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The Truth About Healthy Teeth: Your Guide to at-Home Dental Care

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15 Myths and Facts About Cavities

Protect your teeth with the facts.

WebMD Feature

By [Wendy C. Fries](#)

Reviewed By [Brunilda Nazario, MD](#)

Only one of the following is true. Do you know which?

- Eating acidic things like lemons causes cavities.
- If you have a cavity, you'll definitely know it.
- Once you treat a cavity, the tooth decay stops.

To separate dental health myth from fact, WebMD talked with Kimberly A. Harms, DDS, an American Dental Association consumer advisor and past president of the Minnesota Dental Association. Check the myths and facts below to find out how cavities are caused, prevented, and treated.

1. Sugar Is the Prime Cause of Cavities

Myth *and* fact. In reality, it's the acid produced by bacteria in your mouth that causes cavities, says Harms. What the bacteria do, however, is eat carbohydrates -- and sugar is one of them. Rice, potatoes, bread, and fruits and vegetables are also carbohydrates.

When you eat anything with carbs, the bacteria become active and produce acid that then eats into your tooth.

"Once they do that, the bacteria now have a nice little hole to live in where your toothbrush and floss can't reach," Harms says. The bacteria continue to metabolize carbs, produce acids, and your cavity just keeps getting bigger.

Also, it's not the amount of carbohydrates you eat that causes tooth decay, but the length of time your teeth are exposed. If you eat a lot of carbs for lunch, that's one big exposure. But if you spend the day sipping sugary drinks, that's continuous exposure -- and much more dangerous for your teeth.

"We have a saying," Harms tells WebMD. "Sip all day and get decay."

2. Exposure to Acidic Foods Like Lemons Causes Tooth Decay

Fact. Acidic foods such as lemons, citrus juices, or soft drinks don't cause cavities, but they may be putting your enamel in danger.

“Acids can cause erosion of the tooth-protecting enamel,” says Harms, “weakening the tooth. If you lose the enamel’s protection and expose the underlying dentin, your tooth is now more prone to decay.”

3. Kids Are a Lot More Likely to Get Cavities Than Adults

Myth. With the help of sealants, fluoridated water, and preventative care, “we’ve actually cut decay in school-aged children by half in the last 20 years,” says Harms.

However, there’s been an increase in cavities in senior citizens “because they have some unique circumstances,” according to Harms. Some medications dry out the mouth, for example, reducing saliva. Saliva is vital in fighting tooth decay because it helps neutralize acids, has a disinfectant quality, washes away bacteria, and helps prevent food from sticking to your teeth.

4. Aspirin Placed Next to a Tooth Will Help a Toothache

Myth. Swallowing aspirin is what helps reduce toothache pain. Since aspirin is acidic, placing it beside the tooth can actually burn your gum tissue, causing an abscess. “So don’t do it,” says Harms. “Always swallow the aspirin!”

5. All Fillings Eventually Need Replacing

Myth. An amalgam or composite filling needs to be replaced if it breaks down or a cavity forms around it, or if the tooth fractures, Harms tells WebMD. If none of those problems occur, you can keep the same filling for life.

“Fillings do have a life expectancy,” says Harms, but it depends on things like tooth wear and oral hygiene habits. “If you brush your teeth twice daily with a fluoridated toothpaste, and floss or use an interdental cleaner once a day,” you’ll have less tooth decay and your fillings may last longer, she says.

6. If You Have a Cavity, You’ll Know It

Myth. “That’s a big, big bad myth,” says Harms. Mild tooth decay doesn’t cause symptoms. The pain we associate with cavities comes when tooth decay is more advanced and causes damage to the nerve.

Allowing tooth decay to advance can “lead to much more expensive procedures, like root canals,” Harms says. That’s why regular dental checkups are so important.

Also, once a cavity starts, it doesn’t repair itself. A cavity “will always grow once you get to a point where you can’t clean it out any longer.” Once decay gets into the dentin of the tooth -- below the enamel -- it just continues to grow.

7. Once a Tooth Is Treated, the Decaying Stops

Fact. “You can get decay later on in other areas of the tooth, but the particular decay that was taken out is gone.”

Once you get a cavity filled -- and if you maintain good brushing and flossing techniques -- you typically won’t get decay in that spot again.

Harms adds one caveat: “Sometimes a filling gets old and the margins where it meets the tooth begin to break down or pull away, and because you can’t reach it to clean it out, bacteria can get in there and decay can begin again.”

