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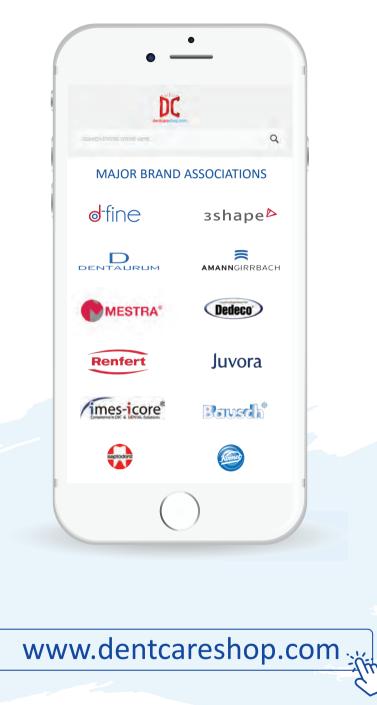
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Dear Reader,

#Balanceforbetter.

The spirit of March certainly carries genuine intent.

Women and Dentists are being singled out for celebration. Why not?

They continue to script history in their own unique ways contributing immensely towards adding real value to the world around – giving us motive to smile

@ DentCare, they provide credible basis for a lifetime cause of service in brightening human lives – enough ground to stake claim for due recognition with profound gratitude.

Strangely though, life has not been generous to them. A bitter pill to swallow!! But, that remains the bare truth as things stand today.

A small start could bring in wholesome change. Give the Women in your life the needed attention. They deserve every bit of care. Be sensitive to your dental health too. Make it your regular exercise for healthy living.

Discover Heaven on Earth by refining your thoughts and defining what is important.

The IDS @ Cologne gives March further perspective while the AEEDC @ Dubai leaves us with fabulous memories of February.

Stay grounded!! It has health benefits for sure. Keep yourself innovatively refreshed this summer as well. We reserve the warmest wishes and sincere prayers for your loved ones as the exam fervor catches up with them.

The future is exciting. Have you unearthed your reason to March??

Yours truly,

Prof. (Dr.) George P. John

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BUILDING HEAVEN ON EARTH

A home is the place where a child learns the basics of righteousness. A home is an abode of love, where one gets warmth and the sensation of joy, happiness, and enjoyment. But conflicts and dissensions most often make a home, a living hell.

What is happening to the basic social unit called Family nowadays? Is Marriage a sacred institution now? The rate of divorce is increasing in alarming proportions in India.

What is most deplorable is that there is no syllabus in schools to teach how to live a happy married life. A child learns life lessons mainly from his parents. If a child sees the richness, goodness, and trust in his parents' lives, he will definitely inculcate the same in his life too.

It is normal that two unique individuals with different personalities and backgrounds can have occasional problems like differences of opinion and interests in their relationship. Therefore, adjustments or compromises are required from the side of both the husband and wife to make a marriage work / last.

The innate desire of a man (husband) is to attain success in life; hence, to him, everything else is secondary. If he finds that his better half is continuously supportive in his life journey towards achieving his goals, he will definitely have a soul mate relationship with her and will love her more than anybody / anything else.

A woman (wife) expects affection, care / support, and intimacy from her husband. She craves for a feeling of security from her husband and wants her spouse to set apart a considerable amount of time to lift her up with words of appreciation and love. The interference of parents in the married life of their daughters has become a major reason for discord between couples. It is imperative for parents to draw the line to keep themselves away from unnecessarily involving in the personal matters of their daughters and their sons-in-law. Parents and relatives should create an environment to make the marital relationship of their children / kindred strong.

Great marriages are not made by having a perfect spouse. Everyone has more weaknesses than strengths. Dwelling on the imperfections of one's spouse will definitely destroy the relationship. Couples should start supporting / imitating each other's preferences, dreams and wants to achieve sameness and avoid conflicts in life. It is important that both the husband and wife step into each other's shoes.

Great marriages are made when two people are reasonably compatible and when each one continues to look for the good in the other, and when there is mutual support, forgiveness, and respect, in addition to keeping God in the center of their life; which will eventually result in the building up of a strong and healthy society.

Marriage is an institution ordained by God; may the Almighty help you hold fast the sanctity of the institution of Marriage, for a lifetime.

Mr. John Kuriakose Managing Director DentCare Dental Lab Pvt. Ltd.



ORAL HYGIENE ARSENAL

ral hygiene maintenance should be an integral part of one's daily routine. It is important to understand that dental care is an essential factor for general health. Neglecting oral care can have negative consequences for the entire body.

Besides regularly visiting the dentist for professional prophylactic assistance, you should have certain essential oral care products and equipment that help keep your oral cavity healthy and hygienic all the time.

A huge variety of oral care products are now available in the market for maintaining your oral hygiene.



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

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1. The Toothbrush

The Toothbrush, an essential oral hygiene instrument, has significantly evolved over a period of time. The people of ancient civilizations used twigs from medicinal plants to clean their teeth. Subsequently, people began to use Toothbrushes with bristles made from animal hair, quills, and fur.

Today, there are Ultrasonic Toothbrushes that use a very high frequency of vibration to remove plaque and bacteria from your teeth. Some of them even come with a pressure indicator and timer.

A Toothbrush is an inevitable tool for the removal of debris and plaque from the surfaces of your teeth. However, its efficacy is widely dependent on the type of technique used and the frequency of brushing.

Though most of the tooth surfaces can be successfully cleaned with a Toothbrush if used properly, some areas may remain elusive. The interdental areas that lie between your teeth cannot be properly cleaned as it is difficult to reach with a Toothbrush.



2. Toothpaste

Toothpaste comes in various colors, flavors, and packaging. It contains a detergent which acts as an effective cleaning agent. Some types of Toothpaste also have additional foaming agents. Many types of Toothpaste available in the market come with fluorides that help fight Dental Caries.

Some other types of Toothpaste contain microbial agents that help reduce pathogens causing Gum Disease. Abrasive agents in Toothpaste help clean and potentially whiten your teeth by removing surface stains. Toothpaste for Sensitive Teeth is less abrasive in nature.

Besides helping reduce friction while brushing, Toothpaste helps disinfect those areas that are hard to reach with a Toothbrush. The flavors of Toothpaste give a sense of freshness to your breath and are helpful in masking your bad breath. Toothpaste works best when it is used in combination with a Toothbrush.



3. Dental Floss

Dental Floss is a thin filament, which is elastic in nature and is used predominantly to clean the interdental (interproximal) areas of your teeth. These areas are usually hard to reach with a Toothbrush. Dental Floss can reach the most inaccessible interdental areas with ease.

Various types are available, depending on the material they are made of. They can be either braided or non-braided. They are available as precut (pre-measured) strands or as spools, wherefrom the desired length can be cut off before use. Some types come attached to plastic holders while others to a powered handle that moves in a back-and-forth motion.

Dental Floss is ideal for use around your malpositioned teeth and in embrasures that are very narrow, especially in the anterior regions. It is also efficient in cleaning the areas under dental crowns and prosthetic units. It can be used in wider embrasures as well, but there are other tools that are better suited for cleaning wider embrasures.



4. Interdental Brush

An Interdental Brush is a narrow brush that helps clean the interproximal and furcation areas. It can even reach under dental bridges and prosthetic units. Interdental Brushes are available in varying sizes and thicknesses. They come as a tuft of unidirectional or radial bristles arranged around a central axis forming a conical shape. They come attached to handles of different sizes which are either straight or contra-angled to facilitate reaching the most distal areas of your mouth.

An Interdental Brush works efficiently in wider embrasures that are too big to floss. It can also be used around the archwires in patients undergoing orthodontic treatment, or those using space maintainers, or periodontal splints. Interdental Brushes can be used to apply medications or desensitizing agents around inaccessible areas as well.



5. Interdental Tip

An Interdental Tip, which is made of soft rubber, wood, or plastic, is rounded at the tip and is attached to a handle. It helps remove soft deposits from the gingival margins. Interdental Tips primarily aid to massage the gingiva, particularly in the areas of inflammation. They stimulate blood flow in the inflamed tissues, helping ease the inflammation in the gingival areas. They are either rounded or conical in cross-section to enable easy access to interdental areas. However, Interdental Brushes and Dental Flosses are more efficient as they help not only clean but also stimulate the gingival tissues.



6. Tongue Cleaner

Tongue Cleaners are usually scrubbing or scraping devices made of plastic, rubber, or metal, which are used to scrape off deposits accumulating on the ventral surface of your tongue. If unchecked, these deposits can accumulate to form an organized ecosystem or biofilm, which can house a lot of harmful bacteria. Over the course of time, these deposits will be too difficult to clean. Regular use of Tongue Cleaners in conjunction with tooth brushing gives the best results when it comes to overall oral health.



7. Oral Irrigator

Oral Irrigators are devices that use water / solutions to irrigate inaccessible or diseased areas of your mouth. They have a hand piece connected to a motor, which uses a stream of water to flush out food particles and debris from the areas inaccessible to a Toothbrush.

