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Vol: 05. Issue: 07. April 2019

THE DENTCARE

Your Monthly Health Care Magazine

Brightening smile the world over



**Fiery
Summer:
Stay Protected**

**Interdental
Caries**

**How does
Food Impact
Health?**

Up-Close with an Atypical Physician

Padmashri Prof. (Dr.) T. V. Devarajan



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Dear Reader,

Blazing April is here, in more ways than one could fathom.

The soaring temperatures have been unprecedented in many parts of the world, prompting enough cause for serious soul searching. "Day Zero" is no longer a figment of your imagination but rather a looming reality.

The impending General Elections in India too have added new dimension to the term "searing", starting April 11. It is your bounden duty to *'exercise your right'* for what would be "**right for the Nation**". Do not shy away from it!!

The fervor of the World Health Day offers very little respite either from its resolve towards **#Universal health coverage: everyone, everywhere.**

The Dentcare could be your overwhelming reason for succor from the sun. Grab a copy and stay protected from the heat as you delve into the warmth of our script in the cooler confines of your comfort zone.

Vacations with your loved ones would be the ideal sunscreen. I highly recommend this invaluable option as a remedy for this fiery season.

India holds its breath – for history to unwrap itself in the coming days. 'May' the outcome be worthy for its future.

Churn out a blissful summer of renewed moments and joyful memories with family and friends in the meantime.

Yours truly,

Prof. (Dr.) George P. John

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CAUTION: When viewing the techniques / procedures, theories and materials that are presented, you must make your own decisions about specific treatment for patients and exercise personal professional judgment regarding the need for further clinical testing or education and your own clinical expertise before trying to implement new procedures.

Printed and published by Mr. John Kuriakose on behalf of DentCare Dental Lab Pvt. Ltd. and printed at Fivestar offset Printers, Nettoor, Cochin - 40 and published at DentCare Dental Lab Pvt. Ltd., Nas Road, 130 Junction, Muvattupuzha, Ernakulam, Kerala, India – 686661. Edited by Prof. (Dr.) George P. John.

JUSTICE (Retd.) P. SATHASIVAM
GOVERNOR OF KERALA



RAJ BHAVAN
KERALA

21 March 2019



MESSAGE

I am glad to know that DentCare Dental Lab, Muvattupuzha, Ernakulam has been publishing a Health Magazine, **The DentCare** for more than five years.

At a time when Kerala's Health Policy is emphasizing the need to improve the oral and dental care facilities in the State, publications like **The DentCare** can contribute significantly to the creation of awareness among the people, especially children, on the importance of dental and oral hygiene and facilities available for better dental care. Along with such initiatives, a campaign against the use of tobacco products would also be socially useful.

I greet everyone behind this venture and wish the publication all success.

[Justice (Retd.) P. Sathasivam]

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Failure is not the Last Word in Life



Almost everyone has experienced the fear of failure at some point or another in life. If we allow this fear to deter us from doing the things which can move us ahead in achieving our goals, we will never attain progress in life. Failure is not something to be ashamed of but rather something to be treasured because it teaches us valuable lessons for both the present and the future. The wonderful thing about failure is that it is entirely up to us to decide how to look at it.

Let us take a look at **Jack Ma**, a living example of how you can learn from failure. Today, he has made a significant impact on the entire economy and E-commerce industry in China almost single-handedly.

Rejections and failures were synonymous with Jack Ma. During childhood, he failed twice in his Primary School examinations, thrice in the Middle School examinations, and then ten times in the entrance examinations to Harvard University, United Kingdom. Jack Ma had to encounter setbacks one after another early in life.

After graduating in English Literature and Arts, he tried and failed to get a job in a multitude of places. He could not find one even after nearly thirty attempts. Out of the twenty-four people who sought a job at Kentucky Fried Chicken (KFC) Restaurant in his hometown, everyone was selected except Jack Ma. He was one of the five applicants to a job in the Police Force and was the only one rejected since he was identified as incompetent.

Also, on his entrepreneurial undertakings, Jack Ma failed twice in his initial ventures. But that did not stop him from dreaming bigger. To learn English, he went to faraway places riding his bicycle and served as a guide to foreign tourists without getting paid. He did not get carried away by rejections and failures and treated them as opportunities to learn life lessons.

In 1999, he launched his new E-commerce start up – **Alibaba** in his apartment. It has flourished beyond his wildest dreams and spread across the world. He has become the richest man in China with an estimated net worth of \$38.5 Billion.

Mr. John Kuriakose

Managing Director
DentCare Dental Lab Pvt. Ltd.

Alibaba has succeeded in capturing 80% of the E-commerce market in China.

Actually, failures are not the obstacle to success; it is the lack of determination to carry on striving for success. In fact, the majority of successful people in the world have endured the most failures in life. They might have failed repeatedly. But they chose to get up. They learnt from failures and kept going until success came their way.

Let me take you to the life story of another successful man.

Ferruccio Lamborghini was the owner of an Automobile Company manufacturing tractors in Italy. Being fond of luxury sports cars, he purchased a Ferrari sports car. But very soon he was frustrated with the inferior quality and frequent mechanical problems of the car.

When he met Enzo Ferrari, the owner of the company, he was told, "**The problem is not with the car but with the driver!**" and was advised to look after his tractor business, instead.

Being a mechanical genius, Lamborghini took it as an insult as well as an open challenge. He started a car manufacturing company and hired the ex-employees of the Ferrari Company. After many years of perseverance and toil, he succeeded in manufacturing Lamborghini, one of the best and most extravagant cars in the world.

It was his perseverance and hard work to attain success which made him climb the pinnacle of success. God's grace will always be there with the people who strive hard for victory. No one can achieve success unless they are committed to their goal and untiringly strive for it.

It is definite that even if we encounter setbacks in life many a time, we can taste the wine of success only if we are determined to work hard until our goals are accomplished. May the Almighty God help you live your dreams and achieve astounding success in life!! @

Interdental Caries

A tooth usually lies in contact with the adjacent teeth or dental prostheses. The contact of a tooth with the adjacent teeth or prostheses can be either at a single point or across a small area, depending on the position and morphology of the tooth. This point or area of contact forms very tight joints against adjacent teeth / prostheses.

Depending on the occlusal load, this contact may be under constant stress and friction. Below this interdental point or the area of contact lies a space, which is known as Interdental Embrasure. This space passively accommodates the interdental papillae of the gingiva.

An Interdental Embrasure tends to be a niche where food usually gets lodged. 'Food lodgment' refers to the passive accumulation of food particles in niches or embrasures. 'Food impaction' occurs when food is forcefully wedged into the interdental areas by the opposing tooth during mastication (chewing). When food is lodged or impacted within the interdental spaces, it becomes very difficult to clean these areas, as a toothbrush is too big to reach these spaces.





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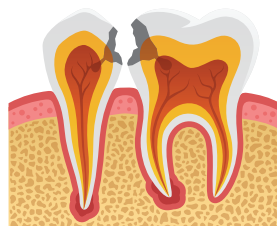
Over a period of time, bacteria begin breaking down the accumulated food for their nutrition by secreting strong acids, which break down both the accumulated food and calcified enamel of the teeth. This is the initial phase in the formation of Dental Caries, which progressively spreads deeper into the teeth, leading to complications like acute infections and abscesses. Sometimes, Dental Caries can eventually lead to the loss of a tooth.

Diagnosing Interdental Caries is a challenging task for a Clinician as Dental Caries on the proximal surfaces may not be visible during a routine clinical examination. When Dental Caries on the proximal surfaces is located at the marginal ridges on the occlusal surfaces, clinical diagnosis becomes easier as it can be visually detected and confirmed with a Dental Explorer (a dental instrument used to detect unsound enamel, Carious lesions etc.).

Underlying Proximal Caries below the contact points can also be detected from the change in the color and translucency of the tooth. In the anterior teeth, Interdental Caries can be more easily detected as they fall in an easily noticeable area. Radiographs are a very effective means of detecting Proximal Caries. These interdental areas need to be treated aggressively to clear the infection and to avoid its relapse.

But most often, Interdental Caries of the teeth goes unnoticed because it may be asymptomatic during the initial phases of the infection and is not clinically visible for easy diagnosis. At times, Interdental Caries can destroy a tooth to such an extent that it becomes too difficult to restore it. When a tooth is grossly decayed and is not restorable, it may have to be extracted and replaced with the most feasible alternative.

When it comes to managing Interdental Caries, prevention is the best option. Preventing the accumulation or lodgment of debris and food particles in an interdental space reduces the risk of



Diagnosing Interdental Caries is a challenging task for a Clinician as Dental Caries in the proximal surfaces may not be visible during a routine clinical examination



Interdental Caries to a greater extent. This can be accomplished by maintaining good oral hygiene.

A regular toothbrush cannot efficiently reach the interdental regions. Interdental aids like dental floss and interdental brushes are great additions to regular oral hygiene tools. Interdental water jets are also useful in flushing out lodged food and debris from the interdental spaces. It is very important not to leave food particles in these niches for long, as harmful bacteria can colonize in these places.

The maintenance of optimal oral hygiene demands brushing every surface of the tooth which includes the interdental areas at least twice a day. Use of mouthwashes, along with regular oral hygiene practices can help reduce the bacterial load in the mouth to a greater extent. However, mouthwashes can only be used as an adjunct to regular oral hygiene practices.

Once Dental Caries has occurred, it is advisable to get it restored at the earliest. Depending on the extent of the decay, the approach to treatment may vary. An initial lesion may require a simple restoration while a more advanced one may even require a root canal and crown to restore it to function and aesthetics.

The risk of and susceptibility to developing Interdental Caries varies from person to person and hence, it cannot be standardized across gender, age and population. Genetics, the position of the teeth, and diet, along with habits like smoking and chewing tobacco can influence the incidence of Dental Caries.

To understand the risk of Dental Caries properly, it is always better to reach out to your dentist. A detailed examination of the history, lifestyle, and the oral cavity can help establish the risk for and susceptibility to Dental Caries. Based on this assessment, a customized prophylactic / treatment plan can be drawn. Regular dental visits and check-ups can prove an effective means to prevent many dental conditions. ©

FIERY SUMMER: Stay Protected

The human body has a remarkable mechanism to regulate its temperature through a process called Thermoregulation, helping maintain body temperature within certain boundaries even when the surrounding temperature is different.

The body cools itself by sweating in a hot environment. Heat-related illnesses will affect people when the temperature-regulating systems of their body are unable to effectively regulate the temperature.