8. Cavities Are More Likely Between Teeth

Fact. “Anywhere bacteria can hide and you can’t or aren’t able to reach with a toothbrush or floss is a likely place

for decay,” Harms says. The deep grooves on the back of your front teeth are a good place for tooth decay, for example. “And yes it can happen between teeth because the toothbrush won’t get in there and a lot of people have trouble flossing.”

9. Gaps in Teeth Encourage Cavities

Fact. If you have a small gap between your teeth and can’t clean it, you’re more likely to develop tooth decay there.

“Bigger gaps are easier to keep clean,” says Harms, and as long as they are free of bacteria, big gaps are less likely to develop tooth decay.

10. Chips and Cracks in Teeth Lead to Decay

Fact. If cracks and chips create a hiding place for bacteria, a spot where your toothbrush can’t reach, those areas are more prone to tooth decay.

“Lately we’re seeing more and more cracks in teeth because people are grinding,” Harms says. “Stress, worries about the economy, it makes some people grind their teeth more. ... Stress can play an important role in tooth health.”

11. Sensitivity in Teeth Means You Have Decay

Myth. Tooth sensitivity could just mean you have hypersensitive teeth, or gum recession has exposed some root surface.

You could also have a cracked or broken tooth or could need a root canal. “There are many things, including decay, that could lead to sensitive teeth,” Harms says.

12. Cavities Are the Prime Reason for Root Canals

Myth. You need a root canal if the nerve inside a tooth is damaged. Untreated cavities may eventually lead to nerve damage, but there other causes, too.

“Cracks, fractures, or other types of trauma to the tooth can also cause nerve damage,” Harms says. In many cases “clenching and grinding can traumatize the tooth severely enough to need root canal therapy.”

13. Clenching and Grinding Leads to Cavities

Myth and sometimes fact. “Clenching and grinding is one of the most destructive things you can do to your teeth,” says Harms. With normal chewing, teeth touch for mere milliseconds, suffering very little stress. But clenching and grinding puts tremendous pressure on your teeth for extended periods.

That strain “can eventually cause damage and cracks and fractures of your teeth,” says Harms. If those fractures expose the weaker dentin, tooth decay can form at a faster rate. “Typically grinding and clenching lead to the need for crowns to restore the fractured tooth or root canal therapy to treat the traumatized nerve.”

14. You Don’t Need to Worry About Cavities in Baby Teeth

Myth. Baby teeth hold the space for permanent teeth. “If cavities are left untreated in baby teeth, they can develop into serious pain and abscesses.

Occasionally the infection can spread to other areas of the body and in rare occasions can even result in death,” says Harms.

15. Brushing and Flossing Is the Best Way to Prevent Cavities

Fact. “Absolutely! Prevention is the key,” Harms tells WebMD. You need to remove bacteria from teeth by flossing and brushing twice a day with a fluoridated toothpaste. If bacteria are removed daily from every area of your tooth, “you won’t get cavities,” promises Harms.

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10 Toothbrushing Mistakes

WebMD Feature

By [Kathleen Doheny](#)

Reviewed By [Brunilda Nazario, MD](#)

Toothbrushing is such an ingrained habit, few people think twice about it. But as with any habit, you can get sloppy, and that can lead to cavities and gum disease.

Here, dentists and oral health experts point out 10 common toothbrushing mistakes and how to fix them.

Toothbrushing Mistake No. 1: Not Using the Right Toothbrush

Consider the size of your mouth when picking a toothbrush, says Richard H. Price, DMD, the consumer advisor for the American Dental Association. “If you are straining to open wide enough to let the brush in, the brush is probably too big,” he says.

“The handle has to be comfortable,” he says. It should feel as comfortable as holding a fork when you eat.

“The more comfortable it is in your mouth and your hand, then the more likely you will use it and use it properly,” he says.

Which is the better toothbrush: Electric or manual?

“It’s an individual preference,” says Michael Sesemann, DDS, president of the American Academy of Cosmetic Dentistry and an Omaha dentist. “A person who brushes well with a manual will do as well as a person who brushes well with an electric.”

Price agrees. “It’s not the toothbrush, it’s the brusher.”

Toothbrushing Mistake No. 2: Not Picking the Right Bristle

Some toothbrushes have angled bristles, others straight. So is one type better? Dentists interviewed by WebMD say no.

“It’s more related to technique than the way the bristles come out,” says Sesemann.

What is important when buying a toothbrush? Bristles that are too stiff can aggravate the gums. The ADA recommends a soft-bristled brush.

“Bristles should be sturdy enough to remove plaque but not hard enough to damage [the teeth] when used properly,” Price says. He doesn’t recommend “natural” bristles such as those made from animal hair or boar

bristle.