Oral Irrigators can also be used to deliver medicated solutions to specific areas of your mouth. The irrigators have an option for adjusting the pressure and amount of water being dispensed. It can even be programmed to shoot a continuous / pulsatile stream of water.

Conclusion

Many oral hygiene aids have been developed to augment the effect of tooth brushing and oral hygiene maintenance. The use of a Toothbrush with Toothpaste remains the gold standard of oral care today. All other aids only serve as adjuncts to enhance your oral hygiene.

Since most dental aids are technique sensitive, their proper usage can be learned only through practice. Even a Toothbrush becomes ineffective when it is not used properly. Aggressive or improper use of oral care devices can cause more harm than do good. It is important to learn the efficient use of oral care devices either from your dentist or from the manufacturer.

Ultimately, the aim of oral care devices is to reduce the accumulation of plaque to improve your oral health and avoid associated diseases and complications. Regular visits to the dentist can help you understand how to efficiently keep your mouth free of deposits and infections. Your dentist can help to guide and educate you on modifying the techniques you use and may help you add the necessary adjuvants to your existing oral care regimen.



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WHAT IS ORAL CANCER?

ral Cancer, which could involve any part of the oral cavity, can be life-threatening if it is not detected and treated early. Oral Cancer belongs to a larger group of Cancers called Head and Neck Cancers. It may arise as a Primary Lesion originating in the tissues of the mouth and is commonly associated with regional metastasis to the neck lymph nodes.

Oral Cancer appears as a growth or sore in the mouth, which includes Cancers of the lips, tongue, cheeks, the floor of the mouth, hard and soft palate, sinuses, and pharynx (throat).





Dr. Sai Deepika Dental Practitioner Copenhagen, Denmark

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What are the Symptoms of Oral Cancer?

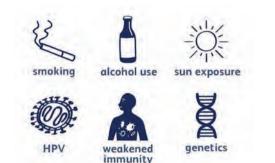
The most common symptoms of Oral Cancer include

- Swellings, lumps, rough spots / crusts, or eroded areas on the lips, gums, or other areas inside the mouth
- White, red, or speckled (white and red) patches in the mouth
- Unexplained bleeding in the mouth
- Unexplained numbness, loss of sensation or pain / tenderness in any area of the face, mouth, or neck
- Persistent sores on the face, neck, or mouth that bleed easily and do not heal within two weeks
- Difficulty in chewing, swallowing, speaking, or moving the jaws or tongue
- Hoarseness, chronic sore throat, or change in voice
- Persistent ear pain
- A change in the way your teeth or dentures fit together
- Rapid weight loss



Who usually gets Oral Cancer?

According to the World Health Organization (WHO), Carcinoma of the oral cavity in males in developing countries is the sixth commonest Cancer while in females it is the tenth commonest Cancer.



Risk Factors for Oral Cancers

Risk factors for developing Oral Cancers include

Smoking

Cigarette / pipe smokers are six times more likely to develop Oral Cancers than non-smokers.

Smokeless Tobacco Users

Users of dip, snuff, or other types of tobacco products are fifty times more likely to develop cancers of the cheek, gums, and lining of the lips than those who do not use them.

Excessive Consumption of Alcohol

Oral Cancers are about six times more common in alcoholics than in non-alcoholics.

Family History of Cancer

There is a higher risk of developing Cancer in the head and neck regions, including the mouth if a first-degree relative (parent, sibling or offspring) has been diagnosed with Cancers of the head and neck.

Excessive Sun Exposure

Prolonged / excessive exposure to sunlight, especially at a young age can contribute to the risk of developing Skin Cancers.

Human Papilloma Virus (HPV)

Certain Human Papilloma Viruses are a risk factor for Oropharyngeal Squamous Cell Carcinoma (OSCC).

Diagnosis

Early diagnosis of Oral Cancer helps reduce the mortality rate and helps improve treatment outcomes.

Tests and Procedures for Diagnosis

Oral Cancer Screening

This consists of an examination of the lips and mouth to look for abnormalities or areas of irritation, such as sores and white patches (Leukoplakia), lumps, or irregular tissue changes in the neck, head, face, and the oral cavity.

Biopsy Procedures

If a suspicious area is found, a sample of cells is removed from the region for a laboratory test / biopsy. In the laboratory, these cells are analyzed for Cancer or precancerous changes that indicate a risk of Cancer.

Stages of Mouth Cancer

There are four stages of Mouth Cancer. A lower stage or stage I indicates a smaller Tumor confined to one area while a higher stage or stage IV indicates a larger Tumor that has spread around the lips and oral cavity or other parts of the body.



Treatment Surgery

To remove the Tumor

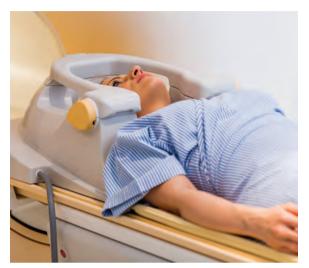
Smaller Tumors can be removed through a minor surgical procedure while larger ones may require more extensive procedures. For instance, removing a larger Tumor may involve removing a section of the jawbone or a portion of the tongue.

To remove Cancer that has spread to the Neck

If cancer cells have spread to the neck lymph nodes, your surgeon may recommend a procedure to remove cancerous lymph nodes and adjacent tissues in your neck (neck dissection).

To reconstruct the Mouth

After a surgical procedure for Cancer, reconstructive surgery may be necessary to rebuild the mouth or help a patient regain the ability to talk and eat. Reconstructive procedures include transplantation of the skin, muscles, bones etc.



Radiation Therapy

Radiation therapy is administered if Oral Cancers are in their early stages. It is usually carried out after a surgical procedure.



Chemotherapy

Chemotherapy is the use of drugs to destroy rapidly growing cells in the body of a patient. Chemotherapy drugs can be given alone or in combination with other drugs / other Cancer treatment. In many cases, Chemotherapy and Radiation therapy are combined together to enhance treatment outcomes.

"

Smaller Tumors can be removed through a minor surgical procedure while larger ones may require more extensive procedures

How to Prevent Oral Cancers?

- Abstaining from smoking / using tobacco products
- Drinking alcohol in moderation
- Eating a well-balanced diet
- Limiting exposure to the sun. Repeated exposure increases the risk of Cancer of the lips, especially the lower lip
- Conducting a self-examination at least once a month
- Visiting your dentist every six months



Coping with Oral Cancer

1

- Maintain a positive attitude as far as possible
- Learn more about Mouth Cancer
- Talk to the survivors of Mouth Cancer
- Keep family and friends close

Conclusion

Health education, tobacco / alcohol control, early detection, and treatment etc., are necessary to reduce the burden of Oral Cancers. Improving awareness among the general public, including primary care practitioners, dispensing screening / early diagnostic facilities for people, especially for tobacco and alcohol users, and providing adequate treatment for those diagnosed with Cancers are critical in controlling Oral Cancers, a preventable disease.



IMPORTANCE OF EXERCISE FOR HEALTHY LIVING

healthy body is important for leading an active/ healthy life. We should try our best to keep our bodies fit, and disease-free for a lifetime. Along with physical exercise, a healthy, balanced diet is inevitable to keep the body healthy, lifelong.

Ayurveda, an art of healthy living, gives complete knowledge about our body and many factors connected with our lives, such as the kind of food we should eat; the type of lifestyle we must follow; the correct timing for food intake and sleep; the correct posture while sleeping, sitting, walking, and standing, along with a host of things we should refrain from so as to avoid the risk factors associated with physical and mental health. More than that, Ayurveda tells about many types of Yoga that help people lead a healthy lifestyle.

One of the important risk factors that are associated with many lifestyle diseases like Obesity, Hypertension, Type 2 Diabetes, Heart Disease, Respiratory Disease etc., is lack of physical exercise.



Dr. Jacqueline A. Senior Medical Officer Government Ayurveda Dispensary Thiruvananthapuram, Kerala, India

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Types of Exercises

Aerobic Exercises

Aerobic exercises are good for many bodily functions. It increases heart / breathing rate; relaxes the blood vessels; lowers blood pressure and blood sugar levels; burns body fat; reduces inflammation, body weight, and the levels of Low-density Lipoproteins / Bad Cholesterol.

Long-term aerobic exercise helps reduce the risk of developing Heart Diseases, Stroke, Type 2 Diabetes, Cancers of the large intestine and breast, Ulcers, Depression, Anxiety, Dementia etc.

A few aerobic exercises are brisk walking, jogging, swimming, cycling, dancing etc.

Strengthening Exercises

Strengthening exercises not only make our muscles grow strong but also stimulates bone growth; lowers blood sugar levels; assists with weight management and improves balance and posture, besides reducing stress and pain in the lower back and joints.