Continued exposure to extreme heat can result in a number of complications, including damage to the brain and other vital organs. In hottest places, where humidity is high, sweating may not be sufficient to adequately lower the temperature of the body, paving the way for heat-related illnesses, including life-threatening emergencies.

Certain medications like Diuretics (a medication to increase the production of urine), which helps treat Hypertension, can accentuate the risk of developing dehydration and heat-related illnesses, especially in the elderly.

Elderly people also have a decreased capacity to dissipate heat and hence, they are at an increased risk of developing dehydration. Besides, recovery from dehydration is generally prolonged in older individuals.

Infants and young children are very sensitive to the effects of high temperature and can quickly get stressed by heat, as they mainly rely on others to take care of them. Moreover, they have a higher metabolic rate and inefficient sweating when compared to adults.



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Obesity is often associated with poor heat tolerance. Obese people may be more prone to heat-related illnesses as their body has the tendency to retain more heat.

Construction workers are vulnerable to heat stress as they are exposed to extremely high temperature with long working hours and little access to shade or drinking water. People who do not work under direct sunlight may also be affected by heat-related illnesses.

Brain and liver cells are sensitive to Hyperthermia (a group of heat-related conditions) with irreversible neuronal damage when the core body temperature is above 40° Celsius (C).

How do Heat-related illnesses manifest?

Heat-related illnesses may vary from Rashes or Blisters on the exposed areas of the skin and Muscle Cramps to more serious conditions like Heat Exhaustion and Heat Stroke.

Heat Stroke is a serious, life-threatening condition that occurs when the body loses its ability to cool itself. Body temperature may rise above 40°C (104°F) and can be very fatal unless immediate medical attention is provided. Heat Stroke may affect the Central Nervous System, leading to an Altered Sense of Consciousness (ASC), Seizures, Hypotension, and Kidney Failure, leading to Multiple Organ Failure (MOF) and mortality.

Heat Exhaustion, which is caused by the depletion of water or salt in the body, is a condition in which the core temperature is between 37°C and 40°C.



Heat Cramps and Syncope (fainting) are minor heat-related illnesses, characterized by dizziness, heavy sweating, and muscle pain / stiffness.

How to treat Heat-related illnesses?

First Aid

The first and foremost thing to do is to keep the victim away from the hot environment by moving them to a cool and shaded place. Dehydration must then be addressed by giving fluids like salted rice water / plain water. Excess insulating clothing, if any, should be removed.

Cooling may be facilitated by continuous dousing / drenching with ice-cold water or applying ice packs. Ensure that there is adequate air circulation, for eg. a fan that blows directly onto the patient, while also sponging or spraying cold water which helps increase the rate of evaporation, enabling to reduce his body temperature more rapidly. Wrapping the patient in cold, wet sheets or towels will also help to bring down the body temperature to a normal range.

If the victim is confused; showing bizarre behavior or having an altered sense of consciousness with a lack of sweating, immediate medical care should be provided.

How to prevent Heat-related illnesses?

- ❑ Drink plenty of water / fluids at frequent intervals; ideally every 15 – 20 minutes while working under direct sunlight
- ❑ Take frequent breaks while working in the scorching sun and rest in a cool or well-ventilated area to get relief from the sun and heat
- ❑ Wear light-colored, loose-fitting sun protective clothing
- ❑ Use an umbrella whenever you go out in the scorching sun
- ❑ Frequent use of sunscreen is a must to protect your skin from harmful exposure of sunlight

Conclusion

Heat-related illnesses are life-threatening conditions that occur when your body is exposed to hot temperature for a prolonged period of time. Unless immediate medical attention is provided, it can cause damage to the brain and other vital organs. Therefore, it is imperative to take precautionary measures when you go out during hot weather, to avoid heat stroke and related illnesses. ©

How Does Food Impact Health?



Ms. Subhasree Prasanth
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We cannot live very long without food. It helps our body insulate itself and improve our health. Eating a variety of food promotes good health and will give the body a mix of nutrients it needs. Food is a source of energy essential for life-sustaining activities, such as walking, talking, breathing, digestion, the functioning of the heart, thought processes, etc. The key to maintaining good health is to have a balanced diet.

A Balanced Diet; the Key to a Healthy Life

A balanced diet helps provide all the nutrients in a required amount and in the right proportion. A balanced diet should contain Carbohydrates, Fibre, Proteins, Fats, Vitamins, and Minerals. Carbohydrates, Fats, and Proteins, which are macronutrients, are needed in large amounts. Vitamins and Minerals, which constitute the micronutrients, are required in small amounts.

Food is conventionally grouped as

1. Cereals, Millets, and Pulses
2. Vegetables and Fruits
3. Milk and Milk products, Egg, Meat, and Fish
4. Oils and Fats
5. Nuts and Oilseeds

Without healthy food and good nutrition, our body is more susceptible to illness. An adequate diet, providing all nutrients, is needed throughout our lives. Requirements of essential nutrients vary with age, gender, physiological status, and physical activity. The nutrients must be obtained through a judicious choice and combination of a variety of foodstuffs from different food groups because our organs and tissues need the right amount of nutrition for their proper function.



An adequate diet, providing all nutrients, is needed throughout our lives



Points to Remember

- ✓ Prefer homemade food to fast food
- ✓ Eat a lot of raw fruits and vegetables
- ✓ Limit the consumption of sugar and processed food
- ✓ Limit your salt intake to less than five grams per day as it helps prevent Hypertension and reduces the risk of developing Heart Diseases. Prefer the use of iodized salt
- ✓ Avoid Trans Fats that are found in processed food, snacks, fried food, frozen pizza, and cookies
- ✓ Always take a small portion of high-calorie food and a large portion of healthy food like vegetables, salads, and soups

Benefits of eating healthy food

- ⊕ Helps provide energy and alertness as it contains nutrients
- ⊕ Protects from various diseases, including chronic diseases like Diabetes, High Blood Pressure, High Cholesterol, etc.
- ⊕ Promotes weight loss
- ⊕ Strengthens the immune system and digestion

Due to a hectic lifestyle and a busy schedule, most of us rely on packaged or canned / fast food. These are unhealthy options as they are high in Fat and Sodium. Sodium and Fats are the known causes of various lifestyles diseases like High Cholesterol, Heart Failure, Hypertension, and Stroke.



Never skip your breakfast as it is the most important meal which helps us keep healthy throughout the day



Takeaway

- * Never skip your breakfast as it is the most important meal which helps us keep healthy throughout the day. Include cereals, pulses, or low-calorie high-protein food for a healthy breakfast
- * Include food from the five food groups
 - Vegetables and Legumes
 - Fruits
 - Grains (cereals), mostly Wholegrains high in fibre
 - Lean meat, Poultry, Fish, Eggs, Tofu, Nuts, Seeds, and Beans
 - Milk, Yogurt, and Cheese
- * Have your lunch on time
- * Have your dinner before 7 o'clock
- * Avoid junk food and soft drinks as they cause you to feel bloated
- * Hydrate your body

Conclusion

Healthy food helps make your body active and strong. A healthy eating habit is vital in achieving good health. Make sure that you take the right food in adequate amounts. ©



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Professional Ethics and Etiquette in Dentistry



A Dental Practitioner must consider every patient equally without any discrimination, irrespective of their gender, race, religion, caste, creed, color, or nationality



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Ethics in Dentistry is defined as the moral duties and obligations of a Dentist to his patients, professional colleagues, and to the society at large. A Dentist is bound to conduct his or her professional life in accordance with ethical principles rooted in moral rules.

Principles of Ethics in Dentistry

1

Beneficence

Beneficence refers to an ethical principle of promoting or doing good things for the benefit of others. A Dental Practitioner should provide dental care in a fair manner, for the best interest of the patient. The welfare of patients should be considered as paramount from all other considerations.

2

Nonmaleficence

It involves the moral and ethical duty of a Dental Practitioner to discharge his professional duties without harming the patient. As dental care may involve some degree of harm, all professionals should ensure that the care provided is as minimally harmful as possible. All Dental Practitioners should update their professional knowledge and skills to the best level, enabling them to provide a higher standard of care.

3

Autonomy

In a dental practice, autonomy can be termed as the right of a competent adult patient to make informed decisions about his own medical care. Informed consent from a

4

Justice (Fairness)

A Dental Practitioner must consider every patient equally without any discrimination, irrespective of their gender, race, religion, caste, creed, color, or nationality. He should deliver oral healthcare without prejudice.

5

Truthfulness

The patient-doctor relationship is very pure and is always based on mutual trust. It is the moral duty of a Dental Practitioner to be always true to his patient.

Duties of a Dental Practitioner to his Patients

1. Obligations

A Dental Practitioner should ensure that he sees his patient at the scheduled time. Punctuality must be maintained in the dental profession. A Dental Practitioner can refuse treatment using his discretion but it should not be on the basis of any discrimination of color, caste, religion, nationality, or the presence of ailments, such as Human Immunodeficiency Virus (HIV) or other contagious diseases. Keeping with the principles of medical ethics, it is the duty of a Dental Practitioner to continue to provide dental care once he has accepted a patient for treatment.



2. Confidentiality

A Dental Practitioner must consistently maintain the Medical / Dental records of his patients and proper confidentiality must be observed while keeping the personal information of his patients.

3. Prognosis

A Dental Practitioner should neither exaggerate nor downplay the gravity of a medical condition. Informed consent must be obtained before starting treatment, clearly explaining the procedure to be performed, including its prognosis.

4. A Patient must not be neglected

A Dental Practitioner shall not wilfully commit an act of negligence that may deprive his patient of the best dental or medical care.

5. Be Courteous

A Dental Practitioner must be courteous, sympathetic,

A Dentist is bound to conduct his or her professional life in accordance with ethical principles rooted in moral rules


and friendly, besides being always alert to the call of his patients. He must perform his duties diligently and consistently, keeping himself updated with the latest knowledge in the field of dentistry.

Unethical Practices in Dentistry

1. Advertising directly or indirectly for obtaining more patients
2. Nonreferral in case the procedure to be performed is beyond his professional competence
3. Performing unnecessary procedures for monetary gain
4. Involving in immoral activities
5. Involving in self-exaggeration for undue gain or attracting more patients
6. Issuing any Certificate which is untrue, misleading or improper
7. Use of bogus qualifications

Conclusion

The overriding obligation of every Dental Practitioner should be to provide quality care in a competent and timely manner. The dental profession is a vocation requiring professional knowledge and skills to provide quality service. All Dental Practitioners should always adhere to a stringent code of ethics in dental practice. ©

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Obstructive Sleep Apnea

Obstructive Sleep Apnea (OSA) is a potentially life-threatening sleep disorder, causing breathing to repeatedly stop and start during sleep. OSA is caused by partial or complete obstruction of the upper airway during sleep, as a result of narrowing of the respiratory passages.