Toothbrushing Mistake No. 3: Not Brushing Often Enough or Long Enough

Softly brushing your teeth at least twice a day is recommended, “Three times a day is best,” Sesemann says.

With too much time between brushings, he says, bacterial plaque will build up, boosting the risk of gum inflammation and other problems.

Brushing should last at least two minutes, Sesemann tells WebMD. Three minutes is even better, Price says.

Most people fall short of both time lines, Sesemann says. “It’s an arbitrary number, but it’s just so people take the time to clean all the surfaces.” He often recommends people divide the mouth into quadrants and spend 30 seconds a quadrant. Some toothbrushes include built-in timers.

To make the two minutes go faster, Sesemann says he “multitasks,” fitting in a little TV viewing as he brushes.

Toothbrushing Mistake No. 4: Brushing Too Often or Too Hard

While brushing your teeth three times a day is ideal, more may not be, Sesemann says. “More than four toothbrushings a day would begin to seem compulsive,” he says.

Excessive brushing could expose the root of the tooth to irritation, and that could in turn irritate the gums. Brushing vigorously can also erode tooth enamel. The trick is to brush very gently for two to three minutes.

Toothbrushing Mistake No. 5: Not Brushing Correctly

“Long horizontal strokes along the gumline can lead to abrasions,” says Sesemann. “Aim your bristles at the gumline at a 45-degree angle and do short strokes or vibrations.” Softly brush up and down your teeth, not across your teeth. The strokes should be vertical, not horizontal.

Be sure to brush outer and inner tooth surfaces, the chewing surfaces, and your tongue.

Toothbrushing Mistake No. 6: Starting in the Same Place Each Time

Many people start brushing the same part of their mouth over and over, dentists find.

“Start in a different place so that you don’t get ‘lazy’ in the same area of your mouth,” Price suggests. He reasons that by the time you get to the last quadrant of your mouth, you’re bored with brushing.

Toothbrushing Mistake No. 7: Skipping Inner Tooth Surfaces

Most people forget to brush the inner surfaces of teeth – the surface that your tongue presses against.

“The plaque you can’t see is just as important to remove as the plaque you can see,” Price says.

The most commonly skipped area, dentists say, is the inner surface of the front teeth.

Toothbrushing Mistake No. 8: Not Following Up With a Rinse

Bacteria can grow on an un-rinsed toothbrush. Then, the next time you brush your teeth, you may actually put old bacteria back in your mouth, says Laurence Rifkin, DDS, a dentist in Beverly Hills, Calif.

Rinsing the toothbrush after you brush will help remove any leftover toothpaste, too.

Toothbrushing Mistake No. 9: Not Letting the Toothbrush Dry

“If you have a toothbrush that’s perpetually moist, it will cultivate more bacteria,” Sesemann says.

“if the bristles stay soggy, you can misshape them as you use the brush,” Price says. “Or it might be a breeding ground for bacteria.”

It’s a good idea to shake out the moisture, then recap it with a cap that allows air in, he says.

Toothbrushing Mistake No. 10: Not Changing the Toothbrush Often Enough

The American Dental Association recommends a new brush every three or four months, or even sooner if the bristles look frayed.

But rather than go by a strict timeline, he says a visual inspection of the bristles is better. “Once the bristles lose their normal flexibility and start to break apart, change your toothbrush,” he says.

“Look more at the state of the bristles than the time period,” he says.

Some brushes have colored indicators that alert you when they need replacing, Price says.

Teeth Whitening Safety Tips

WebMD Medical Reference

By [Kathleen Doheny](#)

Reviewed By [Brunilda Nazario, MD](#)

Dazzling smiles seem to be within everyone’s reach, thanks to the booming teeth whitening business. From over-the-counter whitening strips to dentist office professional treatments, there seems to be no reason to put up with stained or darkening teeth.

Side effects aren’t common when these products are used as directed, but can occur. Before you embark on a do-it-yourself whitening regimen, here are some teeth whitening safety tips to keep your mouth and gums healthy.

See Your Dentist First

Get a professional cleaning and mouth exam, even if you decide to whiten your teeth at home using over-the-counter strips or gels. It could be that all you need is a thorough cleaning to restore your teeth’s sparkling good looks.

The exam can also detect any cavities. Getting the cavity treated first is crucial to keep teeth whitening safe.

Your dentist will assess the health of your gums. If they are inflamed, it’s wise to postpone the whitening.

Ask your dentist for advice about which over-the-counter system to use. Ask your dentist how much lightening you might expect. Teeth do darken with age, and the range of color varies from person to person.

