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January 2017 Dental Newsletter

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DR. MARY B.
ALEXANDER

DDS, DMS
(PERIODONTIST)

“Dentistry is not expensive. Neglect is”

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Meet Our Doctor

Dr. Mary Alexander, Periodontist, obtained a Bachelor of Science degree in Biology from the University of South Carolina and continued her education in dentistry at the University of Maryland School of Dental Surgery where she received her DDS degree.

After obtaining her DDS degree Dr. Alexander spent one year at the Veteran's Administration Hospital, in general practice residency focusing her training in anxiety patient management. She then attended Harvard University and earned her clinical specialty in periodontics and a doctorate in medical science. Her doctoral research was focused in the study of bone function and metabolic disease of the bone.

Dr. Alexander received extensive training in dental implantology, periodontal plastic surgery, bone regenerative procedures and sedation dentistry. All aspects of Dr. Alexander's training are incorporated in her periodontal practice assuring patient's thorough and comprehensive periodontal treatment.

Healthy teeth and gums

Inflammation and receding gum line begins with moderate disease

Advanced disease shows severe gum recession



GUM DISEASE SYMPTOMS

Gum disease is not painful and generally symptomless so it is easy to ignore and consider it a minor problem. If you don't address the problem, conditions can occur like gum abscesses, bad breath, wobbly teeth and eventually tooth loss. A generalized chronic infection can spread to other parts of your body and affect your overall health.

Gum disease is often silent, meaning symptoms may not appear until an advanced stage of the disease.

Don't ignore these symptoms



Tender Swollen Gums



Gums Bleeding when you brush and floss



Chronic bad breath



Tooth Sensitivity



Changes in bite



Gum recession



Loose teeth



Tooth Loss



Research

has shown that periodontal disease is associated with several other diseases. For a long time, it was thought that bacteria were the factor that linked periodontal disease to other disease in the body; however, more recent research demonstrates that inflammation may be responsible for the association. Therefore, treating inflammation may not only help manage periodontal diseases but may also help with the management of other chronic inflammatory conditions.

➤ DIABETES

➤ HEART DISEASE

➤ OTHER DISEASE

Got questions about Periodontal dentistry. We have answers.

Our Periodontist Dr. Alexander explains about the periodontal disease with these simple answers. We've provided answers to the most commonly asked. If you have a question that is not addressed here, please post in our blog or email us. We look forward to resolving all your dental concerns.

1. Who is a Periodontist?

A periodontist is a doctor that specifically treats issues affecting the **gums and the bones of the mouth**. These kinds of issues are often referred to together as periodontitis, or periodontal disease. These specialists attend regular dental school and then receive an additional three years of schooling to develop their expertise in these specific features of the mouth. **Our Periodontist Dr. Alexander DDS, DMS received extensive training in dental implantology, periodontal plastic surgery, bone regenerative procedures and sedation dentistry.**

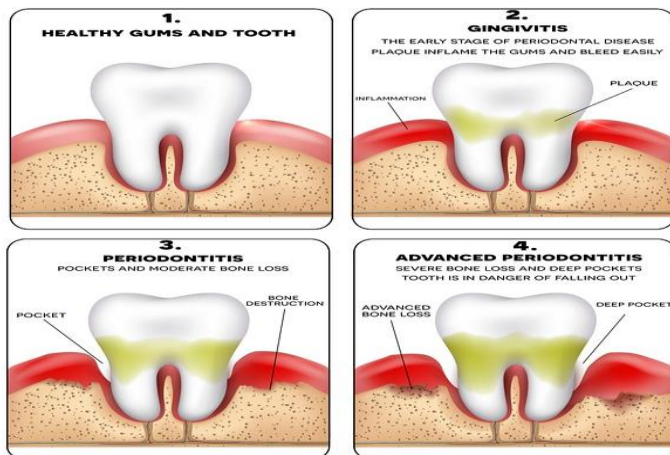
2. What is Periodontal Disease?

Periodontal or gum disease is a bacterial infection causing an inflammatory condition of the gum and boney support (periodontal tissues) surrounding the teeth.

The two most common periodontal diseases are:

- **Gingivitis** – infection and inflammation of the gum at the necks of the teeth.
- **Periodontitis** – infection and inflammation affecting the bone and tissues of the teeth.

3. How do I know if I have early gum disease (gingivitis) or late stage gum disease (Periodontitis)?



In the early stages of gum disease, the plaque that remains around the teeth harden into calculus (tartar). As plaque and calculus continue to build up, the gums begin to recede (pull away) from the teeth, and pockets form between the teeth and gums. At this stage, with treatment, it is fully reversible. As gum disease progresses, the gums recede farther, destroying bone and the periodontal ligament that surround the roots and attaches the gum

bone and to the roots. The affected teeth become loose and may need to be extracted. **Routine check-ups, cleanings and periodic measuring of the pockets around the teeth are necessary to monitor and prevent gum disease from progressing.**

4. What are the different forms of Periodontitis?

There are many different varieties of periodontal disease, all require immediate treatment by a periodontist to halt the progression and save the gum tissue and bone. Here are some of the most common types of periodontal disease:

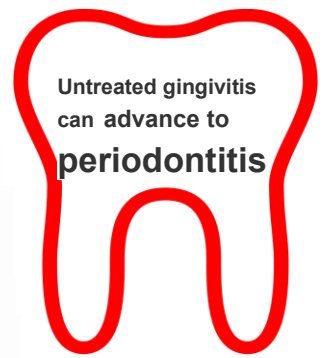
Gingivitis is the mildest form of periodontal disease and causes the gums to become red, swollen, and bleed easily.

Chronic periodontitis results in inflammation within the supporting tissues of the teeth and progressive loss of gum attachment and bone loss.