Common Symptoms of OSA

They include

- ⊙ Loud / frequent snoring
- ⊙ Episodes of breathing cessation during sleep
- ⊙ Gasping or choking
- ⊙ Fatigue
- ⊙ Reduced alertness
- ⊙ Insomnia (sleeplessness)
- ⊙ Nocturia (excessive urination at night)



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Risk Factors for OSA

The factors that put you at an increased risk for OSA are

- Hypertension
- Stroke
- Ischemia (deficient blood supply to the tissues)
- Heart Disease
- Diabetes Mellitus
- Metabolic Syndrome
- Excess weight (when your Body Mass Index (BMI) is greater than 28 kilograms per meter square (kg/m²))
- Larger neck size (when you have a neck size of more than 43 centimeters [cm])
- Craniofacial abnormalities
- Hypertrophied Tonsils (the most common cause of Obstructive Sleep Apnea in children)

Epidemiology

The prevalence of OSA is estimated to be 4% in men and 2% in women. However, with the increase in the prevalence of obesity and other risk factors, OSA is becoming an increasingly common and pervasive condition.

Diagnosis of OSA

Polysomnography, also known as a sleep study, is the gold standard for diagnosing OSA. Sleep Endoscopy, also known as Sleep Nasendoscopy, is the most widely used technique to study the dynamic airway in a sleeping patient with OSA.

Primary Management

Primary management of OSA includes weight reduction and abstinence from alcohol.

Treatment

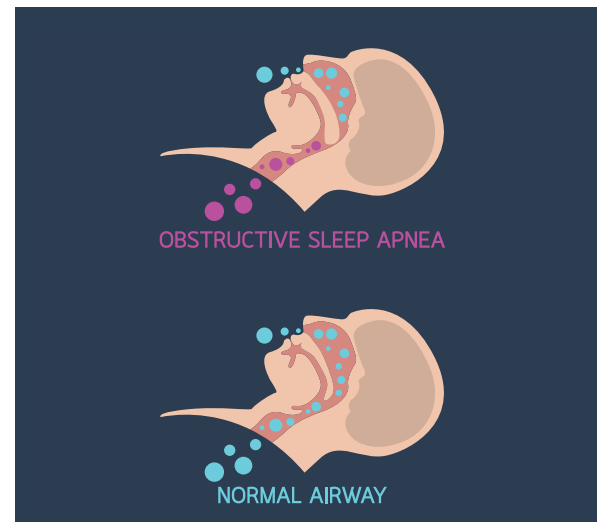
Surgical Treatment

It is advised for people with severe and antisocial snoring. This involves a procedure on the base of the tongue, soft palate, and lateral pharyngeal wall. Uvulopalatopharyngoplasty is a widely accepted procedure for Obstructive Sleep Apnea.

Non-Surgical Treatment

Continuous Positive Airway Pressure (CPAP) Therapy

The CPAP machine gently blows pressurized air through your airway at a constant pressure that helps keep the airway open while you are asleep. This is the most widely used treatment modality for OSA.



Mandibular Advancement Splint (MAS)

It is a device worn in the mouth that helps enhance breathing when you are asleep, helping reduce snoring and / or Sleep Apnea.

A few randomized, controlled trials of a Mandibular Advancement Splint show that there is a considerable subjective improvement in snoring frequency and severity, especially in patients with OSA.

Conclusion

Obstructive Sleep Apnea is a serious medical condition, which should be diagnosed and treated effectively or else it can gradually lead to serious systemic conditions.®



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EXPERIENCE DENTCARE



Journey to Excellence

DentCare Dental Lab is one of the few institutions that have given me an insight into the latest developments in the field of dentistry. After practicing with another Doctor for a prolonged period, when I ventured into my own practice, I did not have to think twice about choosing a Lab. The quality of dental prostheses, promptness of delivery, and reliability of service are the important qualities that made me choose the lab.

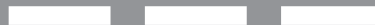
My experience with DentCare for more than two decades has convinced me beyond doubt that the quality and standard of their work is at par with international standards. They are also venturing into new fields of business and products. The polite behavior and willingness of the staff to accept corrections, if necessary is highly commendable.

I wish DentCare Dental Lab success in all their endeavors. @



Dr. Jemy Anney John

Dental Practitioner
Thiruvananthapuram, Kerala, India



Meeting Expectations

My short visit to the DentCare Dental Lab was an eye-opener, into a completely different world full of awe-inspiring and sophisticated laboratory settings.

Premier infrastructure, unparalleled organizational structure, overwhelming etiquette, peerlessly clean environment, and incredibly warm staff are a few of the attributes that make the lab stand out from the crowd. @



Dr. Sunita Garg

Professor and Head
Department of Conservative Dentistry and
Endodontics
Government Dental College and Hospital
Ahmedabad, Gujarat, India





Applications Of Botulinum Toxin In Dentistry

A beautiful smile requires more than just beautiful teeth. Cosmetic procedures are increasingly becoming popular in modern times. Aesthetics and harmony of the face correlate directly with the smile and this, in turn, is formed by the union of three components: the gums, teeth, and lips. As Dentists, we are bound to offer smile makeovers for our patients, enabling them to enjoy improved self-confidence.



Dr. Piyush Kaushik
Dental Practitioner
Chandigarh, India

As people are becoming more aesthetically conscious, the application of unconventional therapeutic agents like Botulinum Toxin (BTX), which is commonly known as Botox, is gaining momentum.

There are seven types of Botulinum Toxin; namely, Types A, B, C, D, E, F, and G. BTX is produced by *Clostridium botulinum*, a gram-negative bacterium. Serotype A is a clinically important therapeutic agent, particularly in the cosmetic arena, even though Type B formulation is approved in several countries for treating Cervical Dystonia and for making cosmetic corrections.

Applications of BTX in Dentistry

1. Gummy Smile

This condition refers to a smile that displays an excessive amount of the upper gum. Excessive gum exposure can be frequently attributable to over contraction of the upper lip muscles. Injection of BTX bilaterally into the muscles of the upper lip like Levator Labii Superioris (LLS), Levator Labii Superioris Alaeque Nasi (LLSAN), and Zygomaticus Minor Muscles (ZMi) will help reduce the over contraction of the upper lip muscles while smiling.

2. Bruxism, Masseteric Hypertrophy, and Temporomandibular Joint Disorders

Bruxism or Teeth Grinding causes excessive wear and tear of the teeth. This can also cause discomfort in the Temporomandibular Joints (TMJ) and masticatory muscles, along with associated headache. Injection of BTX into the muscles of mastication, such as the Masseter and Temporalis can significantly alleviate the symptoms associated with it. Botulinum Neurotoxin has shown promise in alleviating the symptomatology of Bruxism.

Chronic Bruxism causes hypertrophy of the Masseter muscles. This can also alter facial appearance, giving it a swollen look. Injection of BTX into the Masseter muscles can reduce the swelling. This type of management is a more preferred option to 'Facial Muscle Resection'. Botulinum Toxin will also help

manage Temporomandibular Joint Disorders (TMD) caused by a myogenic component.

3. Oromandibular Dystonia

Oromandibular Dystonia (OMD) is a movement disorder characterized by an involuntary paroxysmal and patterned muscle contraction of varying severity, resulting in sustained spasms of the masticatory muscles. It leads to a forceful contraction of the face, jaw, and / or tongue, causing difficulty in speaking, swallowing, and eating.

4. Mandibular Muscle Spasms

When the jaw-closing musculature remains semi-contracted or in spasms, there will be a reduced mouth opening. This type of muscle spasm places a limitation on completing basic oral hygiene practices, causing debilitating long-term effects. A muscle relaxation technique will help restore the patient's mouth opening significantly.

5. Dental Implantology

It takes three to four months for a Dental Implant to completely osseointegrate with the bone. Overloading of the muscles of mastication can impede osseointegration of Dental Implants. The muscular relaxation achieved with a BTX injection to the masticatory muscles can be therapeutically beneficial, as it can help ease the load of mastication and enable the implant to heal efficiently.

Contraindications

- ◆ Patients with unrealistic expectations, who do not understand the limitations of the use of Botox.
- ◆ Those afflicted with Neuromuscular Disorders like Myasthenia Gravis and Lambert-Eaton Myasthenic Syndrome (LEMS).
- ◆ People allergic to Botox or its serotypes.
- ◆ Those who take concomitant interactive medications.
- ◆ Pregnant or lactating women.

Conclusion

Botox is an excellent therapeutic agent offering a minimally invasive approach for cosmetic correction and functional intervention. However, all Dental Practitioners must ensure that the treatment is within their scope of practice and have received appropriate training not just to administer BTX but to deal with its potential adverse effects as well. It will serve as a vital adjuvant in the Dentist's arsenal. ©

Panchakarma: A Boon in Ayurveda

The World Health Organization (WHO) reports that the burden of chronic diseases is rapidly increasing across the world and as a result, the world is facing an epidemic of Obesity, a key risk factor for Type 2 Diabetes, Cardiovascular Diseases, Osteoporosis, High Blood Pressure, and Stroke, along with various types of Cancers. Physical inactivity and unhealthy diets are the factors that predispose people to chronic diseases.

Ayurveda is a 5000-year-old ancient Indian system of natural and holistic medicine. It is the science and art of appropriate living that helps achieve longevity. The basic principle of Ayurveda is to rejuvenate and preserve the health of the healthy and alleviate the disease of the sick. Ayurveda has the best therapies like Panchakarma to make the body free from all disease-causing factors.





Dr. Tehreem Khan

Ayurvedic Physician and Healthcare Consultant
Rambilas Anandilal Podar Medical College
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Panchakarma is a Sanskrit word which means Five Actions / Treatments that are integral to the Ayurvedic method of purifying the body. It is a five-fold therapy which includes Vamana (Emesis), Virechana (medicinal purgation), Basti (Herbal Enema Therapy), Nasya (elimination of toxins through the nostrils), and Raktamoksha (detoxification of the blood).

These therapies are known to bring about a balance of the three Doshas (Vata, Pitta, and Kapha) or substances that are present in a person's body. Vata is the subtle energy of movement; Pitta, the energy of digestion or metabolism, and Kapha, the energy of lubrication and structure.