Stretching Exercises

If stretching exercises are done routinely, it will increase our range of motion; improve blood flow and flexibility; relieve stress, and reduce pain and risk of injury. This is more important for the hip / shoulder joints, neck, lower back etc.

Balancing Exercises

This exercise helps keep the body upright and helps prevent falls. Balancing exercises are very important for the elderly as the systems that help maintain balance, such as the inner ears, eyes, leg muscles, and joints become very weak in old age.

A few balancing exercises are standing on one foot, walking heel-to-toe with eyes opened or closed, walking through a straight line drawn, and standing knee lift.

Benefits of Exercise

Exercises help enhance the wellness of both our body and mind. Daily / regular exercises help improve our physical ability, muscular strength, cardiorespiratory fitness, and overall health, in addition to reducing the risk of Hypertension, Coronary Heart Diseases, Stroke, Type 2 Diabetes, certain types of Cancers, and Obesity, besides helping with weight management; keeping arteries and veins healthy, and improving mental health and brain function.

Regular exercise makes us feel happy and helps induce Fat loss. It also helps prevent Osteoporosis / bone degeneration, muscle stiffness etc. Regular exercise helps increase vascularity and the function of the lungs, in addition to reducing the risk of developing many chronic diseases like Asthma, Chronic Obstructive Pulmonary Disease, Allergies, Tuberculosis (TB) etc.

Due to the increased blood supply, every internal organ gets well-nourished / oxygenated and becomes active in their function. Therefore, heart / respiratory rate, blood pressure, blood sugar etc. can be brought down to healthy levels.

Due to sweating during exercise, impurities and toxins in the blood will come out through the pores in the skin, making it clear, smooth, and shiny. This cleansing process helps reduce inflammation of the skin and boosts the immune system.

Regular exercise also helps reduce the incidence of different types of Cancers. There is a reduction in the risk of developing Colon Cancer by 24%; Cancers in pre- and postmenopausal women by 12%, and Uterine Cancer by 20%. The risk of developing Cancers of esophagus, liver, stomach, lungs, kidneys, urinary bladder, and gastrointestinal tract can be reduced very much with regular exercise.



Conclusion

Regular exercise, especially Yoga helps keep the muscles and bones strong, increases our energy levels, and reduces the risk of developing many chronic diseases. Therefore, stay healthy and be happy!

A BRAVE WOMAN WHO SCRIPTED HISTORY

Lieutenant Governor Dr. Kiran Bedi



Kiran Bedi, a retired Woman Indian Police Service (IPS) Officer and Social Activist, is the Lieutenant Governor of Puducherry, India.

Dr. Kiran Bedi was the **first woman to join the Indian Police Service in 1972**, helping bring a ray of hope to the lives of young girls and women to pursue a career path that was once thought to be unsuitable for women, in addition to becoming an epitome of inspiration to millions of women across the country.

In 2003, Dr. Bedi became the first Woman Police Officer to be appointed as a Civilian Police Advisor to the Secretary-General of the United Nations (UN), in the Department of Peace Keeping Operations. She was awarded a medal for her outstanding performance with the United Nations.

The **Ramon Magsaysay Award**, also known as the Asian Nobel prize, was conferred upon her in 1994 for her excellent contributions to the country as an IPS Officer.

Dr. Kiran Bedi has been a simple woman with a strong mind, character, courage, and strategy, who has always put the interest of people at the forefront. She has founded two Non-Governmental Organizations: **Navjyoti and India Vision Foundation**, to provide primary education and adult literacy programs as well as vocational training and counseling services for women, besides facilitating drug rehabilitation for prisoners.

Dr.Bedi opens her mind to 'The DentCare'.

01

You have been the first Woman IPS Officer and Social Activist and now, you are a Lieutenant Governor. Which role do you like most?

I equally enjoy every assignment that has been entrusted upon me. Reaching out to the people in dire need; understanding their needs; addressing them to the best of my ability, and providing an environment which helps them initiate introspection give me great joy. For me, every work is a path of self-discovery. If I take up an assignment, I will do full justice to it or else I will walk away from it.

02 You stay enthusiastic / motivated; what keeps you going?

I will wake up with energy; work on energy; build energy throughout the day, and go to sleep without discharging the energy. My personal discipline has helped generate the inner energy to go on. I have been living every moment with a great sense of gratitude of not having wasted a single day.

Besides, I have always been progressive with time. Every day has been a preparation for the following day. There has never been any pressure of winning or losing; it has been just about doing it the right way. It has been a journey for a better tomorrow and I always believe in contributing to and using all my skills or energy for the greater good of people at large.



How do you feel about winning the Ramon 03 Magsaysay Award in 1994 and what are the contributory factors that made you get the covetous Award?

The award was for forging a positive relationship between the Police personnel and the People of India. I have been really happy that I could give the prisoners of the country, hope and love. As the Inspector General of Prisons from 1993 to 1995, I have made a number of reforms in the management of Tihar Jail, the country's largest prison, and launched several initiatives, such as Detoxification programs, Art of Living courses, Literacy programs, and Yoga for their welfare.

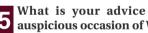
I could introduce a religious approach to jail inmates with the introduction of Yoga, meditation, and discourses by various sections of religious groups, helping inculcate spirituality and human values amongst the undertrials and convicts. The prison became an open school where the illiterate inmates were made literate and the literate were encouraged for higher studies.

However, the best gift that the inmates of Tihar jail got was Vipassana, an ancient form of meditation. In fact, a Vipassana meditation course was organized in Tihar Jail wherein more than 1000 inmates sat together for the first time anywhere in the world. Vipassana meditation worked wonders with the destructive and deviated mindsets of the prisoners and they confessed that they had become better human beings.

Vipassana meditation has been successfully tried and is being practiced in various prisons in India and abroad; namely the United Kingdom (UK), United States of America (USA), and Taiwan. Many studies concluded that Vipassana meditation has been helpful in controlling crime; enhancing the image of law enforcement, and improving prison conditions.

Women all over the world admire you. Who do 04 you admire the most?

I have never had to look beyond my parents whom I admire most. They were the best and still remain the best. My parents brought me up to take risks. The 1950s and 1960s were not a period for girls in India, but for boys who would join and inherit the business from their parents, while the girls would be doled out to get married. My family was unique. My parents always encouraged me and gave me the freedom to follow my heart. I would say that my spark to be a source of strength and value to others has been ignited by my parents.



What is your advice for Women on the 05 auspicious occasion of Women's Day?

Grow up strong. Be mentally and physically self-reliant. Always remain confident and sure of yourself, besides being ethically strong. This will help you get the inner strength to live a life on your own terms. My piece of advice is that you do what you enjoy doing and then give it your best in order to live a life of joy, happiness, and sharing.



For The DentCare Interviewed by Ms. Nisha Philip Xavier



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EBOLA VIRUS DISEASE: AN UPDATE!!



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Dr. Jyotsana Sikri Senior Lecturer Department of Conservative Dentistry and Endodontics Sudha Rustagi Dental College and Hospital Faridabad, Haryana, India

B bola Virus Disease (EVD) is an acute illness that can be life-threatening if left untreated. EVD was discovered in 1976 in two simultaneous outbreaks; one in Nzara, the Republic of South Sudan and the other in Yambuku, the Democratic Republic of the Congo. The latter occurred in a village near the Ebola River from which the disease takes its name.



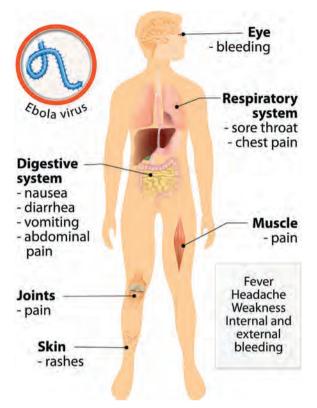
Transmission

Ebola Viruses are highly infectious in human beings. They are transmitted through direct contact with the bodily fluids of infected persons or animals.

Symptoms

In humans, the incubation period of EVD varies from 2-21 days. A victim is not considered infectious until he develops the symptoms. Though the symptoms vary from person to person, they generally include a sudden onset of fever, fatigue, muscle pain, headache, and sore throat, followed by vomiting, Diarrhea, and Rash. In a few cases, there will be both internal and external bleeding.

Sequelae and other conditions in EVD survivors include musculoskeletal pain, headache, abdominal pain, and sexual dysfunction. These symptoms may persist for months to years after recovery from the infection.



How is the Disease diagnosed?

A number of tests are now available which helps diagnose Ebola Virus Disease within a few days from the onset of the symptoms. The diagnostic assays for EVD include Enzyme-linked Immunosorbent Assay (ELISA), Serum Neutralization Test, Reverse Transcriptase Polymerase Chain Reaction (RT-PCR), Electron Microscopy, and Cell Culture for Virus Isolation.