Shop Wisely for Teeth Whitening Products

At-home teeth whitening products contain peroxides, typically carbamide peroxide, in various concentrations -- often 10% to 20% or so.

Choose a product with a mid-range bleaching agent -- not the lowest concentration and not the highest. If you tolerate it well but aren't getting the lightening effect you want, you can choose a higher concentration.

Some home teeth whitening products have the ADA Seal of Acceptance.

Follow Directions to the Letter

Leaving the strips or gels on longer than advised can irritate the gums. More isn't better and could lead to problems.

For instance, many over-the-counter teeth whitening strips suggest using for 30 minutes a day for about two weeks. Using longer can increase the risk of gum inflammations and later problems.

After the teeth whitening session, avoid acidic beverages such as soda or sports drinks for a couple of hours to protect your teeth.

Be Realistic

To be on the safe side, pregnant women or nursing mothers should postpone teeth whitening.

Crowns won't whiten, as products caution. So if you have crowns that show when you smile, teeth whitening might produce an uneven appearance of color.

Be on the Lookout for Sensitive Teeth

Mild and temporary tooth sensitivity can occur with many teeth whitening products. If inflammation or sensitivity are bothersome, discontinue the treatment and speak with your dentist.

If the trays don't fit well, they can irritate the gums. If you notice that effect, it's also wise to stop the teeth whitening product.

If your teeth and gums are in good shape, sensitivity is less likely to be an issue.

Don't Become a Whitening Addict

With the affordability and variety of do-it-yourself teeth whitening products, some consumers think more is better.

How much is too much? After following the directions for whitening, and getting a good result, a once a month preventive or touch up session is usually enough.

When your teeth reach a realistic shade, you only need to repeat the multiple bleaching sessions about twice a year or less.

5 Habits That Lead to Plaque on Your Teeth

WebMD Feature

By [Matthew Hoffman, MD](#)

Reviewed By [Brunilda Nazario, MD](#)

Plaque. Since childhood, we've been trained to resist that dreaded enemy of teeth. Regular brushing and flossing are sure bets for dental health. What else could you be doing -- or avoiding -- to keep plaque off your knockout smile?

"Keeping plaque off your teeth isn't complicated, but consistency is key," says Richard Price, DMD, spokesman for the American Dental Association. "Good habits make for healthy teeth -- for most people, it's that simple," Price tells WebMD.

What Is Tooth Plaque?

Plaque is a sticky mix of bacteria and the substances they secrete. Bacteria produce adhesive chemicals called mucopolysaccharides. The bacteria then live in this film on teeth, called a biofilm.

At first, this slimy layer is fragile and easily removed by tooth brushing. "Think of the film on a fish tank wall. It's easy to wipe off with a washcloth, if you're vigilant," says Price.

And if you're not? The bacteria in tooth plaque are free to release acids that damage tooth enamel. Regular acid assaults on enamel can wear holes in teeth, commonly called cavities.

If left alone, plaque buildup also gradually hardens, creating tartar or calculus on your teeth.

"Tartar is petrified plaque," Price tells WebMD. "Once it's there, you need a dentist's help...tartar can't be brushed off." Tartar above the gum line also contributes to gingivitis, or gum disease.

The secrets to avoiding plaque buildup aren't so secret. You've probably been hearing most of them since before you lost your baby teeth. But bad habits have a way of sneaking up on us. Make sure you're pushing back against plaque by avoiding these five bad habits for tooth health.

Plaque Habit No. 1: Not Brushing Regularly

No one else might notice if you don't brush your teeth twice a day, every day. But your teeth will.

"Plaque is a little like bees in the summertime," offers Price. "One or two won't really bother you, but if you let them build a beehive in the backyard, you've got a problem," he tells WebMD.

Brush your teeth gently twice a day, using a fluoride-containing toothpaste. The exact technique isn't so important as concentrating to make sure you're softly brushing all the surfaces of your teeth.

Plaque Habit No. 2: Not Flossing Daily

Brushing doesn't reach the spaces between teeth, but plaque does. A simple daily flossing between teeth clears away plaque before it can cause damage.

"Flossing also cleans plaque at the gum line, another area that brushing doesn't reach," says Price. If left alone, plaque past the gum line can lead to periodontal disease.

If you just can't stand flossing your teeth, consider using one of the many other ADA-approved products to clean between your teeth daily. They're available in any supermarket or drugstore; ask your dentist if you're not sure

which one to use.

Plaque Habit No. 3: Avoiding the Dentist

Even if you brush and floss your teeth daily, you'll miss some plaque. Over time, that plaque hardens into tartar that needs to be removed at your dentist's office. Yet more than a third of people surveyed haven't seen their dentist in more than a year.