Benefits of Panchakarma

1. Helps eliminate toxins from your body
2. Helps strengthen the function of tissues in your body
3. Improves health and wellness
4. Improves your immunity
5. Rejuvenates your body

Five Panchakarma Therapies

◆ Vamana

It is a process of induced therapeutic vomiting. It helps detoxify the upper part of the body that includes your stomach and thoracic cavity. Vamana is best for Kapha imbalance. It is recommended for treating Asthma and other upper respiratory tract disorders, besides Skin Allergies like Psoriasis, Acne etc.

◆ Virechana

It is a purgation induced by drugs. It helps detoxify the lower part of the body, including the stomach and intestine. It is best for Pitta imbalance and metabolic disorders. It is also effective in treating Chronic Acidity, Obesity, Chronic Diabetes, and Skin Diseases.

◆ Basti

It is a therapeutic enema to eliminate toxins from the colon, in addition to helping strengthen and rejuvenate the tissues. It is best for Vata imbalance. It is a multidimensional therapy effective in treating many disorders. It is the best aid for all kinds of degenerative musculoskeletal disorders like Osteoarthritis, Osteoporosis, Fibromyalgia, Muscular Weakness, and Paralysis, along with metabolic problems like Chronic Constipation.

◆ Nasya

It is a therapeutic instillation of herbal decoction or herbal oil through the nostrils. It is effective in curing various diseases affecting the head and neck regions. Nasya procedure helps cleanse the head and sinuses, besides helping reduce Hair fall, Acne, Migraine etc.

◆ Raktamoksha

Raktamoksha, which literally means Bloodletting, is performed to eliminate the toxins from the bloodstream through the gastrointestinal tract. It is a safe, painless and highly effective form of Panchakarma. Raktamoksha entails the refinement of blood and hence, it is administered to treat skin diseases, such as Urticaria, Rash, Eczema, Acne, Scabies, Leucoderma, and chronic itching. Enlarged liver and spleen, Hemochromatosis, and Gout can also be cured by applying the bloodletting therapy.

Conclusion

All Panchakarma or detoxification therapies have to be conducted strictly under the supervision of a well experienced Ayurvedic physician. A strict diet should be followed throughout Panchakarma treatment. Panchakarma therapy helps boost your immunity, besides making you healthy and active. ©



A Great Physician & Custodian of Health

Padmashri Prof. (Dr.) T. V. Devarajan is a renowned Physician of India who has dedicated his life to the teaching and practice of Medicine. He is currently working as a **Senior Consultant Physician** at Apollo Hospitals, Chennai, Tamil Nadu, India where he has set up **India's First Advanced Fever Clinic** in 2013 and has been heading it ever since its inception.

He started his career as a Tutor at Madras Medical College where he taught without drawing a salary for 29 years. Later, he moved to Aarupadai Veedu Medical College (AVMC), Puducherry, India where he has been teaching General Medicine ever since.

He is the author of four books; 'Clinical Medicine Made Easy', 'Medicine in Nutshell', 'Diagnosis and

I was attending to ward patients and teaching undergraduate and postgraduate students from 1975 to 2003 without drawing a salary for the pleasure of teaching students

Treatment of Poisoning and Drug Overdose Made Easy', and 'Medical Advice for Healthy Life'. He is also the author of a new textbook of Medicine for medical students across the globe, which has been strongly recommended by Dr. David Galloway, President, Royal College of Physicians and Surgeons of Glasgow, United Kingdom.

Dr. Devarajan was honored with **Dr. B. C. Roy Award**, recognizing him as an eminent teacher, in **2003**. He was also awarded a Fellowship of the Royal College of Physicians of Glasgow, United Kingdom, in **2007**. He was awarded **Doctor of Science (D.Sc.)** from the Tamil Nadu Dr. M.G.R. Medical University Chennai, in **2008**. The Government of India honored him with the fourth highest civilian award, **Padma Shri**, in **2013**.

In an exclusive interview with 'The DentCare', **Dr. Devarajan** talks about his illustrious journey as a Doctor and a Medical Teacher.

Q & A

You served at Madras Medical College for 29 years without drawing a salary. How have you been supporting yourself and your family so long, without drawing a salary?

All salaried Doctors were prone to transfer across the State of Tamil Nadu once in three years. If I opted not to draw a salary and work honorary, I would not be transferred. I was attending to ward patients and teaching undergraduate and postgraduate students from 1975 to 2003 without drawing a salary for the pleasure of teaching students.

I did private practice in the evening and became a Consultant Physician to the employees of the Madras Rubber Factory (MRF) and Madras Fertilizers Limited (MFL) to sustain myself. Besides, there was the salary of my wife, who was in Government service, to support the family.

So, there was no problem financially and hence, I could have my desire of teaching students for many years in the same medical college and hospital. This honorary service helped me get **Dr. B C Roy National Award** for the best medical teacher. But the Government of Tamil Nadu has now abolished the honorary service.

Q & A

What made you set up the First Advanced Fever Clinic in India at Apollo hospital?

I have started the Advanced Fever Clinic for catering to the needs of the patients with a prolonged fever diagnosed by different hospitals. We have observed that many patients were coming in with Fever of Unknown Origins and most often this can lead to several complications. This clinic will not attend to patients with a normal fever but those requiring special investigation. This clinic offers advanced diagnostics and faster recovery for those with Fever of Unknown Origin.

Q & A

Would you share with us a challenging case you have attended so far at the Fever Clinic?

Though there are almost 50 – 60 challenging cases, I shall share one particular experience. A patient came with a history of continuous fever for the past 20 days. Electrocardiogram (ECG) showed the evidence of Pulmonary Thromboembolism (a clot in the pulmonary artery), a very serious condition that could be life-threatening. He was successfully resuscitated with Intravenous Heparin Therapy.

Later, he was affected with paralysis of all four limbs, requiring Intravenous Gamma-globulin Therapy. The following day, he also developed Cortical Vein Thrombosis. It was almost impossible that a patient

affected with these three debilitating conditions could have been resuscitated; however, after 40 days of intensive medical care, the patient recovered completely and was discharged.

Q & A

World Health Day is being celebrated on April 7. What advice would you like to give on this day to the general public?

Have a balanced diet; live a healthy life; do exercise daily, say your prayers and praise God every day; get vaccinated according to the recommended immunization schedule; avoid taking over the counter medications, and schedule an annual medical check-up.

Q & A

Would you tell us more about your family?

I am fortunate to have married Dr. Lakshmi Devarajan, who is a famous Gynecologist and a Specialist in Laparoscopic Surgery. My daughter, Dr. Sangeetha Ramesh has completed Bachelor of Medicine, Bachelor of Surgery (MBBS), Doctor of Medicine (MD), and Dip. NB (Diplomate National Board) and is a Member of the Royal College of Obstetricians and Gynecologists (MRCOG), United Kingdom. She is now a Consultant Gynecologist in London, United Kingdom. My wife was a great inspiration for her to become a Gynecologist. She is happily married to Dr. Ramesh, a General Practitioner (GP) and Orthopedic Consultant. They are blessed with two children.

Q & A

Though a septuagenarian, you are still enthusiastic about spreading positive energy to your colleagues and those around you. What is the secret behind your unyielding enthusiasm?

I have taken the oath as a Doctor to treat the sick to the best of my ability; preserve patient privacy; teach the secrets of Medicine to the next generation, and so on. Though I am a septuagenarian, I am available even at 1.00 am to attend to emergency cases. I retired from Madras Medical College in 2003 and became an Emeritus Professor of Medicine at Aarupadai Veedu Medical College (AVMC), Puducherry, India where I still continue teaching. Along with this, I continue serving as a Consultant Physician at Apollo Hospital, Chennai.



Q & A

What is your advice to young Doctors?

Keep abreast of the latest developments taking place in the medical field to provide the best care and treatment for patients. Attending Continuing Medical Education (CME) Programs would enable Medical Practitioners to learn newer trends in each Speciality (Medicine). This will also help share their knowledge and expertise to provide the best service to patients. Be honest with patients; be economical and be available on time, besides being good to patients.

Doctors should advise their patients to make necessary lifestyle modifications; take a healthy balanced diet; do exercise daily, and practice Yoga and meditation. Simultaneously, Doctors should also take care of their own personal health. ®

For The **DentCare**

Interviewed by **Ms. Nisha Philip Xavier**

Glorious presence of DentCare
@ 38th International Dental Show,
Cologne, Germany held from 12-16 March 2019



Importance of Continuing Dental Education Programs



Continuing Dental Education (CDE) programs offer ongoing education to Dental Practitioners to help them upgrade professional knowledge and competence throughout their professional lives. It has become imperative in the fast-paced and continually changing world of dental healthcare.

The rapid expansion of knowledge and technology is taking place in different specialties of dentistry, leading to immense pressure on Dentists to keep themselves up-to-date with the latest interventions and treatment modalities, challenging them to remain competent across the full spectrum of information available to the dental profession.

The American Dental Association (ADA) states that all the members of the dental profession should remain lifelong learners to keep themselves abreast of the latest developments in technology and advancements in science.

Dr. Anzil K. S.
Reader

Dr. Kiran Mathai
Assistant Professor

Ms. Riya K. Paul
Ms. Raveena Susan Rosh
Mr. Vyshak M. V.

House surgeons

Department of Public
Health Dentistry
St. Gregorios Dental College
Chelad, Kerala, India

A Study Report

A cross-sectional study was conducted among 112 Dental Practitioners registered under the Karnataka State Dental Council to assess the frequency of attending Continuing Dental Education programs, along with their preferences and barriers for attending them.

The study revealed that 45.23% of the participants attended the programs once in six months, 32.73% once a year, and 22.13% attended none. A questionnaire was prepared to know the participants' topic of interest, opinion on the mode of conducting CDE programs, and barriers for attending the programs.

Majority of the participants preferred Esthetic Dentistry followed by Endodontics and Implantology while very few preferred Periodontology. The most preferred areas of interest in the CDE programs were hands-on and treatment on live patients as well as hands-on on clinically simulated situations.

The most common barriers to attending the programs were lack of time followed by family commitments and irrelevant topics for discussion in the programs. CDE programs are generally conducted in cities that are considerably distant from remote areas, acting as a barrier for the Dental Practitioners residing in these areas to attend CDE programs.