Differential Diagnosis

Differential diagnosis is important to determine the etiology of an outbreak. In humans, the significant diseases to be ruled out include Malaria, Typhoid Fever, Shigellosis, Cholera, Leptospirosis, Plague, Rickettsiosis, Relapsing Fever, Meningitis, Hepatitis, Yellow Fever, and other viral Hemorrhagic Fevers.



How to treat this disease?

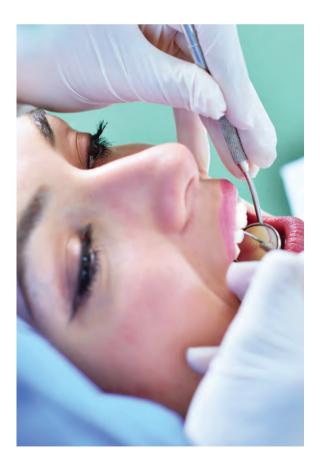
There is as yet no proven treatment available for EVD. However, basic interventions, such as providing fluids and electrolytes (body salts); offering oxygen to maintain oxygen status; using medications to manage blood pressure levels and reduce vomiting as well as Diarrhea, along with managing the fever and pain can significantly improve the chances of survival of an infected person.

An experimental Ebola vaccine, which is expected to be highly protective against the deadly virus, is under trial in Guinea. Recombinant Vesicular Stomatitis Virus-Zaire Ebola Virus (rVSV-ZEBOV) is an experimental vaccine being developed to protect against Ebola Virus Disease.

Prevention and Control

During an outbreak, the control measures include applying a package of interventions, such as case management, surveillance, contact tracing, a good laboratory service, and safe burials, along with social mobilization.

Community engagement is also vital in successfully controlling an outbreak. Raising awareness of the risk factors for Ebola infection, along with protective measures including vaccination can be effective in reducing human transmission.



"

Individuals who have visited an Ebola-affected area but have had no direct contact with the infected are considered having very low risk and hence, there is no restriction for them to seek dental treatment

What should a Dental Surgeon know?

It is extremely unlikely that a dental practitioner will diagnose or treat patients with overt Ebola Virus Disease, as they are too weak to present for dental treatment. However, it is possible that asymptomatic patients or those in the early stages of the disease / with non-specific symptoms may undergo dental treatment.

It is also possible that dentists may encounter patients who have recently traveled from the areas affected by an Ebola outbreak. Individuals who have visited an Ebola-affected area but have had no direct contact with the infected are considered having very low risk and hence, there is no restriction for them to seek dental treatment.

However, individuals who have had contact with a person having Ebola Virus infection should defer non-essential treatment for 21 days, after the possible virus exposure. If a patient's condition is critical or cannot be managed with pharmaceutical methods, the regional Health Service Executive (HSE) / Department of Public Health should be contacted.

Conclusion

Although EVD is an alarming disease with a very high mortality rate, it is extremely unlikely that it will pose a significant risk of transmission in dental practice. Gingival bleeding is seen only in patients in the acute stage; when they are too weak to present for dental treatment. If a person is exposed to the virus, he may be advised to defer dental treatment for 21 days after the possible virus exposure.



Brush off all your worries and brighten your day with a sweet smile!!!



Happy Dentist's Day

March 6

TOOTH SENSITIVITY: AN OVERVIEW





Dr. Najila Firose Dental Practitioner Abu Dhabi, United Arab Emirates

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ooth Sensitivity (Dentin Hypersensitivity) is the pain or discomfort experienced when a tooth is exposed to hot, cold, sweet or very acidic food and drink, or when a tooth comes in contact with cold air. It may occur over a period of time as a result of common dental problems, such as receding gums, enamel erosion, tooth decay etc. Tooth Sensitivity is prevalent in patients aged between 20 and 50 years.

Tooth Sensitivity begins to develop when the dentin, the layer that lies immediately underneath the hardwhite enamel of a tooth becomes exposed.

What Causes Sensitive Teeth?

A few common causes of Sensitive Teeth are

- Tooth Decay
- Fractured tooth
- Worn out tooth fillings
- Enamel Erosion
- Exposed tooth roots caused by Gum Disease

Common Triggers for Tooth Sensitivity

- Intake of hot / cold / sweet / acidic foods and beverages
- When the teeth come in contact with cold air that triggers a sensitive tingle
- Brushing too hard or flossing incorrectly
- Use of alcohol-based mouthwashes



Diagnosis

The diagnosis of Dentin Hypersensitivity can be challenging. Thorough patient history and detailed clinical examination are essential for proper diagnosis. The examination includes a Pain Provocation Test wherein the air is blasted from a dental instrument onto the sensitive area. If the test is negative, no treatment is indicated for Dentin Hypersensitivity.

Treatment for Sensitive Teeth

Tooth Sensitivity is a treatable condition. The type of treatment will be decided on the basis of the underlying causes of Tooth Sensitivity. Depending on the circumstances, your Dentist may recommend the following

• Desensitizing Toothpaste

This contains compounds, such as Potassium nitrate or Strontium chloride that helps block transmission of sensation from the tooth surface to the nerves of your tooth.

• Fluoride Gel

It is an in-office technique that helps restore the minerals on the tooth surfaces and helps inhibit the growth of harmful oral bacteria. More than that, it will help keep Tooth Sensitivity at bay.

Gum Grafting

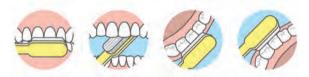
Gum Grafting is a surgical procedure in which a Periodontist removes healthy gum tissue from the roof of the mouth and attaches it to the area where the gums have receded. This will help protect the root and reduce Tooth Sensitivity.

Root Canal Treatment

When Tooth Sensitivity is severe and persistent and cannot be treated by other means, your Dentist may recommend a Root Canal Treatment to eliminate the problem.

How to Reduce Tooth Sensitivity?

Gingival recession and cervical tooth wear can be avoided with the best dietary and oral hygiene practices. A proper brushing technique will help reduce gum recession and cervical tooth wear.



Consumption of acidic food and drink should be limited to reduce acid attacks on the tooth enamel. More than that, the teeth should not be brushed immediately after the consumption of acidic food and drink. Non-abrasive food will help reduce the risk associated with tooth wear. Flossing once a day will also help reduce Gum Disease and Tooth Decay.

Though Tooth Sensitivity is not a serious problem, it should be detected early and treated properly so as to keep your permanent dentition healthy for a lifetime.



CAN ROOT CANAL TREATMENT FAIL?

Root Canal Treatment (RCT), also referred to as Endodontic treatment, is a procedure to remove the infected pulp (nerves, blood vessels, and connective tissues) from inside a tooth. An opening is made on the surface of the tooth to remove the diseased and dead pulp tissues from inside the tooth. The root canal is cleaned, shaped, and decontaminated using instruments and disinfecting solutions.

After the initial cleaning, if the dentist feels that bacteria still persist inside the tooth, a medicament is placed in the area to eliminate them completely. Antibiotics may also be given to treat and prevent infections.

The root canal is then filled with a rubber-like material using an adhesive cement to seal the canal completely. It is mandatory to place a dental crown on the tooth after Root Canal Treatment.



Dr. Kalyani Nerakar Dental Practitioner Pune, Maharashtra, India

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A properly executed Root Canal Procedure helps prolong the life of a dead / infected tooth against an alternative to extracting and replacing it with a denture or dental bridge / implant

When is this Procedure recommended?

A Root Canal Treatment is recommended to repair and save a tooth that has been badly damaged, due to Tooth Decay, trauma, a fractured restoration, Periodontitis extending into the tooth pulp, or a worn down tooth exposing the pulp.

What is the Advantage?

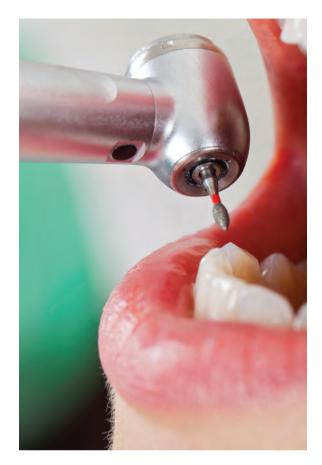
A properly executed Root Canal Procedure helps prolong the life of a dead / infected tooth against an alternative to extracting and replacing it with a denture or dental bridge / implant. The long-term success rate of a root canal treated tooth is 85 - 93% whereas that of a re-root canal treated one is 50 - 75% at best.

Reasons for the Failure of Root Canal Treatment

- 1. An extra canal in the tooth beyond what would normally be expected
- 2. When the root canal is under filled or when root canal filling materials inadvertently extrude beyond (overfilled) the apex of the root of a tooth
- Iatrogenic errors, such as poor access cavity design/ preparation
- 4. A breakdown or leakage of a restoration
- 5. Unusual anatomy of a tooth
- 6. Accidental instrument breakage inside a tooth
- 7. An anaerobic infection that does not easily resolve

What to do when a Root Canal fails?

When a Root Canal Treatment fails, a Root Canal Re-Treatment can be performed. A specialist in Root Canal Treatment or an Endodontist is the best person to treat such cases. Sometimes a surgical intervention like Apicoectomy (root resection) may become necessary.



