environmental factors.

Genetic risk factors depend on the number of affected people in a family, the closeness of affected relatives, and the severity of the clefts. Keep in mind that sometimes clefts run in families, and sometimes a baby is born with a cleft without anyone else in the family having the same.

While gender and ethnic factors are linked to the condition, there are also other factors that seem to play a role in causing clefting. Specialists have noted that the more severe the defect in a child is, the higher is the risk for a cleft malformation in subsequent siblings.

If an older sibling has bilateral clefting, the risk of recurrence is twice. If a parent has cleft lip or palate,

there exists a 4% likelihood of cleft malformation in his / her children. However, if an affected parent has a child with cleft lip or palate, the chance of experiencing a cleft malformation in the children of subsequent generation rises to 14%.

How do physicians diagnose a cleft lip and cleft palate?

The diagnosis of cleft lip at birth can be easily done. All newborn infants are screened at birth for cleft lip / palate. Direct illuminated examination of the infant's hard and soft palate is a part of the complete examination of a new-born. In addition, the palate (both hard and soft regions) is palpated with finger to ensure that a child is without a cleft lip or palate. Partial clefting occurs when a bony or muscular defect of the palate is obscured by 'the intact skin' that covers the notched tissue. Prior to birth, prenatal ultrasound examination may help demonstrate the malformation of the upper lip, nasal opening, or palate.

Other birth defects that are associated with cleft lip and palate may include the following:

- Congenital heart disease and associated malformations are common in children with cleft lip and palate
- Malformations of the upper or lower limbs or the vertebral column
- Mental retardation or chromosomal anomalies [E]



To be continued...

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DentCare in My Experience



What makes DentCare Dental Lab different from others in the field?

This was the first question that came up in my mind, when I was asked to visit the lab. I have been practicing dentistry for 20- plus years and had the opportunity to visit quite a number of labs. Since I was well-versed with their working atmosphere, I did not see the point in visiting another lab.

I can speak without hesitation that my visit to DentCare Lab was astounding. It is more than a facility with state-of-the-art technology and sophisticated machinery. The lab is an epitome of unison and teamwork, where everyone is considered equal.

The Lab visit made me realize that Mr. John Kuriakose is a true visionary with an impeccable sense of perception. I am more than happy to admit that I could assimilate a few things for improving my clinical practice and translating them into my life.

I have been associated with DentCare Dental Lab for the past couple of years and to this day, they have never disappointed me; not even once!

I hope that they will succeed in all their endeavors and sincerely wish the whole team the very best. ☑

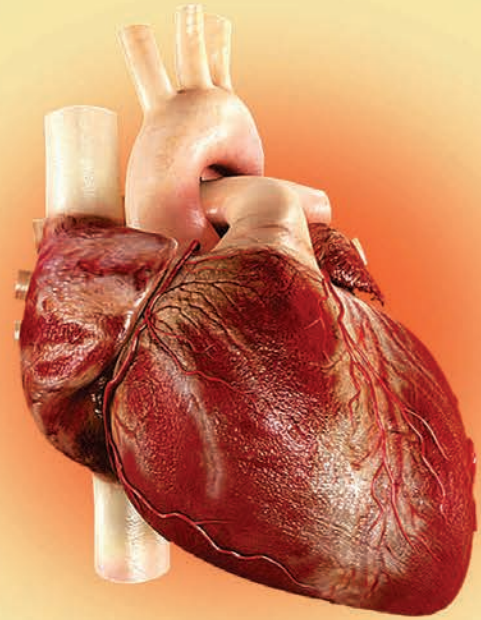


Dr. Anu Thej Francis
Dental Practitioner
Kottayam, Kerala, India

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Heart after EECP Treatment

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Uterine Fibroids

Uterine Fibroids are benign smooth muscle tumors or neoplasms arising from the myometrium. The correct terminology for Fibroid is leiomyoma or myoma. Uterine Fibroids are the most common tumors of the uterus and are found in at least 20-25% of women. They are responsible for one third of all hospital admissions for gynecological conditions.





Dr. Ullas Prasannan
Consultant Gynecologist
Thiruvananthapuram, Kerala, India

Classifications of Uterine Fibroids

Uterine Fibroids are classified based on their location and direction of growth. Subserosal Fibroids are mainly external ones that grow out from the surface of uterus. Some Subserosal Fibroids can also be pedunculated. Intramural Fibroids grow within the uterine wall while Submucous Fibroids grow towards and bulge into the anterior cavity.