Primary Objectives of a CDE Program

- To review existing dental treatment concepts
- To earn Credit Points
- To gather practical knowledge on the use of latest tools and equipment
- To understand business practices
- To learn the art of expanding the professional practice



Credit Point System for CDE Programs

Credit Points (CP) are awarded to the participants of CDE programs by the Dental Council of India (DCI). The DCI has recommended providing 150 CDE Points to the participants over a period of five years with a minimum of 20 points a year and a maximum of 50 points per annum.

Indian Dental Association (IDA) conducts CDE programs on a regular basis. The DCI recommends earning Credit Points, which can be obtained by attending CDE programs, to renew the registration and continue the dental practice.



Conclusion

CDE programs impart newer methods and concepts in the ever-changing world of dentistry. This enables Dentists to keep themselves up-to-date with the latest technologies and interventions in dentistry. All Dental Practitioners should actively participate in CDE programs so as to enable them to remain competent throughout their professional lives. ©



Xylitol: **Protective Strategy for Your Teeth**



Studies have proven that Xylitol boosts dental health and helps prevent Tooth Decay



Dr. Ammar Rushdi Abdelfatah
Consultant Pediatric Dentist
Kingdom of Saudi Arabia

Xylitol is a sweet-tasting crystalline alcohol derived from Xylose, present in some plant tissues and is used as an artificial sweetener in food. It possesses antioxidant properties. It was used in the early sixties of the last century to treat several conditions like burns, neurological trauma, ear infections, and as a sugar substitute for people with Diabetes.

In a study conducted in Finland in 1970, it was discovered that Xylitol had some health benefits, especially for the teeth. Studies have proven that Xylitol boosts dental health and helps prevent Tooth Decay. Since Xylitol is non-fermentable, the bacteria in the mouth cannot convert it into the harmful acids that cause Tooth Decay.

The first Xylitol-containing chewing gum was launched in Finland, in 1975 and subsequently in the

United States of America (USA). If you chew Xylitol-containing chewing gum two or three times a day, it will greatly reduce the growth of the bacteria in the mouth that cause cavities.

Xylitol helps reduce the incidence of Dental Caries by increasing salivary flow. It also helps reduce the number of Cariogenic bacteria, Plaque formation, Xerostomia, and Gingival inflammation. Xylitol-containing chewing gums accelerate the processes of rinsing away the acids in the oral cavity that cause damage to the teeth, besides absorbing calcium and phosphate molecules that promote the remineralization of the tooth enamel.

Xylitol is currently available in several forms: chewing gums, chewable tablets, Diabetes-friendly food, and as oral care products.

It has been proven that Xylitol-containing chewing gums are effective as a preventative agent against Tooth Decay. The American Academy of Pediatric Dentistry (AAPD) supports the use of Xylitol (in specific doses and after consulting a Dentist) as a preventive strategy specifically designed to reduce Tooth Decay.

In spite of many health benefits, more research is needed to ascertain the mechanisms of action and the clinical significance of Xylitol. ®

Primary Teeth: Take Care

P rimary Teeth are very important as they hold space for the Permanent Teeth. They are also essential for chewing / biting and speech development, besides giving shape to your child's face. Primary Teeth are twenty in number. The first tooth will erupt in the oral cavity at about 6 months and the complete set of Primary Teeth will be seen by around 3 years of age.

Your child will lose his first Primary Tooth around the age of six. This is followed by the eruption of the first Permanent Tooth. Your child will usually lose his last Primary Tooth around the age of twelve. The time during which both Primary and Permanent Teeth are in oral cavity together is called the period of 'Mixed Dentition.'





Dr. S. Kaviya
Dental Practitioner
Chennai, Tamil Nadu, India

Purpose of Primary Teeth

- ✧ Helps to chew food properly
- ✧ Assists in proper speech
- ✧ Builds self-esteem by providing a beautiful smile
- ✧ Serves as a path for Permanent Teeth to erupt in a correction position

What happens when a Primary Tooth is not taken care of?

When a Primary Tooth is not taken care of, it can lead to Dental Caries and infections. Many children below 3 years of age suffer from Early Childhood Caries or Rampant Caries. It may be due to frequent consumption of sugary substances, lack of oral hygiene routines, a prolonged feeding habit, or low salivary flow.

If Dental Caries in the Primary Tooth persists for long, it leads to its early loss. If a Primary Tooth is lost too early, the adjacent Permanent Teeth can drift into this edentulous space, causing difficulty for the eruption of the underlying Permanent tooth. This may lead to developmental malocclusion in a child. The space created by the loss of a Primary Tooth should be protected with a space maintainer.

Disturbances in Tooth Eruption

The causes for the disturbances in Tooth Eruption are

- ✧ Traumatic injuries
- ✧ Unhealthy oral habits
- ✧ Gene Mutation

Common habits that cause Malocclusion in children

- ✧ Thumb-sucking that goes on beyond 4 years of age
- ✧ Tongue thrusting
- ✧ Lip biting
- ✧ Mouth breathing
- ✧ Cheek biting

Bad oral habits can be controlled using a Habit Breaking Appliance. Early diagnosis will help correct these habits and consequent malocclusion.

How to care for Primary Teeth?

Good oral habits must be developed in children at a young age. Parents must educate their children to maintain good oral hygiene by helping them brush their teeth twice a day. They should be taught to rinse their mouth after eating and may be discouraged from taking sugary and sticky foods.

Guidelines for Parents

- ✧ Clean the infant's gums with a damp washcloth after meals and before bed prior to tooth eruption; do not use toothpaste when performing oral healthcare before teeth have erupted
- ✧ After tooth eruption, clean the child's teeth with washcloth and progress to child size soft bristled toothbrush
- ✧ Start using toothpaste after tooth eruption (approximately 18 to 24 months of age), usually a pea-size amount of fluoride toothpaste is recommended
- ✧ Caregivers should demonstrate proper brushing technique and guide the child in brushing, reminding the child about the importance of proper oral hygiene
- ✧ Till a child can brush the teeth on his own, the guidance of parents is very important
- ✧ After 6 years of age, a child may be allowed to clean the teeth by himself



Conclusion

Making your child's first dental visit as soon as his first tooth erupts in the oral cavity and following the prophylactic measures provided by the dentist is the simplest way to protect the Primary and Permanent Dentition of your child. ©

Allergic Reactions To Cosmetics





Dr. (Maj.) Nalini Janardhanan
Specialist in Family Medicine
Hadapsar, Maharashtra, India

Allergy is a hypersensitive reaction of the immune system to neutralize or reject a substance that is generally harmless to the body. Allergy can be triggered by anything. The reaction to an allergen may vary from individual to individual; that is, each individual reacts differently to an allergen.

Cosmetics containing chemicals can trigger allergic reactions like Hives (itchy red spots on the skin), rashes, scratchy throat, itchy eyes etc. The fragrance and preservatives contained in perfumes, hair dyes, sunscreens, shampoos, mascaras, bath soaps, and moisturizers can also trigger an allergy. The tissue papers, which are used to remove makeup from your face, can contain alcohol, chemicals, and preservatives which may cause an allergy. Similarly, the use of a beauty product after the expiration date may also trigger an allergy.

Allergic reactions to a beauty product most often starts with itching, swelling of the skin, rashes, and breakouts. When an allergy gets serious, the skin may become red and raw; sometimes, fluids can ooze from the affected site / blisters. In very severe cases, it can cause breathing problems, Asthma attacks, and even death. Cosmetic Allergies usually affect the face, lips, eyes, ears, and neck.

An allergic reaction can appear anywhere on your body. The allergic reaction on the skin can appear as pimples (acne). Certain cosmetics may also exacerbate pimples. If you notice acne after using a new cosmetic, consult a Dermatologist immediately.

Application of 'Kumkum' can result in Pigmented Contact Dermatitis (reddish-brown to slate grey pigmentation on the skin in a reticulate pattern) and Lichen Planus Pigmentosus (oval or irregularly-shaped brown to gray-brown macules and patches on the skin). Sticker Bindis can induce Contact Leukoderma (whitening of the skin).

Hair dyes can cause eruptions and itching or irritation on your scalp, forehead, neck, or ears. Hair removal

creams can cause rashes, itching, and irritation. Herbal products may not always be harmless. Certain herbal face packs or whitening creams may trigger allergic reactions like rashes.

People with a weakened immune system, those who are recovering from chronic diseases, those who have sensitive skin, or those who are genetically prone to allergy should be careful in using cosmetics, as they are more likely to develop an allergy.

Those with a previous history of sensitive skin, Eczema, and Allergies should be very vigilant while wearing artificial jewelry. It is better for them to refrain from wearing artificial ornaments.

“
Allergic reactions to a beauty product most often starts with itching, swelling of the skin, rashes, and breakouts





How to prevent Allergy to Cosmetics?

- ⦿ Never share your makeup and makeup brushes / pencils
- ⦿ Keep your Cosmetics away from the heat and direct sunlight as well as contaminants. It is better to keep them in a tightly closed container
- ⦿ Do not use eye makeup if you have an eye infection like Conjunctivitis
- ⦿ Clean your cosmetic brushes and applicators frequently
- ⦿ Discard your cosmetic products that have changed its color and consistency or developed a bad smell. If a product has become hard, instead of using it after adding water, throw it off
- ⦿ Cheap beauty products may not often be tested for safety. They may contain chemicals that can cause an allergy. So avoid buying cheap beauty products
- ⦿ Apply or spray perfumes on your clothes instead of on your skin
- ⦿ Choose face makeup (foundation, concealer, blusher etc.) which are labeled 'non-comedogenic' or 'hypoallergenic'
- ⦿ Powder-based cosmetics tend to contain fewer preservatives when compared to water-based ones
- ⦿ A wax-based pencil eyeliner is better than a liquid one
- ⦿ The skin of your lips is less sensitive but it can become dry or cracked. Hence, avoid the use of a lipstick that gives a long-lasting lip color
- ⦿ Refrain from using a cosmetic that has caused an allergic reaction in your body in the past
- ⦿ If you are prone to an allergic reaction, perform a patch test before using a cosmetic
- ⦿ Consult a Dermatologist if you are prone to an allergy or had an allergic reaction in the past Ⓞ