The Success of Endodontic Therapy

The success of Endodontic therapy depends on many factors, including patient compliance and the condition of the tooth prior to treatment. Case selection should be done carefully based on the clinical scenario, X-rays, and history of the patient. Instead of extracting and replacing a damaged tooth with a denture or dental bridge / implant, priority should be given to save the natural teeth.

How to avoid Failure?

- Avoid the use of a root canal treated tooth for chewing hard food
- Ensure regular follow-up visits
- Place a dental crown immediately after a Root Canal Procedure to avoid tooth fracture and reinfection

Conclusion

Compliance of all the instructions given by your dentist, including taking the medications exactly as prescribed and reporting to your Dentist when any discomfort arises will help avoid complications after a Root Canal Treatment.

ORTHODONTIC TREATMENT: A FEW COMMON QUERIES

The dontic treatment is usually recommended to correct malocclusion and can help improve your facial appearance. This article will help clarify some of the common queries that are repeatedly asked by our patients and the general public.





Dr. Subarna Saha Consultant Orthodontist Kolkata, West Bengal, India

1. When should a Child seek Orthodontic treatment?

It is a very common question among people as to when a child should visit an Orthodontist to correct the problems associated with occlusion. It is said that even many of the Dental Practitioners are not aware of it. Hence, they often give a vague answer that a child may be taken to an Orthodontist after 12 years of age, i.e., after the eruption of all the permanent teeth.

But, in fact, this is not correct. The first visit of a child to an Orthodontist should be at the age of 6 or 7; when the permanent teeth start erupting in the oral cavity. This will help a Dentist recognize and correct malocclusion in a child.

2. Can Adults seek Orthodontic treatment?

There is a myth that only kids and teenagers can get their teeth corrected. In fact, there is no age limit for Orthodontic treatment. But, when the gum tissues are not healthy while undergoing Orthodontic treatment, it can result in bone loss, declining the long-term success of the treatment. Hence, Gum Disease should be brought under control prior to Orthodontic treatment. Adult Orthodontics has come up with latest developments, facilitating excellent treatment outcomes. Therefore, you are never too old for smile therapy.

3. Are Braces the only option for Orthodontic correction?

Metal Braces, a traditional device, were the only option for Orthodontic correction in the past. The advent of the latest devices in the field of Orthodontics has changed the scenario. Many new types of Braces like Ceramic / Composite Brackets have been introduced. They are tooth-colored and hence, they will not give a metallic look. Damon Braces are also now available, which are recommended for patients who want to do Orthodontic treatment at a faster pace. They are available both in metal and ceramic.

There are also Clear Aligners that are being recommended for patients who do not like to wear Braces for tooth straightening. **DentCare Clear Aligners**, a series of clear, removable, translucent splints that fit perfectly over the teeth, are the best alternative to patients who want to straighten their teeth without other people ever realizing that they are undergoing Orthodontic treatment.



4. Why should one get Orthodontic treatment done?

Orthodontic treatment is primarily done for aesthetics. Besides improving your smile, this treatment helps to enhance the stability and function of the oral structures, which in turn, improves your oral health. A misaligned tooth will have more deposition of debris and calculus which, in due course, can cause Gum Disease, gradually leading to loosening of the teeth and eventually to tooth loss. Orthodontic treatment will not only give you a perfect smile but also improve your oral health.

5. Can one eat normal food while wearing Dental Braces?

Yes, one can have normal food while undergoing Orthodontic treatment, with slight adjustments to one's eating habits. It is better to cut vegetables and fruits into pieces before eating. There is no inhibition in ingesting hot or cold food items.

6. Can one play sports or musical instruments with Dental Braces?

Yes, of course, one can engage in sporting activities, except that during contact sports like boxing, football, and wrestling one should wear a custom-made Mouthguard. There is no problem with playing musical instruments and singing songs. Musicians and singers can play musical instruments / sing songs while wearing Dental Braces.

DOES EARTHING HAVE HEALTH BENEFITS?



Dr. S. J. Govindaraj Consultant in Oral Medicine and Radiology and Certified Implantologist Bengaluru, Karnataka, India

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E very chemical reaction taking place in the human body involves attraction and repulsion of electrical charges. Scientific evidence proves beyond doubt that whenever there is a disruption of these electrical charges, there will arise a health concern or a possibility of morbidity.

Grounding or Earthing is one of the most comprehensive treatment modalities of modern times. Research has shown that connecting to the natural energy of the earth by walking barefoot on the grass, sand, or rock can reduce chronic pain, fatigue, and other ailments that plague the human body. This connection is referred to as Grounding.

Earthing can be achieved in a number of ways: standing, sitting, lying or walking with direct skin contact to the ground and by using Earthing bed sheets or mats.

In the industrialized world, people generally live for days without allowing their bodies to come in contact with the surface of the earth. Most often, they are cooped up in their homes or offices and hence, they do not get an intimate connection with the earth. Besides, many people are wearing nonconductive shoes that shield their bodies from getting intimate Grounding.

The Human body is highly conductive and gives off and receives energy incessantly. When your body does not interact with the electromagnetic force of the earth through Grounding, it is certain to be thrown off balance.

The earth has an infinite supply of free electrons; so when a person is grounded, the electrical potential of his body becomes equalized with the electrical potential of the earth through the transfer of electrons from the earth to the body. This process will help reduce free radicals and eliminate the static electrical charges in the human body. The effects of Grounding are so powerful that it helps reduce or prevent inflammation from occurring in the body, which in turn, inhibits inflammation-related health disorders.

Benefits of Earthing

A few science-backed benefits of Earthing are

- * Regulates Cortisol, a stress hormone, enabling speedy recovery from stress
- * Neutralizes free radicals that are known to initiate Cancer / damage cells
- * Reduces inflammation and associated pain
- Improves Circadian rhythm
- Improves sleep
- * Reduces risk factors of Cardiovascular Disease

"

Earthing can be achieved in a number of ways: standing, sitting, lying or walking with direct skin contact to the ground and by using Earthing bed sheets or mats



Conclusion

Grounding is the most comprehensive healing modality available. Let us explore the health benefits of Grounding, which will help keep our bodies both mentally and physiologically healthy and active.

Go for Grounding as it is the easiest, most readily available healing modality for people of all ages and health statuses.

Congratulations !!!

ENCE

 Dr. Ciju A. Paulose (President, Indian Dental Association, Kerala State Branch) receives the award for 'The Best State President' from the hands of Dr. Dibyendu Mazumdar (President, Dental Council of India), Dr. Deepak Makhijani (President, Indian Dental Association) & Dr. Ashok Dhoble (Honorable Secretary General, Indian Dental Association) during the 72nd Indian Dental Conference held at Indore, Madhya Pradesh, India.

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THE WISDOM BEHIND WISDOM TEETH

Ahhhh



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Dr. Aabha Agarkar Consultant Prosthodontist Pune, Maharashtra, India

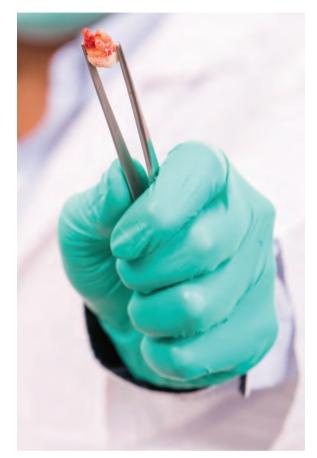
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Wisdom Tooth, also known as the Third Molar, is one of the three molars of a quadrant in the human dentition. It is the most posterior of the three molars. It generally erupts in an adult during the late teens or early twenties.

Though a Third Molar does not contribute even to an iota of human intelligence, it called a Wisdom Tooth because it usually erupts very late in life, at an age when a person matures into adulthood and is wiser.



Problems necessitating Removal of a Wisdom Tooth

- When an impacted Wisdom Tooth pushes against a neighboring second molar
- Decay or infection due to poor oral hygiene
- Bacteria around an impacted tooth leading to Gum Disease
- When fluid-filled Cysts or Tumors form around a Wisdom Tooth causing damage to the jaw bone or nerves
- Pain / swelling around the gums or jaws in the region of a Wisdom Tooth which radiates to the forehead or ears
- When there is a possibility that such a tooth has the potential to create complications in your mouth



When is it not necessary to remove a Wisdom Tooth?

- It is healthy
- The tooth is fully erupted
- They are correctly positioned and have proper occlusion with the opposing teeth
- Can be cleaned properly



Conclusion

Your Dentist / Oral and Maxillofacial surgeon will usually advise a series of tests before extracting a Wisdom Tooth. He may prescribe Antibiotics prior to the procedure, if necessary. You may develop localized swelling after the removal of a Wisdom Tooth. This is quite normal and will usually subside on its own in a few days.