"Even dentists don't like to go to the dentist," jokes Price. But studies show that in general, people who neglect regular dentist visits get more cavities and have a higher chance of losing their teeth.

Once a year teeth cleanings are considered the minimum. Twice a year teeth cleanings may be better for many people. "Most dentists recommend twice a year cleanings or more," according to Price.

Plaque Habit No. 4: Neglecting Nature's Toothbrushes

Long before toothbrushes and fluoride toothpaste existed, certain foods played a role in keeping plaque off our teeth.

"Eating crunchy vegetables or fruits with the skin on can scrub off plaque," Price tells WebMD. Carrots, apples, cucumbers, and many other raw fruits and vegetables are teeth-friendly, despite the sugar they contain.

In addition, eating a diet high in fruits and vegetables and low in processed foods helps protect you from obesity, heart disease, and cancer.

Plaque Habit No. 5: Indulging Your Sweet Tooth

Bacteria love simple carbohydrates like sugar. Eating candy or drinking sugary soft drinks lets sugar stick to our teeth, giving bacteria something to munch on. As the bacteria create a film of plaque, they digest sugar into acid, which damages teeth.

"All sugary candy, and most junk food in general, contribute to plaque formation," warns Price. "High-sugar foods or drinks that are also soft or sticky are especially problematic. ... Sugary soft drinks might be about the worst thing you can put on your teeth," he tells WebMD.

Avoiding these five bad habits can help you keep plaque in check (and keep your teeth). There are other steps you can consider to prevent plaque, tartar, and cavities, too:

- Sealants. The pits and fissures on molars can be difficult to keep clean in some people, even with good dental care. Dental sealants are a clear plastic coating that covers the tooth surface, barring bacteria and acid from entering. Sealants are safe and effective in blocking plaque and preventing tooth decay.
- Mouth rinse. Some people may benefit from adding a therapeutic mouth rinse to their daily routine. Several ADA-approved mouth rinses with fluoride have been shown to help prevent plaque and tooth decay. No mouth rinse can substitute for brushing and flossing, however.

"No one's teeth can stay plaque-free 24 hours a day, it's just not possible," says Price. But good habits over a lifetime will help you beat back plaque and save your smile.

Flossing Teeth for Dummies: No More Excuses!

People have all sorts of excuses for not flossing their teeth. But dentists say there are easy

ways to floss that address every excuse.

WebMD Feature

By David Freeman

Reviewed By [Brunilda Nazario, MD](#)

Do you floss? Or, like many people, do you always seem to find a reason not to?

A 2008 survey found that only 49% of Americans floss daily, and 10% never floss. That's most unfortunate, dentists say, because flossing is even more important than brushing when it comes to preventing periodontal (gum) disease and tooth loss.

"If you were stuck on a desert island and a boat could bring only one thing, you'd want it to bring floss," says Samuel B. Low, DDS, professor of periodontology at the University of Florida College of Dentistry in Gainesville, and president of the American Academy of Periodontology. "But I'm convinced that the only time some of my patients floss is an hour before showing up in my office."

Dentists say they hear all sorts of excuses for not flossing. Yet they insist that simple workarounds exist for just about all:

Excuse #1: Food doesn't get caught between my teeth, so I don't need to floss.

Flossing isn't so much about removing food debris as it is about removing dental plaque, the complex bacterial ecosystem that forms on tooth surfaces between cleanings. Plaque is what causes tooth decay, inflamed gums (gingivitis), periodontal disease -- and, eventually, tooth loss. Flossing or using an interdental cleaner is the only effective way to remove plaque between teeth.

Excuse #2. I don't know how to floss.

Flossing isn't easy. Low calls it "the most difficult personal grooming activity there is." But practice makes perfect.

Here's how the American Dental Association describes the process:

- Start with about 18 inches of floss. Wrap most of it around the middle finger of one hand, the rest around the other middle finger.
- Grasp the floss tightly between your thumbs and forefingers, and use a gentle shoeshine motion to guide it between teeth.
- When the floss reaches the gum line, form a C shape to follow the contours of the tooth.
- Hold the floss firmly against the tooth, and move the floss gently up and down.
- Repeat with the other tooth, and then repeat the entire process with the rest of your teeth ("unspooling" fresh sections of floss as you go along).

Don't forget to floss the backs of your last molars. "By far, most gum disease and most decay occurs in the back teeth," Low says.

Excuse #3. I'm not coordinated enough to floss.

Many tooth-cleaning options exist for people whose manual dexterity is compromised by poor coordination, hand pain, paralysis, and amputations -- or simply by fingers that are too big to fit inside the mouth.