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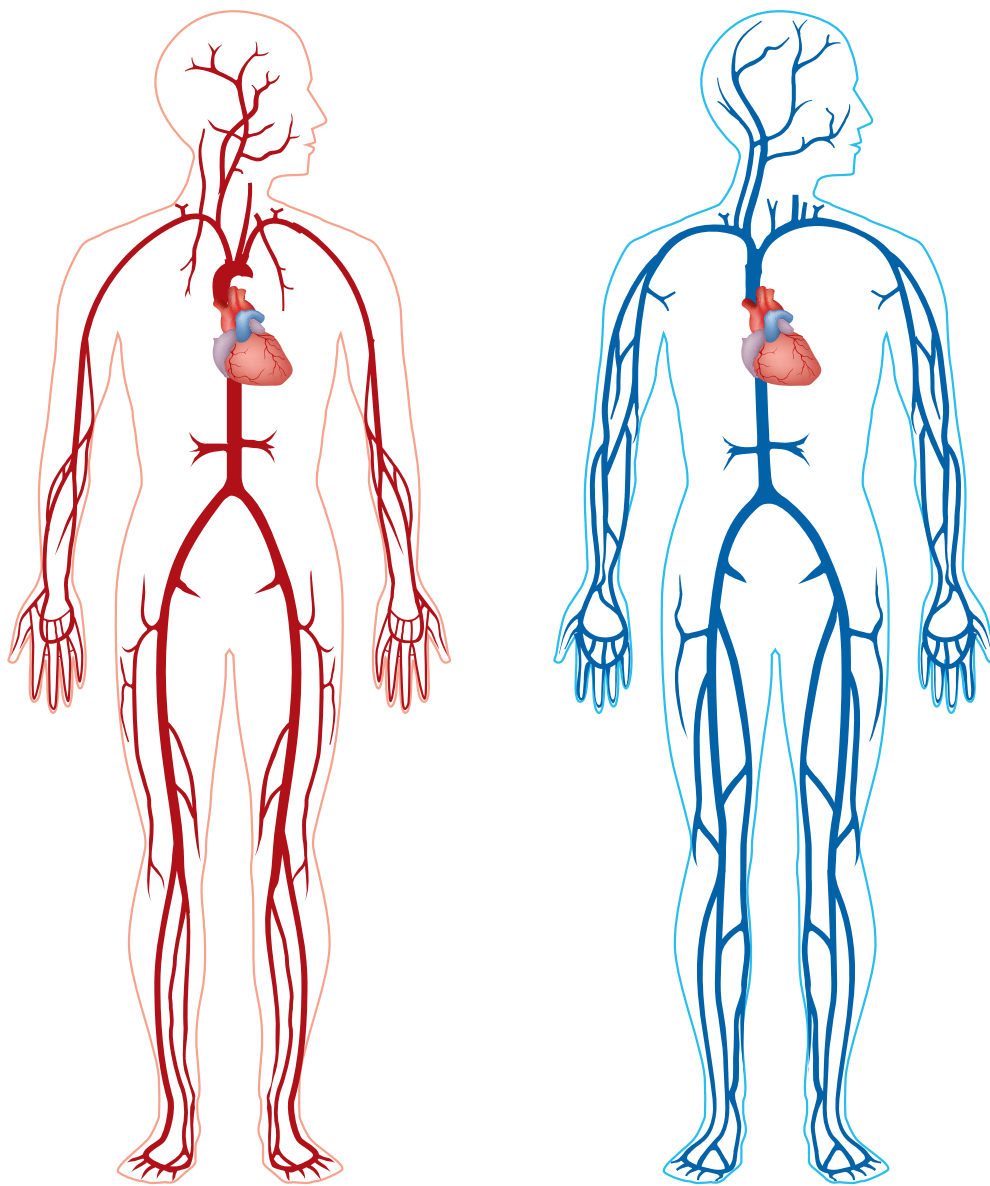


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Vascular and Endovascular Surgery

All the organs in the human body are provided with a network of pure [arteries] and impure [veins] blood vessels to provide oxygenated blood and metabolites for the proper function of the body. Any affliction or loss of integrity of the blood vessels can have an adverse impact on the function of the related organ.

The incidence of Vascular Diseases has been found to be increasing in India over the past few decades. Atherosclerosis (deposition of fatty materials inside the arteries) and allied causes like Arteriopathies (a disease of the arteries) can involve the Aorta and arteries, contributing to the development of Aneurysm or Occlusive Disease that can cause potential complications.



Dr. M. Unnikrishnan
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Thiruvananthapuram, Kerala, India

Advanced age, Smoking, Consumption of Alcohol, Overeating, Obesity, and Physical inactivity coupled with Diabetes and Hypertension are the factors that enhance the incidence of Vascular Disease.

Common Vascular Diseases

The most common Vascular Diseases are Stroke (Carotid Artery Disease), Peripheral Artery Disease (PAD), and Aortic Aneurysm.

Stroke (Carotid Artery Disease)

A Stroke occurs when a thrombus or blood clot blocks an artery to the brain and stops the flow of blood. A Carotid artery may be afflicted with fat deposition due to Atherosclerosis (a disease of the arteries characterized by the deposition of fatty material on their inner walls), resulting in temporary weakness of the upper and / or lower limbs, inability to speak, or visual disturbance which when left untreated may lead to Stroke with its devastating sequelae.

Carotid Endarterectomy (**Fig. 1**) (a surgical procedure to clean the carotid artery so as to reduce the risk of Stroke) has proved to be beneficial in preventing Stroke in almost all patients. The procedure is

indicated in symptomatic patients with Carotid-territory Transient Ischemic Attack or Minor Stroke, especially those with 70 to 99 percent blockage (**Fig. 2**) in the Carotid artery.

Peripheral Artery Disease

Peripheral Artery Disease occurs when the narrowed arteries reduce the flow of blood to the limbs. This illness has a wide variety of presentations; namely Claudication (cramps in the legs); tiredness or inability to go up on a slope; leg pain occurring at rest; ulceration; or even bluish or blackish discoloration of the limb, due to the almost complete stoppage of blood flow which if left untreated could end up leading to the loss of a limb.

When arteries to the leg get blocked, a patient initially develops symptoms like Cramps while walking. Controlling the risk factors, taking medications, and graded walking exercise would be sufficient to keep the condition at bay in the initial stage of the disease. But when blood flow decreases further, Balloon Angioplasty with Stent Placement (**Fig. 3**) or even a surgical bypass may become necessary to save the leg. Thereafter, medications and graded walking exercise need to be continued.

Femoral Popliteal Bypass Surgery (**Fig. 4**) is performed to treat a blocked femoral artery, the largest artery in the thigh. A healthcare provider accesses the femoral artery through a large incision in the upper leg. A vein taken from another area in the leg is attached above and below the blockage. This is called a graft. The blood is rerouted through the graft around the blockage. In some cases, a man-made graft may be used, rather than a vein graft.

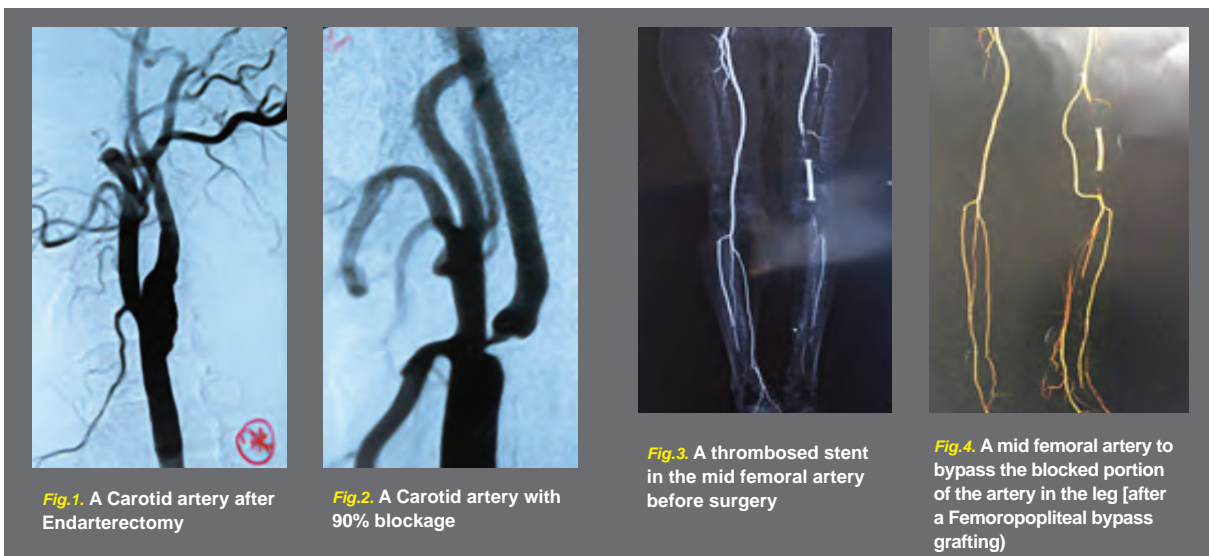


Fig.1. A Carotid artery after Endarterectomy

Fig.2. A Carotid artery with 90% blockage

Fig.3. A thrombosed stent in the mid femoral artery before surgery

Fig.4. A mid femoral artery to bypass the blocked portion of the artery in the leg [after a Femoropopliteal bypass grafting]



Fig.5. Open surgical repair of Aortic aneurysm

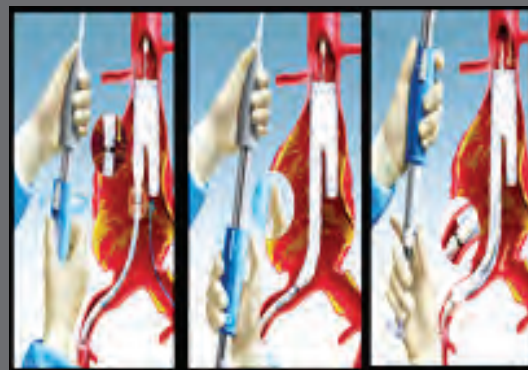


Fig.6. Endovascular aneurysm repair

Aortic Aneurysm

When an artery dilates like a balloon, it can lead to a life-threatening condition called Aneurysm. If there is an enlargement (dilatation) of the Aorta to greater than 1.5 times the normal size, it is called an Aortic Aneurysm. It usually does not elicit any symptom except when it has ruptured. Occasionally, there may be abdominal, back, or leg pain.

When the Aorta starts ballooning due to Atherosclerosis and reaches the size of 6 cm or more, an Aneurysm can threaten life, due to rupture. Open surgical repair (**Fig. 5**) or Keyhole surgery [Endovascular aneurysm repair (**Fig. 6**)] is equally beneficial to save the life of a patient.