Fibroids can be solitary or multiple. Sometimes, more than a dozen Fibroids can be seen in the uterus. They can vary in size from a small pea-sized mass to an enormous tumor, filling the whole abdomen.

Pathology

Leiomyomas are round, pearly white, firm, rubbery tumors. Their outer surface has a whorled appearance. Fibroids are surrounded by a pseudocapsule of compressed myometrium. There is a distinct plane of cleavage between the Fibroid and its capsule, allowing it to be shelled out. Some Fibroids undergo degenerative changes like hyaline or calcific degeneration. Fibroids very rarely become malignant (0.1%).

Aetiology and Risk factors

Both estrogen and progesterone promote the development of Uterine Fibroids. They are most prevalent in the reproductive age group and regress after menopause. Fibroids tend to develop more commonly in nulliparous women or women of low parity. Late childbearing, long interval between

pregnancies and obesity also increases the incidence.

Symptoms

Most women with Fibroids are asymptomatic and in such cases, this can be diagnosed only by Ultrasound. In general, the larger a myoma is, the greater is the likelihood of Fibroids, even though some larger ones may not cause any symptoms at all.

Abnormal or prolonged uterine bleeding is the most common symptom. Bleeding can be more severe and prolonged with submucous Fibroids and polyps. Heavy bleeding ultimately leads to iron-deficiency Anemia.

Dysmenorrhoea is another common symptom, especially with larger and multiple tumors as well as submucous and intramural tumors. Cervical Fibroids or larger tumors on the anterior uterine wall produce pressure symptoms on the bladder like urinary frequency or urinary urgency. Constant pelvic pain or heaviness may be experienced with larger tumors.

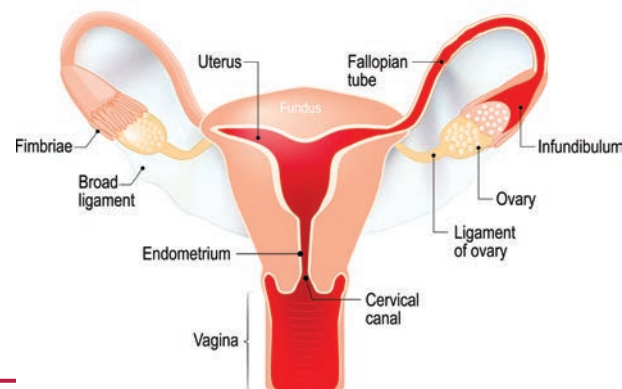
Uterine Fibroids can be associated with infertility; but submucous tumors are more commonly associated with this condition, which distort the endometrial cavity and disrupt implantation. Hysteroscopic resection of these tumors can lead to a 50% increase in fertility. Submucous myoma also causes increased rates of miscarriage and pregnancy wastage.

Diagnosis

Uterine Fibroids are usually detected by bimanual pelvic examination. Ultrasound examination should be routinely done to detect Fibroids and ascertain the number, size and location of tumors. Submucous Fibroids and Fibroid polyps are best evaluated by Saline infusion Sonohysterography or Hysteroscopy. Magnetic resonance imaging (MRI) is done in some

Uterine Fibroids can be associated with infertility; but submucous tumors are more commonly associated with this condition, which distort the endometrial cavity and disrupt implantation

Female reproductive system



cases to accurately define the size, location and number of myomas.

Management of Uterine Fibroids

Observation

Symptomatic Fibroids, including comparatively larger ones, can be observed and assessed by annual or biannual pelvic examination and sonography. Uterine Fibroids are generally slow-growing, usually at the rate of 0.5 centimeter / year.

Medial Management

Nonsteroidal anti-inflammatory drugs (NSAIDs) can be used to treat Fibroid-related menorrhagia and dysmenorrhea. Excess uterine bleeding can also be treated by combined oral contraceptive pills (OC pills) or progestin, as well as by the insertion of Levonorgestrel intrauterine device (LNG-IUD).

Gonadotrophin-releasing Hormone (GnRH) Agonists

GnRH agonists, like Leuprolide acetate (Lupron Depot) given as monthly injection of 3.75 milligram (mg) are used for the medical management of Fibroids. These drugs, when used for 3 -6 months, can help diminish the size of Fibroid by 40-50%, besides reducing uterine bleeding and improving anemia. They are often used prior to surgery to help reduce blood loss and make the surgical procedure easier. They are especially useful before laparoscopic or hysteroscopic surgery.