If you have a pressing problem with your Wisdom Tooth, visit your Dentist to get it resolved immediately or else it may lead to serious dental problems.

AN EYE SAVED BY EMERGENCY RADIOLOGY



activity)

Dr. Raghuraj Hegde Consultant Ophthalmic Plastic Surgeon and Ophthalmic Oncologist Department of Ophthalmology Kempegowda Institute of Medical Sciences Bengaluru, Karnataka, India

R ecently, I had the rare opportunity to save the eye of a child who had met with an accident. It was just another day at the clinic for me. The first patient I had examined was a 10-year old child who had met with an accident.

While riding a bicycle two weeks ago, this child hit a tractor and fell down. He was taken to the nearest hospital in an unconscious state. On examination, the Physician found that the boy had Bilateral Periorbital Ecchymosis and Eyelid Edema (Raccoon eyes). Since Computed Tomography (CT) did not reveal any facial fracture or intracranial injury, he was given conservative treatment and was sent home.

Though Edema and Ecchymosis subsided substantially after a few days, his left eye slowly started protruding from the eye socket with the development of Diplopia (double vision), along with a diminution of vision in his left eye. When the boy was taken again to the local Physician, he consoled his parents saying that everything would get alright in a few days.



But the parents of the patient were not ready to 'buy this reasoning' and hence, the child was brought to the hospital where I was working, to get his eye examined by an Ophthalmologist.

On examination, it was found that the child had Non-axial Proptosis with the left eye pushed downward and outward. This explained the reason for the Diplopia. He also had a diminution of vision and Relative Afferent Pupillary Defect (RAPD) in the left eye, indicating optic nerve compromise.

It left me confused as to why the Proptosis could not be picked up in the initial scan or examination. I looked at the two week old CT scan but could not see anything out of the ordinary. However, the child presented with Non-axial Proptosis and his left eye was pushed downward and outward.

There was no time to waste. I instructed my Residents to get the child admitted to the Teaching Hospital I worked in and asked them to get a repeat CT scan and his blood evaluation done prior to surgery. I also asked the Neurosurgeon to be present at the time of surgery.

The repeat CT scan showed that there was a well-defined mass (swelling) in the superomedial quadrant of the left Orbit, pushing the intraorbital contents outward and downward (**Fig.1**). The mass was putting pressure on the optic nerves. This explained why the patient had Proptosis, Diplopia, and reduced vision.

The diagnosis was simple once the CT images arrived. The dome-shaped mass limited by the periosteum of the Orbital wall might have been either a Subperiosteal Hematoma (SpH) or Abscess. The diagnosis was veering more towards the former as there were no systemic signs of an infection or an isolated primary Orbital Abscess.

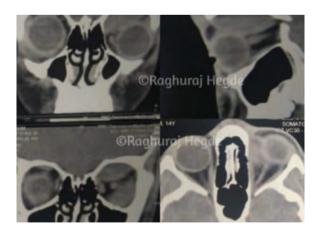


Fig.1. CT scan of the Orbits (Axial, Coronal and Sagittal reconstruction) showing a dome-shaped mass in the superomedial subperiosteal space.

I called upon the Radiologist to provide me with the Hounsfield Units (HU) value for the affected region. The Radiologist informed that the lesion had a HU value of +63 and provided me with the image for confirmation **(Fig. 2).**

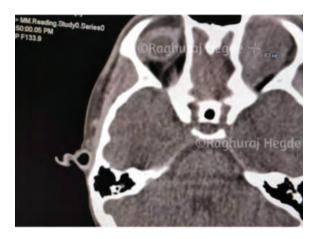


Fig.2. CT scan with the lesion showing the Hounsfield units (HU) value of +63.

In the meantime, my Residents had mobilized the child for surgery. Even before I went into the operation theatre, I was sure that it would be an SpH. Hence, I went in with a large bore syringe (**Fig. 3**) to access the clotted blood in the subperiosteal space. I could evacuate about 20 milliliters (ml) of blood from the left Orbit.



Fig.3. Large bore syringe with the clotted blood from the subperiosteal space of the Orbit.

After the surgery, there was no residual Proptosis and the child's vision started to improve gradually. His RAPD also reversed the following day. The surgical procedure was an absolute success! (**Fig. 4**)



Fig.4. Pre-Operative and Post-Operative Photos.

If you are a doctor, you might be wondering why the initial CT scan could not pick up the SpH. The answer is in the slice thickness (thickness of an imaging slice) of the CT scan ordered.

Most CT scan centers in India acquire CT scanners with 5 millimeters (mm) slice thickness to save time, radiographic films and the cost of scanning. If you order a CT scan with a 5mm slice thickness for a child, it is possible that the lesion may not show up on the scan.

The same experience has occurred several times in my professional life, forcing me to reorder scans for several of my pediatric patients; whenever clinical details did not correlate with radiological findings. In this case, my Residents knew the correct protocol for ordering a CT scan of the Orbit.

Any sufficiently advanced piece of technology is indistinguishable from magic

Lessons to be learned

- 1. When ordering a CT scan for the face, order for one with 1-2 mm slice thickness, so that you do not miss lesions and fractures.
- 2. Do not hesitate to **reorder scans** with the correct protocol if your clinical findings do not correlate with the imaging.
- **3.** Do not waste time trying to guess a diagnosis. Harness the different specialties in your reach to get the diagnosis as soon as possible while you simultaneously proceed with the action, using the resources at your disposal. I achieved this by harnessing the expertise of a Radiologist, the Teaching Hospital, its Residents, and the Neurosurgeon, even though the Neurosurgeon was not at all needed in this case.

While going home that evening, I reflected on how much technology had advanced in the modern era that surgeons like me could perform apparent everyday miracles like this. I could not help but remembering the third law of Arthur C. Clarke, English writer of science fiction:

"Any sufficiently advanced piece of technology is indistinguishable from magic."

DENTISTRY AND MEDICINE: WHY TWO SEPARATE PROFESSIONS?



Dr. Sreekanth Bose Postgraduate Resident Department of Public Health Dentistry Government Dental College and Research Institute Bengaluru, Karnataka, India M edicine and Dentistry are two separate professions in the modern global scenario. Specializing in one branch of Medicine like Dermatology or Cardiology is not illogical. But the matter of concern is that oral health care has been severed from medical education, physician networks, medical records, and payment systems so that a dentist is not just a special kind of doctor, but an entirely different professional.

Therefore, the question 'Why is dentistry considered a separate profession?' is very pertinent.

Dentistry is one of the oldest medical professions, dating back to 7000 Before Christ (B.C.). In ancient Greece, Hippocrates (Father of Modern Medicine) and Aristotle (Greek philosopher and scientist) wrote about Dentistry, specifically about treating decayed teeth. But the first book entirely devoted to Dentistry – The Little Medicinal Book for All Kinds of Diseases and Infirmities of the Teeth, was published in 1530 Anno Domini (A.D.).

The first people to perform Dentistry were barbersurgeons; one of the most common medical practitioners of the Middle Ages. At that time, dentist skills were considered as one of the many personal services that barber-surgeons provided like Leech and Cupping Therapies and tooth extractions.

By the 1700s, Dentistry became a more defined profession. In 1723, Pierre Fauchard, a French Surgeon and the Father of Modern Dentistry, published his influential book – The Surgeon Dentist or Treatise on the Teeth, which is defined as a comprehensive scientific description of dentistry.

In 1840, two self-trained American dental surgeons, Chapin Harris and Horace Hayden, approached the Physicians at the College of Medicine at the University of Maryland in Baltimore, United States of America (USA) with the proposal of adding dental subjects to the curriculum, since they had really believed that dentistry was more than a mechanical challenge, deserving the status as a profession and a course of study, in addition to having licensing and a peer-reviewed consideration.

But the Physicians rejected their suggestion and remarked that the subject of Dentistry was of little relevance. This event is still remembered as the 'historic rebuff', which paved the way for the inception of Baltimore Dental School.

Over the years, people raised different questions about Dentistry and called for reforms from time to time, besides insisting on considering it as an integral part of the healthcare system. But organized dentistry did not accept this proposal and fought for professional autonomy as well as independence.



Pierre Fauchard (Father of Modern Dentistry)

The aftermath of carving Dentistry out from Medicine

The exponential growth of Dentistry as a science and practice is the biggest advantage of this division. Dentistry branched out into many specialties with separate research and development, publications, as well as inventions.

Consequences of separating Dentistry from the healthcare system are many. Specialized dental care is seldom provided in most hospitals. There are many examples where an interdisciplinary approach was warranted, but has often been neglected by representatives of both Dentistry and Medicine, even when there are many advantages of them being two independent professions.

Medical doctors seldom ask their patients whether they brush their teeth regularly; likewise, Dentists rarely ask if their patients exercise regularly. Medical doctors are not trained to provide basic oral health care and Dentists seldom have the facility to manage emergency medical situations. In reality, oral health and general health are closely related.