Diagnosis

A detailed patient history coupled with a comprehensive physical examination will help provide valuable clues to a diagnosis. The common diagnostic procedures like Blood Test, Arterial Duplex Ultrasound, Computed Tomography (CT), and Magnetic Resonance Imaging (MRI) will help detect

the extent of arterial damage / blockage and the degree of arterial dysfunction. The functions of the other systems of the body, particularly the Cardiovascular, Pulmonary and Renal systems need to be assessed when an open procedure is contemplated.

Treatment Modalities

Dietary control, moderate physical activity, and quitting smoking are the initial measures to be taken by a patient with Vascular Disease. Taking medications to control Diabetes, Hypertension, and Hyperlipidemia (abnormally elevated levels of any or all lipids or lipoproteins in the blood) is vital to modify and control the deleterious effects of Vascular Disease.

If a patient presents with critical symptoms like organ dysfunction, interventional modalities like Endovascular Surgery or Open surgical treatment may become necessary. Endovascular Surgery is less stressful for both the patient and the Surgeon; however, Open surgery can only provide a more durable outcome and in most cases, it may last even a lifetime.



Conclusion

Vascular Diseases are often called a Lifestyle disease, which most often affect the elderly. Advanced age, Smoking, Consumption of Alcohol, Overeating, Obesity, and Physical inactivity, in addition to Diabetes and Hypertension, are factors that predispose a person to Vascular Disease. Addressing the risk factors is imperative in bringing Vascular Diseases under control. ©



Classic Creme Caramel Pudding



Celebrity Chef Nita Mehta
Author and Entrepreneur
New Delhi, India

For Pudding

Ingredients

Milk	3 cups
Sugar	9 teaspoons
Milk Powder	3 tablespoons
Vanilla Custard Powder	1 teaspoon
Egg	3 numbers
Vanilla Essence	1 teaspoon

For Caramel

Ingredients

Sugar	4 teaspoons
Water (Hot)	1 tablespoon

Method

1. Mix Milk, Sugar, Milk Powder, and Custard Powder together in a pan. Mix well till it becomes a smooth paste. Place it on a stove and stir continuously till it comes to a boil. Then reduce the heat and allow it to simmer for five minutes while stirring continuously. Remove from the heat and allow it to cool for a while.
2. Beat Eggs and Vanilla Essence well with an Electric Hand Beater till it becomes light and fluffy.
3. Add the Egg mix to the Milk mix. Blend it well. Then keep it aside.
4. For preparing Caramel, transfer Sugar to a jelly mold. Place it on a low flame and melt Sugar and stir continuously till the liquid turns golden brown. Then add hot water. Remove from the heat and spread it evenly over the base and sides of the mold. Allow it to cool till Sugar Syrup is set.
5. Pour Milk-Egg mix into the mold. Cover it well with an aluminum foil and place a lid on its top.
6. Pour 1½ cups of water in a Pressure Cooker and place the covered mold in it. Pressure cook till the whistle blows four times. Remove from the heat and keep it aside.
7. Refrigerate the pudding till it is set.
8. To unmold, run a knife around the mold and then invert it on to a plate. Give a slight jerk to the mold to take out the pudding smoothly. ©

Gestational Diabetes Mellitus

Gestational Diabetes Mellitus (GDM) is a condition in which a woman without Diabetes develops high blood sugar levels during pregnancy. Diagnosis and prompt management during pregnancy are absolutely essential for a favorable outcome for both the mother and the fetus.

The primary objective of GDM management is to achieve Normoglycemia (a normal concentration of sugar in the blood) and associated normal metabolic environment for both the mother and the developing fetus.

Pregnant women, who are obese, with a family history of Diabetes Mellitus, or who have had menstrual irregularities, should undergo tests to rule out the presence of GDM even in the first and second trimesters. The majority of patients with GDM need not take Insulin during pregnancy. In fact, the blood sugar levels of 80% of women with Gestational Diabetes Mellitus can be controlled by dietary modification, especially restricting the intake of Carbohydrates, along with proper exercise and eating regular meals.

Prevalence

The prevalence of Gestational Diabetes Mellitus in different parts of India varies widely; it is 3.8% in Kashmir; 6.2% in Mysore; 17.9% in Tamil Nadu, and 17% in Kerala.



Diagnosis and prompt management during pregnancy are absolutely essential for a favorable outcome for both the mother and the fetus

In a more recent study conducted using different criteria, it has been found that the prevalence of GDM is as high as 35% in Punjab and 41% in Lucknow.

The geographical differences in the prevalence of Gestational Diabetes Mellitus have been attributed to the differences in the age and / or socioeconomic status of the pregnant women in these regions. It is estimated that about 4 million women are affected by GDM in India, at any given point of time.

Effects of GDM on Fetal Growth

Congenital malformations of the Heart, Central Nervous System, Kidneys, as well as Sacral agenesis (abnormal fetal development of the



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lower spine) is 3 – 5 times greater in infants born to mothers with uncontrolled GDM and hence, medical termination of pregnancy may become necessary in many cases to avoid further complications.

Similarly, Intrauterine Growth Retardation (IUGR) and low intelligence quotient, along with the chances of developing Diabetes and Hypertension are also high in children born to mothers with uncontrolled GDM.

Macrosomia (a child with a birth weight of more than 4 kilograms [Kg]) due to Hyperinsulinemia (excess levels of Insulin in the blood) in the fetus is higher in women with GDM, necessitating Cesarean section for up to 33% cases.

Other neonatal complications include Hypoglycemia (a deficiency of Glucose in the bloodstream), Hypocalcemia (a low level of Calcium in the blood), Hypomagnesemia (a deficiency of Magnesium in the blood), Hyperbilirubinemia (a condition in which there is too much Bilirubin in the blood), and Shoulder Dystocia (a complication in which an infant's shoulders become lodged in the mother's pelvis).

Women with GDM are vulnerable to antenatal complications like Hypertension, Hydramnios (increased amount of amniotic fluid), increased weight, and premature labor.



Diagnosis

Doctors use blood tests to diagnose Gestational Diabetes. You may have a Glucose Challenge Test (GCT), Oral Glucose Tolerance Test (OGTT), or both. These tests help show how well your body uses glucose.

Glucose Challenge Test (GCT)

Glucose Challenge Test is also known as Glucose Screening Test. In this test, a health care professional will draw your blood one hour after you drink a sweet liquid containing Glucose. If your blood Glucose is high; i.e., 140 milligrams (mg) / deciliter (dl) or more, you may have to undergo an Oral Glucose Tolerance Test.

Oral Glucose Tolerance Test (OGTT)

This test helps measure blood Glucose after you fast for at least 8 hours. A health care professional will draw your blood. Then you will drink a liquid containing 75 grams of glucose. You will need your blood drawn every hour for 2 to 3 hours for a doctor to diagnose Gestational Diabetes.

Now, this test is modified as a single test, which is accepted by the World Health Organization. In this test, a health care professional will draw your blood two hours after you drink a sweet liquid containing 75 grams of Glucose. When the blood glucose level is measured if the value is more than 140 milligrams (mg)/deciliter (dl), the patient will be labeled as having Gestational Diabetes.

What to do?

1. A Lady who is obese, with a family history of Diabetes or Polycystic Ovarian Syndrome (PCOS), and / or with menstrual irregularities, should take a Glucose Tolerance Test (GTT), before planning a pregnancy.
2. GDM can be controlled in 80% of patients with dietary modifications.
3. Tablets like Metformin will help reduce blood sugar levels in patients with GDM. Insulin is needed only for patients with Type I Diabetes or those with uncontrolled blood sugar levels.
4. High-risk patients should take a Glucose Tolerance Test even in the 1st and 2nd trimesters.

Conclusion

Gestational Diabetes Mellitus can contribute to a number of complications during pregnancy, including Preeclampsia, Fetal Hypoglycemia, and excessive fetal weight gain, along with other complications. Hence, women who are at a higher risk of developing GDM should be appropriately screened to reduce maternal and fetal morbidity. A successful combination of Medical Nutrition Therapy, Exercise, and Insulin Therapy will help control Gestational Diabetes Mellitus and its potential complications. ©



*Smile confidently,
go for DentCare
Prostheses*

An Overview of **DENTCARE PRODUCTS**

DentCare 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 31 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.



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

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

DentCare Orthodontic & Pedodontic Appliances

DentCare has put forward a number of amazing Orthodontic Solutions – Removable, Habit Breaking, Fixed and Functional Orthodontic Appliances of highest perfection and optimal precision; manufactured with high-end technologies as well as Medical Grade and CE marked materials from Germany; available at affordable rates and living up

to the expectations of all classes of customers alike. These appliances assist in correcting malocclusion and help resolve various aspects that could make a patient's face and mouth esthetically pleasing.

DentCare Anti-Snoring Device

DentCare Anti-Snoring Device consists of one splint for the upper jaw and another for the lower. The lower jaw is either held in a predetermined position or advanced by two connectors which are fixed laterally to the splint. DentCare Anti-Snoring Device thus counteracts the narrowing of the respiratory tract. The velocity of the inspired air decreases and so does the noise-generating vibrations of soft tissues. With DentCare Anti-Snoring Device, jaw movements are possible and there is no falling back of the lower jaw. With this function, DentCare Anti-Snoring Device is a comfortable and an effective snore guard.



With DentCare Anti-Snoring Device, the lower jaw and the tongue are held in a protrusive (forward) position which helps open up the airways, stopping the snoring sounds when asleep.

DentCare Mouth Guard Triple

DentCare proudly introduces the ultimate mouth guard, DentCare Mouth Guard Triple, which makes possible the philosophy for safe play in high impact



sports, for a pickup game, or for an amateur / a professional athlete.

DentCare Mouth Guard Triple is a triple layered laminated professional sports mouth guard available in 26 different colors, which is soft on the inside and outside while hard in between.

Baltic Denture (CAD / CAM)



In tune with our unique heritage, DentCare, for the first time in India, has introduced the future-oriented CAD / CAM 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.

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 genuinely passionate about exploring new ways to address challenges in enhancing smiles. All the materials we use in production have proven scientific quality and excellence. ☺



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GAIN YOUR SMILE WITH CLEAR ALIGNERS



Dr. Sam Paul
Professor and Head
Department of Orthodontics
Educare Institute of Dental Sciences
Malappuram, Kerala, India

It is no surprise that dental patients are becoming more concerned with the aesthetics of their smile. In line with this trend, patients are increasingly demanding orthodontic therapy that elevates the aesthetic appearance of their smiles. Aesthetic sense of people, especially of the youth has induced a transition from conventional dental braces to advanced Clear Aligners.