Antiprogesterins like Mifepristone (25-50 milligrams daily for 3-6 months) and selective progesterone receptor modulators like Ulipristal Acetate (5-10 milligrams daily for 3-6 months) are also found very effective.

Surgery

Surgical treatment for Fibroids depends on the age of patients, desire for future childbearing and the number, size and location of myomas. The treatment is individualized. In general, for an older patient with significant symptoms like

menorrhagia, who has completed her family and has multiple Fibroids, hysterectomy is recommended.

In younger women, who desire future childbearing, myomectomy is the choice. Myomectomy can be performed either laparoscopically (keyhole approach) or by open abdominal approach. Submucous myoma can be removed by hysteroscopy. Hysterectomy can also be done abdominally, vaginally or laparoscopically. It can also be performed robotically.

Uterine Artery Embolization

Uterine artery embolization is a minimally invasive procedure for treating the Fibroids that cause menorrhagia. It is an angiographic interventional procedure in which an angiographic catheter is inserted through the femoral artery and advanced under fluoroscopic guidance.

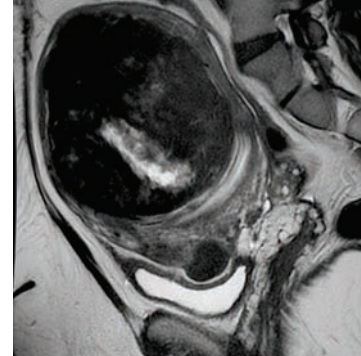
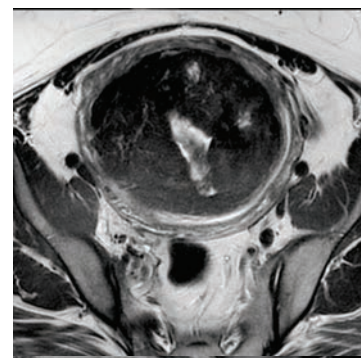
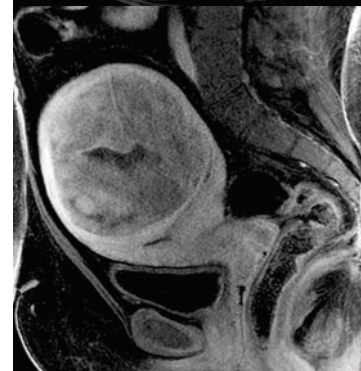
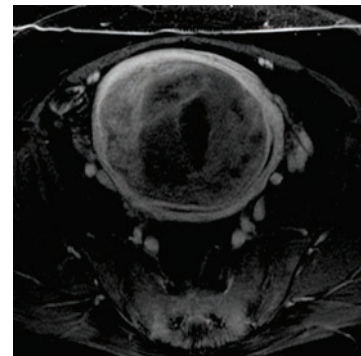
Embolization of both uterine arteries is done by injecting gel foam, or polyvinyl alcohol to help occlude the arteries. This results in the shrinkage of myomas and relief of menorrhagia. This technique is useful for patients who are reluctant to go for surgical procedures or have significant comorbidities.

Magnetic Resonance Guided Focused Ultrasound (MRgFUS)

Magnetic Resonance Guided Focused Ultrasound (MRgFUS) is a non-invasive outpatient procedure that uses high intensity focused ultrasound waves to ablate (destroy) the fibroid tissue. It is an alternative for hysterectomy.

Fibroids and Pregnancy

Generally, Fibroids do not cause major problems in pregnancy. Submucous Fibroids that distort the uterine cavity can cause problems like miscarriage, preterm delivery, malpresentation, placenta previa, abruption, dysfunctional labor, postpartum hemorrhage and retained or adherent placenta. In such cases, Caesarian section is very common. [E]



Magnetic Resonance Images of Uterine Fibroids

A Dental Implant is actually a replacement for the root of a tooth. Like tooth roots, Dental Implants are secured in the jawbone and are not visible once they are surgically placed. They are used to secure crowns (the parts of teeth seen in the mouth), bridges or dentures by a variety of means.

A Dental Implant is made of titanium, a lightweight, strong and biocompatible material. Titanium and titanium alloys are the most widely used metals in both dental and other bone implants, such as orthopedic joint replacements. Dental implants have the highest success rate compared to other implanted surgical devices.

A Current Trend in Aesthetic Dentistry



Dr. Iram Fatima Khan
Dental Practitioner
South Delhi, New Delhi, India



Need for Dental Implants

If a person has lost his tooth, he is in need of a Dental Implant. Dental Implants have changed the face of dentistry now-a-days. Over the years, there has been a substantial increase in the demand of patients for Dental implants. People are more concerned about the way they look. There is a lot of concern for aesthetics in today's era, since removable dentures are not esthetically pleasing.