Many general health conditions have their manifestations in the oral cavity. Similarly, oral conditions have an impact on overall health. Hence it is imperative to bridge the gap between Dentistry and Medicine.

Though Dentistry and Medicine do not fall under the same category, the former plays an important role in the maintenance of oral health which is closely linked to the overall health of an individual.

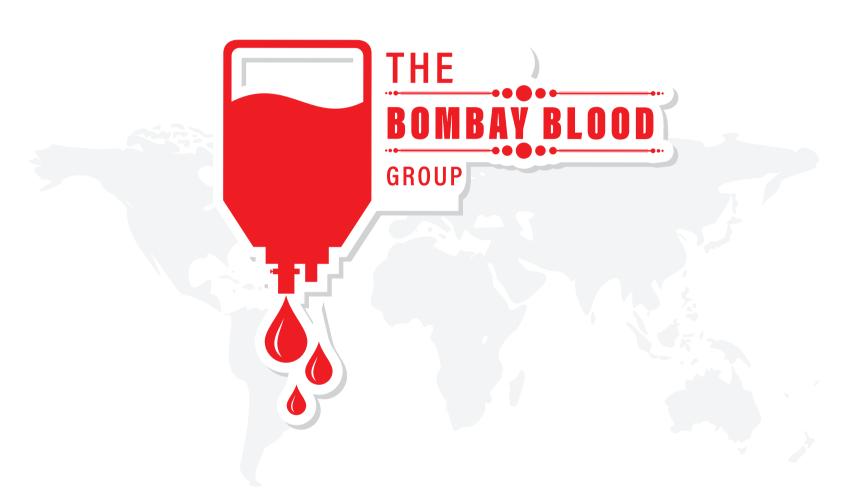


Remarkable presence of DentCare @ 23rd UAE International Dental Conference & Arab Dental Exhibition held from 05-07 February 2019











Dr. T. G. Bindu Senior Consultant Pathologist Caritas Hospital Kottayam, Kerala, India

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B lood is classified into different groups based on the presence and absence of Antigens and inherited antigenic substances on the surfaces of human red blood cells. An Antigen helps determine the blood type.

The red blood cells of an individual contain Antigens that correspond to their blood group. Antigens function to enable our immune system to distinguish the body's own cells from foreign invaders. When invaders are recognized, they are destroyed by Antibodies, which are also produced by the immune system. Antibodies in the blood are found in the plasma.

A person with type A blood contains 'A Antigen' on the surface of his red blood cells with Antibody B in the plasma whereas a person with type B blood contains 'B Antigens' with Antibody A in the plasma. Blood type AB contains both A and B Antigens, but there are no Antibodies.

D Antigen is present in the blood of almost 80% of the population. D Antigen, also known as 'Rh factor', helps determine whether a person has a positive or negative blood group.

H Antigen refers to one of the various types of Antigens having diverse biological functions. Depending on an individual's ABO blood type, H Antigen is converted into either Antigen A, B or both. If a person has type O blood, the H Antigen in his blood remains unmodified.

There are also a small group of people who do not have H Antigen but with 'hh Antibody' in their blood. This blood group is called the **Bombay Blood Group**.

The Bombay Blood Group does not contain A or B Antigens and hence, it is usually labeled as Blood Group, 'O'. Type O blood can be differentiated from the Bombay Blood Group after conducting a specific test for H Antigen.

Different Blood Groups with their Antigens and Antibodies

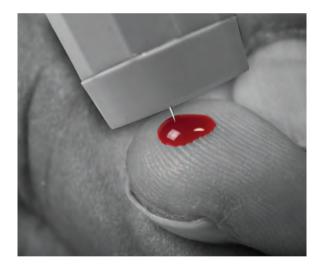
Blood Group A '+ve'	Antigen A, D, H	Antibody B
A '-ve'	A, H	В
B '+ve'	B, D, H	А
B '-ve'	В, Н	А
AB '+ve'	A, B, D, H	-
AB '-ve'	A, B, H	-
O '+ve'	D, H	А, В
O '-ve'	Н	А, В
Bombay Blood Group '+ve'	D	A, B, hh
Bombay Blood Group '-ve'	-	A, B, hh



1. Why is this Blood Group named as the Bombay Blood Group?

The Bombay Blood Group was first discovered in a patient in Bombay, now known as Mumbai, India by Dr. Y. M. Bhende in 1952. Hence, it is called the Bombay Blood Group.

The prevalence of the Bombay Blood Group across the world is 4 per million of the population, whereas, in Mumbai, it is 1 per 10000.



2. How can we confirm that one person is of the Bombay Blood Group?

If someone has type A blood, it means that his / her blood contains Antigen 'A' and Antibody 'B'. People with type AB blood have both Antigens A and B in their blood and no Antibodies. People with Blood group O have only A and B Antibodies and no Antigens.

However, what is generally not known is that all these groups have H Antigens in the blood as well. H Antigen is present on 99.9% of human red blood cells; i.e., a few people do not have H Antigen in their blood. Instead of that, they have 'hh Antibody' in their blood. These people are labeled as having the Bombay Blood Group.



3. What are the Precautionary Measures to be taken if you are having the Bombay Blood Group?

All the family members should be tested to identify whether they have this blood group. If you are in need of a blood transfusion, always contact a blood bank with a higher turnover. They will help you get a blood donor.

Always keep a record showing that you are a person having the Bombay Blood Group, along with the phone numbers of the major blood banks in the locality, as it can be beneficial in case of an emergency.

For a planned surgery, take an informed decision about the possibility of autologous transfusion.

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The prevalence of the Bombay Blood Group across the world is 4 per million of the population, whereas, in Mumbai, it is 1 per 10000

Conclusion

Since the Bombay Blood Group is very rare, there can be a rare situation requiring a blood transfusion at odd hours. Hence, the general public should be made aware of this fact and may be encouraged to donate blood voluntarily.

Identification of the blood group is important for both the donor and the patient. Just like in the case of an organ transplantation, an improper blood transfusion can lead to serious complications, including mortality.



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D entCare has played a key role in my clinical success. I have been giving my lab works to this prestigious institution for the last thirty years and so far, they have provided me with prostheses of excellent quality. DentCare introduces the latest technologies in dentistry related to a lab, as soon as they come in vogue. I am really proud of this institution.

My family consisting of five dentists has been getting the best of the services from DentCare.

Keep it up! I wish DentCare Dental Lab the very best and immense success in all their ventures. oc

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Dr. C. P. John Dental Practitioner Thiruvananthapuram, Kerala, India



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Journey to Excellence

J isiting DentCare Dental Lab was a pleasant experience, allowing me to behold it's stupendous and colossal infrastructure and other facilities.

The lab always maintains a pleasant ambiance and the working environment is of the highest standards, reflecting an uncommon sense of serenity and tranquillity.

More than that, the lab upholds an excellent work culture and ethics.

Kudos to DentCare!



Dr. Mukesh Panwar Chief Executive Officer Smile Express Jaipur, Rajasthan, India

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AN OVERVIEW OF DENTCARE PRODUCTS

entCare Dental Lab has embedded itself with an objective to bring together the world's preeminent branded materials of proven quality and high-end technologies. Most recognized brands like Ivoclar Vivadent, Shofu, EOS, and 3Shape sourced from Germany, Switzerland, Europe, and the United States of America are used for manufacturing its extensive range of dental prostheses.

Over the past 30 years, we have dedicated ourselves to contributing to healthy, confident smiles for over 40 million satisfied patients and to the delight of more than 40 thousand dentists around the globe.

The range of services DentCare has to offer is unique and comprehensive; its product portfolio comprises of individual Dental Crowns and Bridges, Implant restorations, and Partial / Full denture prostheses. The company strongly believes that technology hand in hand with art when fused with the latest know-how results in dental restorations of greater precision, aesthetics, and functionality.



DentCare Clear Aligners

Dental Braces are now entering a brave new world of comfort and ease with DentCare Clear Aligners – a series of transparent aligners to realign teeth. Each DentCare Clear Aligner is unique as it is customized for the patient's teeth. They can be easily changed every two weeks, sparing users the tedious task of heavy maintenance.

There is absolutely no need to spend long hours at the clinic negotiating conventional brackets and wire adjustments. Patients and dental clinicians stand to gain numerous valuable hours. Consequently, the dental clinician also gets to spend quality, value-added time with each patient.

With DentCare Clear Aligners, the final outcome of the treatment can be visualized with the help of 3D virtual simulation and a treatment plan can be formulated accordingly. The treatment consists of a revolutionary system which integrates the latest software and 3D Computer Aided Design / Computer Aided Manufacturing (CAD/CAM) technology.

To proceed with the CAD/CAM procedure for processing an order of a custom-made DentCare Clear Aligner, both upper and lower models of the patient's dental arches, along with bite registration are required.