One option is to use floss holders. These disposable plastic Y-shaped devices (some equipped with a spool of floss) hold a span of floss between two prongs to allow one-handed use.

Flossing Teeth for Dummies: No More Excuses!

People have all sorts of excuses for not flossing their teeth. But dentists say there are easy ways to floss that address every excuse.

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Another option is to forgo floss and clean between teeth using disposable toothpick-like dental stimulators (Stim-U-Dents, Soft-Picks, and so on); narrow spiral brushes (interproximal brushes); or the conical rubber nubs (tip stimulators) found at the end of many toothbrushes or mounted on their own handles.

Excuse #4. I don't have time to floss.

Effective flossing does take a while -- once a day for a "good three to five minutes" according to Low. But even 60 seconds of flossing is of enormous benefit. As with exercise, bathing, and other daily activities, the key is to make flossing a habit.

"If you make time for your personal hygiene, you can find time to make for flossing," says Maria Lopez Howell, DDS, a dentist in private practice in San Antonio.

She recommends keeping floss in plain view, alongside your toothbrush and toothpaste. If you're too tired to floss before bed, floss in the morning or afternoon. Or keep floss on hand and use it when you find the time.

Mark S. Wolff, DDS, PhD, chairman of the department of cardiology and preventive medicine at New York University School of Dentistry in New York City, keeps a stash of dental stimulators in his car. "I use them when I am stuck in traffic," he says.

Excuse #5. It hurts when I floss.

If flossing causes gum pain or bleeding, odds are you have gingivitis or gum disease -- precisely the conditions for which flossing is beneficial.

"Flossing should not be a painful experience," Wolff says. "But stopping flossing because of bleeding [or pain] is just the opposite of what you should be doing." The good news? With daily brushing and flossing, gum pain and bleeding should stop within a week or two. If either persists, see a dentist.

Excuse #6. My teeth are spaced too close together to floss.

If unwaxed floss doesn't work for your teeth, you might try waxed floss or floss made of superslippery polytetrafluoroethylene (sold under the brand name Glide).

If the spacing between your teeth varies (or if you have significant gum recession), yarn-like "superfloss" may be a good bet. It stretches thin for narrow spaces and fluffs out to clean between teeth that are more widely spaced.

If you're having trouble finding a workable floss or interdental cleaner on your own, your dentist should be able to offer guidance -- and may even offer free samples.

Excuse #7. The floss keeps shredding.

In many cases, broken or fraying floss is caused by a cavity or a problem with dental work -- often a broken or poorly fabricated filling or crown. Consult your dentist.

Excuse #8. I have dental work that makes flossing impossible.

Try floss threaders. These monofilament loops make it easy to position floss around dental work.

Electric Toothbrushes: Are They for You?

Power and sonic toothbrushes have come a long way.

WebMD Feature

By [Heather Hatfield](#)

Reviewed By [Brunilda Nazario, MD](#)

Elizabeth Turkenkopf has been using an electric toothbrush for more than seven years, and has been impressed with the results -- cleaner teeth and minimal plaque build-up, which translates into less scraping at her regular dental check-ups.

She hasn't had a cavity since she made the switch from a hand-powered toothbrush, and her gums are in good shape. Although she can't say for sure her pristine oral health is the result of her electric toothbrush, she's not messing with success.

"Power toothbrushes have come a long way," says Terrence Griffin, DMD, an associate professor and chair of the department of periodontology at Tufts University School of Dental Medicine in Boston. "While the average patient can do well with either a manual toothbrush or a power toothbrush, there are some advantages to the powered that might give it an edge."

Here, dental experts explain how the new technology in electric and sonic toothbrushes can help keep your teeth clean.

Power Toothbrushes: Electric and Sonic

Electric toothbrushes were first introduced in the U.S. in 1960 by a company called Squibb, and marketed under the name Broxodent. Today, there are dozens of different brands available, with a myriad of features, including rechargeable batteries, compact designs, and bristles built for optimal cleaning.

The two main types of power toothbrushes are electric and sonic -- the difference between the two really comes down to numbers.

Electric Toothbrushes: With 3,000 to 7,500 rotating motions a minute, electric toothbrushes are powered to replicate the motion of your hand -- doing the muscle work for you. The bristles on these toothbrushes either rotate or move back and forth to help remove plaque and reduce gingivitis.

Sonic Toothbrushes: Offering 30,000 to 40,000 strokes per minute, sonic toothbrushes rotate in a back and forth vibrating motion. The rapid motion is the sonic toothbrushes claim to fame, but ultimately, it also aims to remove plaque and keep teeth and gums healthy and clean.