Uses of Dental Implants

Titanium fuses well with the bone and the process is called Osseointegration ("Osseo" – bone; "integration" – fusion or joining with) which is critical for implant stability, and is considered a prerequisite for implant loading and the long-term

clinical success of endosseous dental implants.

When a tooth is lost, the lack of stimulation can cause loss of alveolar bone. Placing Dental Implants will help stabilize the bone by preventing its loss. Along with replacing lost tooth, an implant helps maintain the shape and density of the jawbone. This means a Dental Implant also support the facial skeleton directly and the soft tissue structures, i.e., gum tissues, cheeks and lips indirectly. A Dental Implant also helps you eat, chew, smile, talk and look naturally. This functionality helps provide social, psychological and physical well-being of a person.

Concerns about the placement of Dental Implants

Uncontrolled Diabetes, Cancer, Radiation to the jaws, Smoking, Alcoholism, or Uncontrolled periodontal (gum) disease may affect the smooth of fusion of a Dental Implant with the bone. Therefore, it is important to let your dental surgeon know all about your medical status (past and present) together with all medications you are taking, whether it is prescribed, alternative (herbal) or over-the-counter.

Before the placement of a Dental Implant, a detailed assessment of your overall stomato-gnathic system ("stoma" – mouth; "gnathic" – jaws) is required. The assessment includes study models of your mouth, bite, and specialized radiographs (X-rays), including 3D scans known as computerized tomograms (CT scans). Treatment planning with the help of computer imaging helps ensure that dental implants are placed exactly in the right position in the jaw bone. ☒



Flaunt Your Pearly Whites!

As a junior dentist, one of the common questions that I have been asked so far is about getting 'white teeth'. This is quite a query among people who give prior importance to aesthetics. Flaunting a beautiful smile is not an impossible task.

There are a lot of procedures to get brighter teeth in a short span of time. Cosmetic dentistry offers a plethora of procedures for teeth whitening alone. Even though there are a few natural remedies, a majority of people go in favor of professional methods. By far, bleaching has become a more sought after dental procedure to brighten teeth.

A tooth is composed of a surface enamel layer, which is whiter and semi-transparent, and an underlying dentin layer, which is darker and less transparent. These are calcified, hard tissues similar to bone.

The natural shade of teeth is best considered as off-white or bone-color rather than pure white. Tooth color is perceived as an amalgam of factors, such as lighting conditions, translucency, opacity, light

scattering, gloss etc. Your genes play a role in the thickness and smoothness of enamel.

Tooth discoloration is the foremost cause for employing these cosmetic procedures, such as tooth bleaching.

What causes discoloration?

There are internal and external factors that affect the color of teeth. Internal factors include Tooth caries, Trauma, Enamel hypoplasia, Root resorption, Hemolytic disease of the newborn, Dentinogenesis imperfecta, Amelogenesis imperfecta and Alkaptonuria, along with the use of medicines, such as Tetracycline and Minocycline.

Plaque, calculus, tobacco and food stains, topical medications and certain metallic stains contribute to the External factors. Teeth can darken by the building-up of surface stains (extrinsic staining), which hides the natural tooth color or the tooth itself may discolor (intrinsic staining).



Dr. Anju Varughese
Assistant Professor



Dr. Rashmi Punnooran
Intern

Department of Conservative Dentistry
Amrita School of Dentistry
Kochi, Kerala, India

Types of Bleaching

'In Office' Techniques

These are bleaching techniques done with the help of a dental professional. Before treatment, the dentist, after taking the health and dental history, may examine the patient, including the observation of his hard and soft tissues, condition of the restorations, allergies and sensitivities and in some cases, even take X-rays to determine the nature and depth of possible irregularities.

'In office' techniques include Light-accelerated bleaching, Nanoparticle Catalysts for Reduced Hydrogen Peroxide Concentration and Internal bleaching of non-vital teeth.

'At home' Techniques

These are techniques that are carried out by patients themselves. From natural remedies to professional teeth whitening kits, at home techniques tend to show effective results too.

Some of the natural remedies are rubbing fruit peels, such as banana / lemon peels over your teeth or the use of activated charcoal, coconut oil, baking soda etc. Other than that, methods like Night guard vital bleaching, whitening toothpastes, whitening strips, gels and whitening rinses can also be used to achieve a potentially good result.