This article will help clarify some of the common queries about Clear Aligners repeatedly being asked by patients and the general public.

1. What is Clear Aligner Treatment?

Clear Aligners are an efficient alternative to traditional dental braces for patients who want to straighten their teeth without other people understanding that they are undergoing orthodontic treatment.

Clear Aligners are usually hailed as 'Invisible Braces'. They are made of a soft, flexible thermoplastic material, created exclusively for orthodontic treatment. In addition to being transparent, they are custom-made and fit snugly on the teeth. One of the most appealing features of Clear Aligners is that they are subtle.

2. What are the initial steps involved in opting for Treatment with Clear Aligners?

- ⦿ Schedule an appointment with your Orthodontist to determine if you are a suitable candidate for Clear Aligner Treatment.
- ⦿ Get your Orthodontic Records like Intraoral and Extraoral Photographs, Orthopantomogram (OPG), Lateral Cephalogram etc.
- ⦿ Using 3D computer imaging technology, the treatment plan is formulated and a series of Clear Aligners are customized for you.



3. What are the Primary Benefits of Clear Aligners?

- ⦿ Clear Aligners are virtually invisible; hence you can undergo orthodontic treatment without other people realizing that you are wearing Clear Aligners.
- ⦿ Clear Aligners are completely removable. You can take them out, eat your meals, brush and floss your teeth, and place them back. Thus, it helps ensure your oral hygiene and health is maintained optimally.
- ⦿ Patients will not experience Mouth Sores / Ulcers by wearing clear aligners as there are no metal brackets or wires that may cause irritation inside the mouth.



Clear Aligners are easier to keep clean, making it conducive to maintaining the health of your teeth and gums



4. How long does Clear Aligner treatment take to align your teeth?

On an average, Aligner treatment for adults will take 12 – 18 months. The duration of treatment with Clear Aligners depends upon the severity of the case, the complexity of tooth movement planned and the number of stages required. Aligners offer a much shorter treatment time when compared to traditional dental braces.

5. Is Aligner Treatment painful?

Clear Aligners do not hurt you. However, you may experience temporary discomfort, particularly when you switch over to a new set of Clear Aligners. This just means that the process is working effectively.

6. Will wearing Aligners affect my Speech?

Any orthodontic appliance in your mouth has the potential to affect the way you talk. Being made out of soft, flexible material, Clear Aligners may cause a slight lisp for a day or two. However, lispiness will go away once your tongue gets used to having Clear Aligners in your mouth.

7. How often must I wear Clear Aligners?

Clear Aligners should be worn day and night, except

when eating, brushing, and flossing. More specifically, Clear Aligners must be worn 20 – 22 hours a day to ensure that tooth movement progresses predictably.

8. Is Clear Aligner Treatment more expensive than Dental Braces?

Yes, it is more expensive than conventional braces. However, Clear Aligners produce impressive treatment outcomes within a short span of time.

9. How long do I have to wear a Retainer after a Clear Aligner Treatment?

A permanent retainer is always the best. But it depends on the case. Usually, a patient should wear retainers for up to six months after Clear Aligner treatment. Thereafter, for another six months, he needs to wear retainers at night only. After one year, a patient needs to wear retainers 3 to 5 times a week.

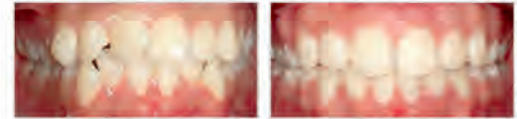
10. Clear Aligners Vs Braces, which is better for me?

Both therapies have their own benefits and limitations. It is up to the Patient / Orthodontist to decide which option suits their lifestyle and level of commitment. So to answer which one is better truly depends on the patients' needs and preference. ©



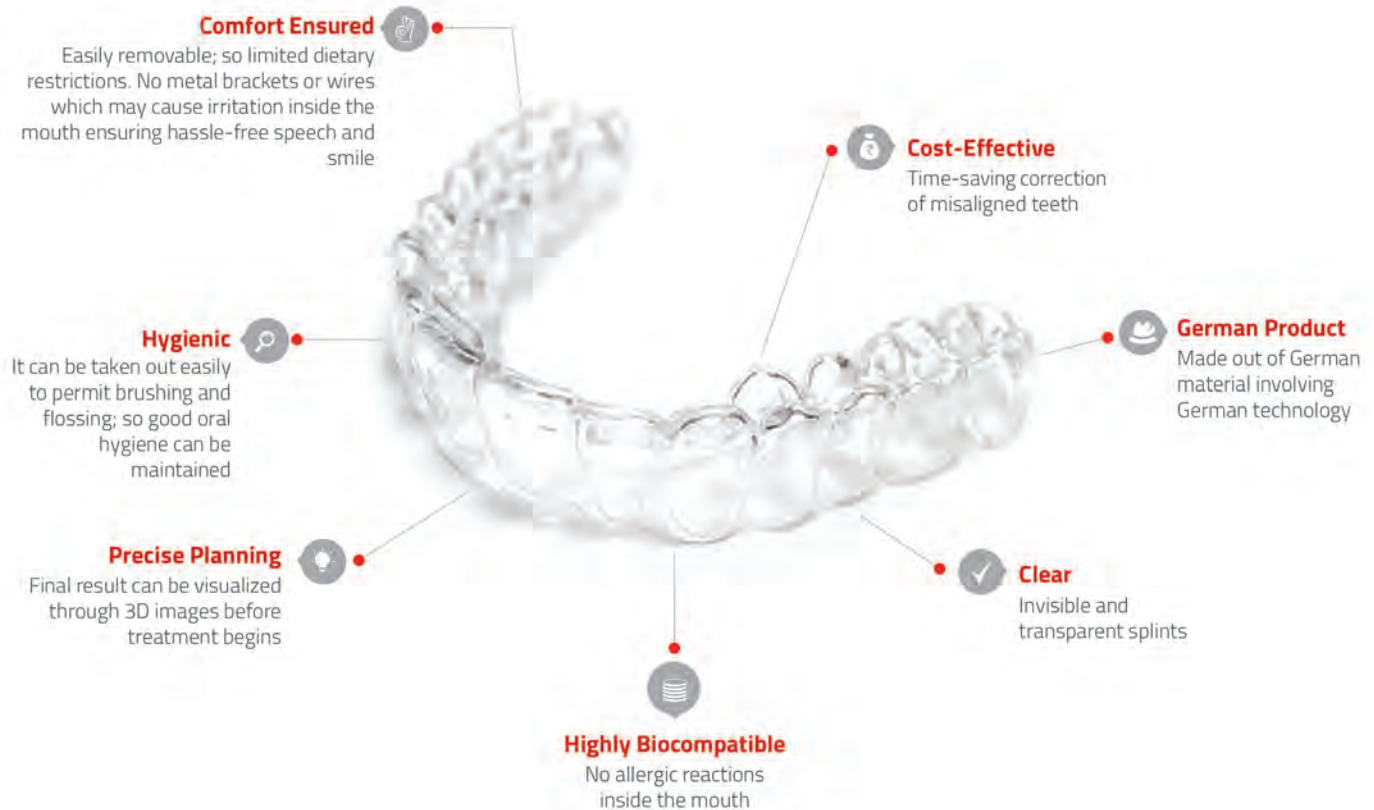
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A Perfect Solution for Misaligned Teeth



Before

After



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Halitosis:

An Overview



Halitosis' originates from the Latin word 'halitus' which means 'pathologic alteration of one's breath'. Halitosis is defined as an unpleasant or offensive odor in the breath of an individual. It can ruin one's personality and confidence, causing social, emotional, and psychological anxiety.



Dr. Garima Sharma
Senior Lecturer
Department of Periodontics
Surendera Dental College and Research
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Types of Halitosis

Broadly, there are two types of Halitosis.

☉ **Physiologic Halitosis**

Physiologic Halitosis is defined as an offensive odor in the breath of an individual with no detectable and underlying systemic cause.

☉ **Pathologic Halitosis**

Pathologic Halitosis is defined as an offensive odor in the breath of an individual with different causes originating from various locations of the body, such as the oral cavity, upper respiratory tract, and lungs.

Common Etiology of Halitosis

Local Causes

A few local causes of Halitosis are Pericoronitis, Mouth Ulcers, Xerostomia, Sinusitis, Tonsillitis, and Deep Caries Lesions causing food impaction and stagnation. Consumption of odor-producing foods like garlic, onion, spicy food etc. can cause short-term bad breath. Smoking and alcohol consumption can also cause bad breath.

Systemic Causes

Systemic causes, such as Liver / Kidney Failure, Diabetic Mellitus, Lower Respiratory Tract Infections, Carcinoma, and Fish Odor Syndrome (Trimethylaminuria) can trigger Halitosis.



Conclusion

Oral malodor is a socially debilitating condition having many etiologies, including local and systemic factors. It is often difficult for a clinician to find the underlying pathologies. Maintenance of a good level of general and oral health, along with periodic visits to your Dentist for prophylactic procedures can help keep your oral malodor at bay. ©

Management of Halitosis

- ☉ Brushing your teeth twice a day with an appropriate brushing technique.
- ☉ Using a Tongue Scraper to get rid of the lurking odor-causing bacteria on the surface of your tongue.
- ☉ Cleaning the interproximal and furcation areas of your teeth using an Interdental Aid.
- ☉ Using Chloride and Zinc-containing Mouthwashes.
- ☉ Using masking agents like chewing gum, mints, sprays etc. which help mask oral malodor to a certain extent with a pleasant fragrance.
- ☉ Reducing the use of drugs causing Xerostomia.
- ☉ Quitting smoking and alcohol consumption.
- ☉ Limiting the intake of odor-producing food and drink.
- ☉ Treating existing Tooth Decay.

Recognition Beyond Borders



Dr. Charlotte Pereira
Consultant Oral and Maxillofacial Surgeon
Abu Dhabi, United Arab Emirates

DentCare is the best dental laboratory that I have ever interacted with. The lab personnel are very friendly, helpful, polite, and efficient. Their prompt service is really praiseworthy. It puts me at ease to take up my work with the lab, as they have always provided me the best. The precision of their prostheses is quintessential and their punctuality is another attribute that makes them stand tall.

I would like to thank DentCare for fabricating exquisite and flawless prostheses. I wish them the very best in all their endeavors. ©

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