For a little bit of perspective, the old-fashioned way of brushing your teeth rings in about 300 strokes per minute -- if you brush properly. So over the two-minute recommended brushing time, your teeth are hit with 600 strokes ...

a far cry from the thousands you might get with the high-tech variety.

Benefits of Power Toothbrushes

“With new technology, power toothbrushes have several advantages over the hand-powered kind,” Griffin says.

- Several studies have indicated that sonic and electric toothbrushes have an edge on the kinds you hold in your hand in that they are better at reducing plaque and gingivitis, both in the short and long-term.

For example, a 2003 Cochrane Oral Health Group study concluded that, compared to hand-powered toothbrushing, electric toothbrushes with rotational-oscillation action result in less plaque and fewer bouts of gingivitis. But the study also found that when used properly, manual and powered brushes can be equally effective.

- “Electric or sonic toothbrushes may be easier for people with dexterity problems, like arthritis, to handle and control, resulting in cleaner teeth and gums,” says Gary D. Hack, DDS, an associate professor at the University of Maryland Dental School in Baltimore.
- Sonic and electric toothbrushes could also help ensure people brush regularly by eliminating the “work” of hand-held brushing.

The one drawback to power toothbrushing may be cost, Hack says. Most models range from about \$15 to more than \$100; old-fashioned toothbrushes cost just a few dollars.

Practice the Best Toothbrushing Techniques

No matter your toothbrush preference, good oral health is a must.

“You need to brush a minimum of twice a day, for about two minutes each time, every morning and at night before you go to bed to avoid food sitting on your teeth and gums for long periods of time,” says Griffin.

Quality is as important as quantity when it comes to brushing. Hack offers these tips for good toothbrushing technique:

- Angle the brush at about a 45 degree angle up onto the tooth and into gum line.
- Use a soft-bristled brush, and use a gentle brushing motion.
- Don't over scrub or use too much pressure.
- Make sure you brush every tooth and cranny.

“The most important thing is to brush effectively -- whether it's with a hand or power toothbrush,” Hack says. “This will help you avoid periodontal disease, minimize gum and bone loss, and keep your mouth healthy and clean.”

Floss Your Teeth and Do It Right

“Most people floss by just snapping the thread through the gaps in between their teeth,” says Griffin. “While it might seem like it's helping, really what you are doing is causing friction on your gums and teeth.”

Talk to your dentist about how to floss properly, such as using only a small amount of floss between your fingers, using a controlled motion, and going slowly.

Another suggestion from Griffin is to use a rubber tip to clean around the gums and in between teeth instead of flossing. If used with a proper technique, in combination with a power toothbrush, his experience is that this one-two punch will keep your mouth high on sparkle and low on plaque.

Finally, both experts recommend that you see your dentist every six months for regular check-ups and cleanings.

Your dentist can help you maintain good oral health techniques at home, and keep your mouth healthy.

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Tooth Enamel Erosion

WebMD Medical Reference

By [Katherine Kam](#)

Reviewed By [Brunilda Nazario, MD](#)

Tooth enamel is the strongest substance in the human body. This semi-translucent, hard, outer layer of the teeth has an important job: protecting teeth from the daily wear and tear of biting and chewing, as well as temperature extremes from hot or cold foods and drinks. Enamel also guards teeth against the erosive effects of acids and chemicals.

Enamel covers the dentin, a part of the tooth that is not as dense as enamel. When enamel erodes, the dentin loses some of its protection. Then microscopic tubes inside the dentin allow hot, cold, or sweet foods to stimulate nerves within the tooth. As a result, you may notice that your teeth have become painfully sensitive to hot or cold foods and drinks and sweets.

What Causes Tooth Enamel Erosion?

Many factors can contribute to tooth enamel loss:

- Consumption of too many soft drinks or fruit drinks, along with poor dental hygiene. Bacteria thrive on sugar and produce high acid levels that can eat away at enamel.
- Eating lots of sour foods or candies. Acidic foods can erode tooth enamel.
- Dry mouth or low saliva volume. Saliva helps prevent decay by neutralizing acids and washing away leftover food in your mouth.
- Acid reflux disease (GERD), or heartburn. Acid reflux brings stomach acids up to the mouth, where the acids can erode enamel.
- Bulimia, alcoholism, or binge drinking, in which frequent vomiting exposes teeth to stomach acids.
- Certain drugs or supplements with high acid content, such as aspirin or vitamin C, can also erode enamel.
- Friction and wear and tear – from brushing teeth too vigorously or grinding teeth, can erode enamel.