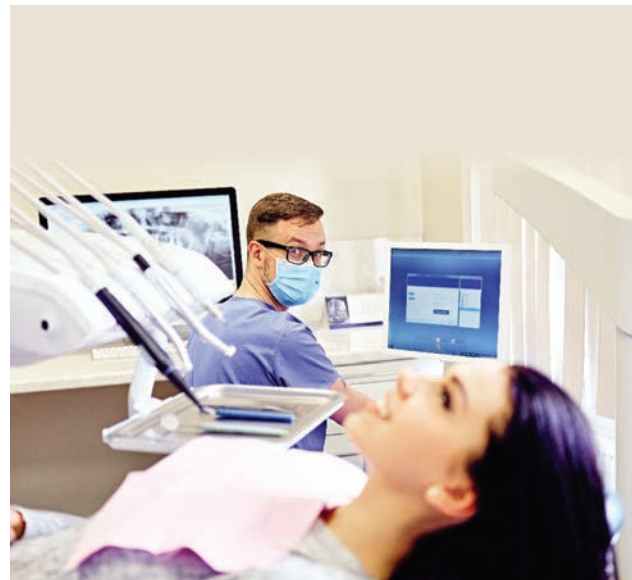
Children under the age of 16 should avoid bleaching because the pulp chamber or nerves of the tooth will be growing until this age

Bleaching enhances COLOUR and SHADE of the teeth

How does Bleaching work?

Bleaching solutions generally contain hydrogen peroxide or carbamide peroxide, which helps bleach the tooth enamel to change its color. Off-the-shelf products typically rely on a carbamide peroxide solution having varying degrees of concentration from 10% to 44%. Bleaching solutions may be applied directly to teeth, embedded in a plastic strip that is placed on the tooth or used as a gel held in place by a Mouth guard.

Carbamide peroxide reacts with water to form hydrogen peroxide. It has about a third of the strength of hydrogen peroxide. This means that a 15% solution of carbamide peroxide is the rough equivalent of a 5% solution of hydrogen peroxide. The oxidizing agent in peroxide penetrates into the porosities in the rod-like crystal structure of enamel and breaks down stain deposits in the dentin.





How safe is Bleaching?

Bleaching is a good way to give your teeth a dazzling sparkle, but it is not always the best, as it may lead to tooth sensitivity and irritation of oral mucosa. Patients who are allergic to peroxide or those with unrealistic expectations, pre-existing sensitive teeth, enamel development defects, acid erosion, receding gums and yellow roots (as roots do not bleach as readily as crowns), sensitive gums, defective dental restorations, tooth decay, active periapical pathologies, untreated periodontal diseases, pregnant / lactating women or those having cracked teeth / exposed dentin should avoid this procedure.

Children under the age of 16 should also avoid bleaching because the pulp chamber or nerves of the tooth will be growing until this age. Tooth whitening of children under the age group can irritate the pulp or cause it to become sensitive. Younger people are more susceptible to the abuse of bleaching.

What are the risks?

Though tooth whitening is generally a safe, superior and one of the sought-after methods to improve aesthetics, this procedure can result in several embarrassing side effects. Bleaching may increase the sensitivity of your teeth for days after the treatment, leading to pain while eating or drinking.

You may have a potential risk for sensitivity, if there are faulty dental restorations, gum recession or cracked teeth. In some cases, patients may also feel a sharp, spontaneous pain in their front teeth shortly after a tooth whitening session. Although the uncomfortable symptoms typically subside within two days after a tooth whitening session, issues like sensitivity can linger for a month.

How long does it stay for?

A Tooth whitening treatment usually gives quick results, but it does not guarantee the same for a prolonged period. Maintenance is an important criterion for lasting results. Apart from follow-up care, flossing, rinsing after every meal, especially after the intake of liquids that stain teeth or the use of whitening toothpaste can help retain the results for long.

Always remember to consult your dentist if necessary. Best methods that suit your oral health are well understood by a professional. No matter where or how you whiten your teeth, it would not last forever. However, maintenance can help to a certain extent. Remember, you have got only one set of permanent teeth, so it is crucial to take care of them for your entire life. So give it the right amount of pampering and keep on smiling with gleaming teeth. ☺



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magazine@dentcaredental.com
nisha.arun@dentcaredental.com
Editor in Chief, The DentCare
DentCare Dental Lab Pvt. Ltd.
NAS Road, 130 Junction
Muvattupuzha, Ernakulam
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A few DentCare

Products at a Glance



DentCare Dental Lab, a leader in the manufacture of dental prostheses for multiple decades has introduced an epochal masterpiece - DentCare Zirconia - a biomedical grade material from Germany, used for the fabrication of Crowns, Bridges, Customized Implant Abutments, Inlays and Onlays and Primary Telescopes. State-of-the-art technology from Germany, coupled with our highly skilled technicians make DentCare Zirconia, the optimum solution for perfect dental prostheses, besides guaranteeing aesthetic and functional fulfillment.