DentCare Zirconia – "One Product for Diverse Options"

The paradigm shift in dentistry for lifelike restorations that mimic natural tooth structure based on perceived and actual aesthetic and functional patient demands has led DentCare Dental Lab to offer DentCare Zirconia– a revolution in Metal-Free Prostheses. DentCare Zirconia is biomedical grade Zirconia made in Germany. Available in diverse options, DentCare Zirconia range of products assure natural feel and functionality, unmatched aesthetics and unlimited characterization and are made available in more than 40 natural and lifelike shades.

It is manufactured using an innovative Computer Aided Design / Computer Aided Manufacturing (CAD / CAM) technology offering perfect fit and marginal adaptation to the final product. This unique material provides full scope for cement-retained crowns and bridges on natural teeth (up to 16 units as a single restoration) as well as cement and screw-retained solutions for implants (single and multiple-unit).

DentCare Zirconia Variants

- DentCare Zirconia Platinum Plus
- DentCare Zirconia Platinum
- DentCare Zirconia Premium Plus
- DentCare Zirconia Premium Plus Full Contour
- DentCare Zirconia Premium
- DentCare Zirconia Premium Full Contour
- DentCare BruxCare
- DentCare Zirconia Classic
- DentCare Zirconia Classic Full Contour
- DentCare Zirconia Superlucent
- DentCare Zirconia Basic
- DentCare Zirconia Basic Full Contour
- DentCare Zirconia Ultra
- DentCare Zirconia Solid

Why Medical Grade DentCare Zirconia?

- 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 helps ensure that the natural tooth shade comes right from the internal framework level, unlike Porcelain Fused to Metal (PFM) or other normal Zirconia systems with opaque frames
- Designing and manufacturing using CAD / CAM helps ensure outstanding marginal fit



Baltic Denture (CAD/CAM)

In tune with our unique heritage, DentCare, for the first time in India, has introduced the future-oriented Baltic Dentures using German technology and materials, which help ensure good accuracy of fit and high patient satisfaction **'in just two appointments'**.

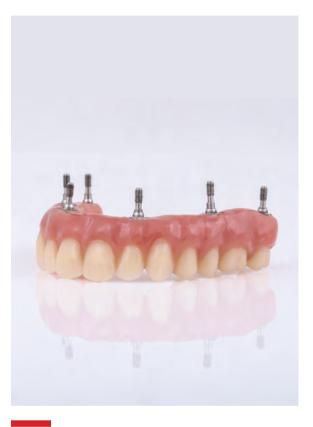


The Baltic Denture System process opens up a new way of manufacturing full dentures in a digital workflow. Combining the work steps in the dental practice and processes in the lab into a single workflow stands for quality and economy.

Benefits

- Less manual work
- Predictable results
- High-quality materials and reproducibility
- Reduced allergenic potential

All these are the epitome of this innovative concept.



Dental Implant Prostheses

Dental Implants are popular and effective to replace missing teeth and are designed to blend in with other existing teeth. They are an excellent long-term option for restoring smiles with uncompromised functionality.

Different variants of Implant Prostheses are offered by DentCare and may be made available as screw retained or cement-retained crowns / bridges.

» Screw-Retained Hybrid Dentures

'Hybrid denture' is referred to as hybrid because it combines the advantages of a fixed replacement with those of a removable denture. With this, patients regain self-esteem, confidence and can enjoy a wider variety of foods.

» Implant-Supported Overdentures

They are available as Bar Attachment / Ball Attachment Overdentures.



Removable Prostheses

DentCare has incomparable Removable dental prosthetic solutions with impeccable precision to recapture your oral function, aesthetics and liveliness. We have a number of removable dentures that are durable and akin to your natural teeth.

The range of removable prostheses available include

» DentCare Flex

DentCare Flex is an aesthetically superior semi-flexible removable denture which blends perfectly with the natural gum tissue; providing better looks, function and comfort. It can be used in both complete and partial denture cases.

» Cast Partial Denture (CPD)

Cast Partial Denture (CPD) is used in cases with multiple missing teeth. It can be removed and placed back by patients themselves. It is ideal for patients for whom fixed prostheses or dental implants are not indicated. CPDs can be fabricated using Titanium and Cobalt – Chromium Alloy.

» Bio-Functional Prosthetic System (BPS Dentures)

DentCare offers BPS Dentures from Ivoclar Vivadent that is a long-lasting and high-quality option for dentures meant to reproduce the functions of natural teeth. The biofunctional set-up philosophy along with the Model Associated Positioning (MAP) of the artificial teeth in combination with the pressure injection molding procedure is the cornerstone of this system. BPS can be used in partial or completely edentulous cases. Smile confidently, go for DentCare Prostheses

» Acrylic Removable Complete and Partial Dentures

DentCare fabricates extremely natural looking Complete and Partial Dentures using acrylic and denture – teeth of the highest quality, imported from Germany and Italy.

The main advantage of these dentures is that they are cost-effective, yet uncompromising in terms of quality. Additional teeth and denture base can easily be added to an existing Acrylic Denture.

It is also the product of choice for Immediate Dentures and for Temporary Dentures in Implant patients.

» Valplast

The strong, flexible nature of Valplast is perfectly suited to a variety of natural conditions in the mouth, simplifying design and enabling the flexible nylon resin to act as a built-in stress breaker, in order to provide superior function and stress distribution in Removable Partial Denture cases.

It is good for replacing missing teeth in small edentulous cases and should not be opted for in situations where teeth need to be replaced extensively.

» Bio Dentaplast

It is a high strength, injection molded, and biocompatible denture material which is ideal for making toothcolored clasps and attachments.

Conclusion

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

World-class products are the outcome of our incessant passion for improving the standards of dental care. And this helps us keep at the forefront of innovation. Our dental prostheses experts are incessantly passionate about exploring new ways to address challenges in enhancing smiles. All the materials we use in production have proven scientific quality and excellence.

SUMMER REFRESHERS

Honeydew Ginger Mint Squash

Ingredients

- Lime Zest, Grated Lime Juice Honeydew Melon Ginger, Fresh, Grated Mint, Fresh Basil Sprig, Fresh Soda Sugar, Granulated Water Salt
- 2 teaspoons 100 milliliters 1 number 2 tablespoons 4 numbers 2 numbers 1 bottle 2 – 3 tablespoons 1⁄4 cup 1⁄4 teaspoon

Method

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Remove skin and seeds from Honeydew Melon and cut it into small pieces. Keep it aside.

Place a pan on a stove and add Granulated Sugar, water, and Salt. Mix it and bring to a boil to make a simple Sugar Syrup. Remove from heat and add Lime Zest, Grated Ginger, Lime Juice, and Sprigs of Mint and Basil. Stir well and allow it to cool completely. Strain it into a small bowl.

In a blender, puree Honeydew Melon until it becomes smooth. Strain it into a flat pan. Transfer both the mixes to a tumbler and stir well. Cover and refrigerate until it gets set.

Scrape the refrigerated mix to create flakes. Transfer it to a glass and top it with Soda. Serve with additional fruits, if you want.



Rose Grape Mocktail

Ingredients

Rose Petals Sugar, Granulated Water Pink Grapefruit Juice, Fresh Rose Syrup Sparkling Water or Soda 3 – 5 numbers 100 grams 100 milliliters 200 milliliters 20 milliliters 1 bottle

Method

Place a small saucepan on a stove and add water and Granulated Sugar. Heat it on a medium flame. Add Rose Petals and Rose Syrup to it. Remove from heat and allow it to cool for an hour. Add Pink Grapefruit Juice and stir well. Pour the mix into a Mocktail glass. Top it with Sparkling Water or Soda.

Garnish with Rose Petals. Serve chilled.







Raw Mango and Black Pepper Mocktail

Ingredients

Mango, Raw Water Sugar, Granulated Black Pepper, Powdered Sparkling Water or Soda 3 – 5 numbers 100 milliliters 100 grams ½ tablespoon 1 bottle

Method

Place a saucepan on a stove and add water and Granulated Sugar. Heat it on a medium flame. Add peeled and sliced Raw Mango and Black Pepper Powder. Simmer it till it becomes mushy. Allow it to set for an hour. Put the mix in a blender and blend well till it becomes a smooth paste.

Keep the mix in a refrigerator for 3 - 4 days. Scrape the refrigerated mix to create flakes and put it into a Mocktail glass. Top the glass with Sparkling Water or Soda.

Garnish with Mint and serve chilled. 呕



RECOGNITION BEYOND BORDERS

have been connected with DentCare ever since they started operations in Abu Dhabi, United Arab Emirates (UAE). I am really content with the quality of their prostheses and timely service.

A completely professional attitude and due consideration for the doctors' lab instructions are some of the attributes that make DentCare unique. Their technical expertise, commitment, and professionalism are all a benchmark for others to follow.

I would like to thank DentCare for fabricating and providing me with exquisite and world-class prostheses. I wish them all the best in their endeavors.



Dr. Sunita Dhaka Consultant Periodontist and Implantologist Abu Dhabi, United Arab Emirates



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