What Are the Symptoms of Tooth Enamel Erosion?

When tooth enamel erodes, you may have some of these symptoms:

- Sensitive teeth or tooth pain when eating with hot, cold, or sweet foods or drinks
- Rough or irregular edges on the teeth, which can become cracked or chipped when enamel is lost
- Smooth, shiny surfaces on the teeth -- enamel erosion causes mineral loss on these areas
- Yellowed teeth from thinned enamel
- Cupping, or dents, that show up on the biting or chewing surfaces of the teeth
- When tooth enamel erodes, teeth are more vulnerable to cavities and decay.

How Can You Protect Tooth Enamel From Erosion?

Good dental care at home and at the dentist's office can help prevent tooth enamel erosion. Here are 12 tips that can help:

1. Cut down on acidic drinks and foods, such as carbonated drinks and citrus fruits and juices. If you do drink them, do so at mealtimes to minimize their effects on the enamel.
2. Switch to modified products, such as low-acid orange juice.
3. Rinse your mouth with water right after having acidic foods or drinks.
4. Drink sodas and fruit juices with a straw, which helps acids to bypass the teeth. Don't swish acidic drinks around in your mouth.
5. Finish a meal with a glass of milk or piece of cheese to neutralize acids.
6. Chew sugar-free gum with xylitol, which reduces acids from foods and drinks. Chewing gum also increases saliva flow, which helps prevent enamel erosion because saliva strengthens teeth with key minerals.
7. Drink more water during the day if you have dry mouth or low saliva problems.
8. Use a soft toothbrush and avoid brushing too aggressively.
9. Wait for at least one hour to brush teeth after it has been exposed to acids in food or drinks. Acid leaves the enamel softened and more prone to erosion during brushing.
10. Use fluoride toothpaste to strengthen your teeth.
11. Ask your dentist about using commercial toothpastes to reduce tooth sensitivity or to protect against acid erosion.
12. Get treatment for disorders that can bring acid into the mouth, such as bulimia, alcoholism or GERD.

Can Damaged Tooth Enamel Be Repaired?

There are several ways to fix damaged tooth enamel. The right approach depends on your particular problem with enamel loss.

Tooth bonding can protect a tooth with enamel erosion and improve the appearance of teeth that are worn down, chipped, or discolored.

If enamel loss is significant, a dentist may cover the tooth with a crown to protect it from further damage.

Dental Glossary: Definitions

WebMD Medical Reference

By [Wendy C. Fries](#)

Reviewed By [Brunilda Nazario, MD](#)

Abscess. A swollen, inflamed, pus-filled area around a tooth, soft tissue, or bone. Usually caused by infection.

Amalgam. A common tooth filling made of a mix of silver, mercury, and other metals, generally used for the back teeth.

Bruxism. Tooth grinding or clenching, often stress-related and done at night.

Caries. The medical term for tooth decay or cavities.

Cavity. A soft, decayed area in a tooth.

Composite. A tooth-colored filling made of resin and quartz.

Crown (or cap). A dental appliance that covers a tooth to restore it to its normal shape and size. Crowns can be made of porcelain or metal.

Dentin. An inner layer of the tooth, found under the enamel. Dentin is one of the four major components of teeth.

Enamel. The outer part of the tooth. Enamel is the hard, calcified tissue that covers and protects the dentin.

Filling. A substance, like an amalgam or composite, that's inserted into a cleaned and prepared hole inside a tooth.

Gingivitis. An inflammation of the gums caused by plaque and/or tarter. If untreated, gingivitis can lead to periodontitis, a destructive dental disease.

Impacted tooth. A tooth that's still completely or partially beneath the gumline. Impacted teeth are generally pressed against another tooth, bone, or soft tissue. Wisdom teeth are often impacted.

Orthodontist. A dentist who specializes in caring for misaligned teeth with braces, retainers, and other dental appliances.

Periodontal. Care relating to the tissues and bones that support the teeth.

Periodontitis. Infection of the tissue that support the teeth. Advanced gum disease.

Plaque. Soft but sticky, plaque is made up of bacteria and accumulates on teeth. If left untreated it can lead to tooth decay and gum disease.

Root canal. The process of cleaning out and removing the nerves and blood vessels from inside the root of a tooth.

Tartar (also called calculus). A hard plaque that creates a rough surface on teeth, encouraging the accumulation of more plaque. Tartar can eventually lead to gum problems.

TMJ (temporomandibular joint dysfunction). TMJ refers to any jaw problems related to the temporomandibular joint, the joint that connects your lower jaw to your skull.