DentCare Zirconia – “One Product for Diverse Options”

DentCare Zirconia is an innovative all-ceramic prosthesis made using the latest Computer Aided Designing / Computer Aided Manufacturing (CAD / CAM) technology. Unlike Porcelain Fused to Metal (PFM) or normal opaque zirconia restorations, the tooth-coloured substructure makes DentCare Zirconia highly aesthetic and natural. Substructures are available in fluorescent-effect shades, in 7-effect shades and in more than 40 vivid, warm and natural shades (all VITA shades are available). As a novum, all DentCare Zirconia Full Contour solutions are indicated for Bruxism.



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- Natural feel and functionality
- Unmatched aesthetics
- High strength
- Highly biocompatible
- Unlimited characterization made available
- through more than 40 natural and lifelike shades
- The tooth-colored translucent substructure ensures that the natural tooth shade comes right from the internal framework level, unlike PFM or other normal Zirconia systems with opaque frames
- Designing and manufacturing using CAD / CAM assures outstanding marginal fit

Direct Metal Laser Sintering (DMLS)

Direct Metal Laser Sintering (DMLS) is a certified system for the additive manufacturing of new generation Porcelain Fused to Metal (PFMs) prostheses using imported Laser Sintering Machines from EOS, Germany.

In this system, Computer Aided Designing / Computer Aided Manufacturing (CAD / CAM) is being used to produce metal frames by sintering highly biocompatible Cobalt-Chromium (Co-Cr) powder layer by layer. DentCare uses only CE certified alloy powder directly imported from the manufacturer.

Direct Metal Laser Sintering fulfils stringent requirements of strength and stiffness, corrosion resistance and process accuracy for dental prostheses, particularly those requiring high precision as in the case of Dental Implants.

Why DMLS?

- ◇ Good fit and high retention
- ◇ Marginal adaptation is perfect; resists leakage
- ◇ Cement usage is very low (due to uniform cement gap)
- ◇ Margins are incredibly thinner
- ◇ The CAM process facilitates uniform metal thickness for ceramic layering and avoids ceramic chipping
- ◇ Fabrication of long span bridges through sintering eliminates rocking
- ◇ Crown fixing is easy (due to high precision)
- ◇ Metal structure is biocompatible and homogenous



Indications

- Single crown
- Implant Prostheses
- Short and long span bridges
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DentCare Nova

DentCare Nova is India's leading Branded Porcelain Fused to Metal (PFM) prosthesis. Pure Cobalt-Chromium (Co-Cr) alloy, which is highly biocompatible and completely free from Nickel and Beryllium, is used for its fabrication. The very best ceramic material is used for creating tooth-like appearance which makes DentCare Nova truly natural looking for aesthetics and strong for functionality.

DentCare Nova is available in ceramic facing and full metal options also.

Why DentCare Nova?

- ◆ Pure Cobalt-Chrome (Co-Cr) free from Nickel

and Beryllium

- ◆ Biocompatible
- ◆ Highly Durable
- ◆ Accurate marginal fit
- ◆ Comparatively cost effective

Indications

- In both anterior and posterior teeth
- Crowns and bridges with up to 16 units possible
- Implant prostheses



Conclusion

DentCare strongly believes that technology, hand in hand with art, results in dental prostheses with greater precision and quality.

World-class products are the outcome of our passion in improving dental care. And this keeps us at the forefront of innovation. Our dental prostheses experts are passionate about exploring new ways to address challenges in enhancing the smile. All the materials we use in production have proven scientific quality and excellence, at par with international standards and lives up to the expectations of our customers. This has given us reason to brighten the smiles of more than 40 million patients, world over, during the last thirty years.

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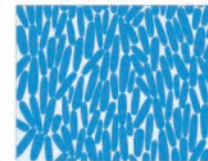
Clinical photo courtesy of Dr. Stephen Chu, DMD, MSD, CDT, New York USA. Full contour Celtra tooth #7. Adam J. Miesleszko, CDT, SDNY (Synergistic Dentistry of New York).

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