Aggressive periodontitis is a highly destructive form of periodontal disease that occurs in patients who are otherwise clinically healthy. This disease may occur around a few teeth or around all teeth and can include rapid loss of gum attachment and destruction of bone.

Periodontitis as a manifestation of systemic diseases. This form of periodontitis is associated with one of several systemic diseases, such as diabetes. Patients who have rare but specified blood diseases or genetic disorders frequently show signs of periodontal diseases.

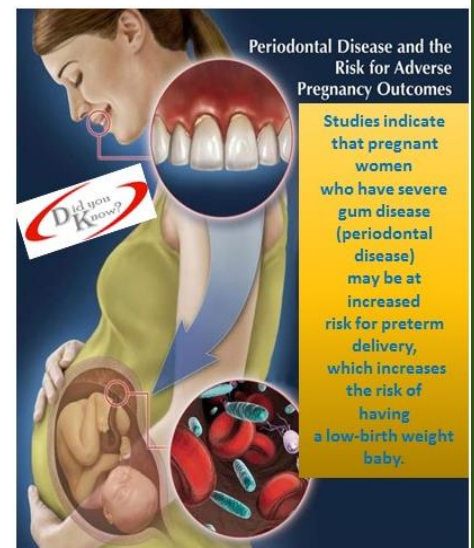
Necrotizing Periodontal Diseases are infections characterized by necrosis (death) of gingival tissues, periodontal ligament and bone. These lesions are most commonly associated with pain, bleeding, and a foul odor. Contributing factors can include emotional stress, tobacco use, and HIV infection.



5. How do I know if I have Periodontal Disease?

Periodontal disease is often painless and develops slowly and progressively. Sometimes it may develop quite rapidly. Unless you see your dentist for regular checkups, you may not realize you have periodontal disease until your gums and bone have been severely damaged to the point of tooth loss. Some common symptoms are:

- **Bleeding gums during brushing and flossing, Red, swollen, or tender gums, Receding gum line, Persistent bad breath and/or taste in mouth.**



6. What can I expect the first time I have a periodontal evaluation by my dentist or Periodontist?

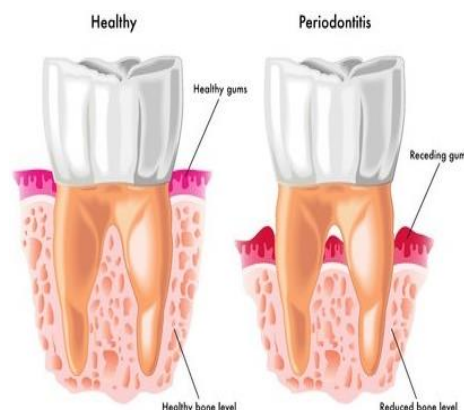
When you first visit our office, the periodontist will do a complete review of your medical and dental history. Our periodontist will examine your gums, check to see if there is any gum line recession, assess how your teeth fit together when you bite and check your teeth to see if any are loose. Your periodontist will also take a small measuring instrument and place it between your teeth and gums to determine the depth of those spaces, known as periodontal pockets. This helps your periodontist assess the health of your gums. Radiographs (x-rays) may be used to show the bone levels between your teeth to check for possible bone loss.

7. What does it mean to have receding gums? What can be done for this?

Receding gums, also known as gingival recession, is a condition in which the roots of the teeth become exposed, leading to a greater risk of decay and the eventual loss of teeth.

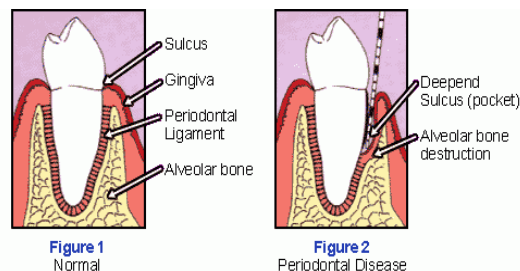
While the gum tissue may not grow back on its own, there are a few things one can do to *help prevent gums from receding further*. Among the suggestions are: Use an electric brush

- If using a manual brush, make sure to use soft bristles
- Use the proper brushing and flossing technique
- Consider re-attaching the muscle attachments so that they are not pulling down on the gums (frenectomy).
- Regular dental checkup will help to avoid periodontal disease.



8. What does it mean to have pockets when you check for gum disease?

- Your bone and gum tissue should fit snugly around your teeth like a turtleneck around your neck. When you have periodontal disease, this supporting gum and bone is destroyed, forming "pockets" around the teeth. Over time, these pockets become deeper, providing a larger space for bacteria to live. As bacteria develop around the teeth, they can accumulate and advance under the gum tissue. These deep pockets collect even more bacteria causing a periodontal infection, resulting in further bone and gum loss. Eventually, if too much bone is lost, the teeth will need to be extracted.



9. Could my periodontal disease be genetic?

Research has indicated that some people may be genetically susceptible to gum disease. Despite aggressive oral care habits, these people may be more likely to develop periodontal disease. Identifying these people with a genetic test before they even show signs of the disease and getting them into early intervention treatment may help them keep their teeth for a lifetime.

10. Can children be at risk for developing periodontal disease?

We often think of gum disease as a condition exclusive to adults, but this is not the case. Teenagers and even younger children are at risk for different forms of gum disease which may require a gum disease treatment for kids. A regular dental checkup is required for early prevention and care.



Gum Disease Myths

Knowing about and understanding gum disease is important, but it doesn't get talked about like cavities. Here are some myths you may have heard.

MYTH	FACT
Gum disease can always be cured.	This is the problem with gum disease. Gingivitis can be treated, but periodontal disease is permanent. With our Periodontist help you can keep the disease under control, the disease can be treated in many ways which can be discussed with your general dentist or periodontist.
Bad breath mean you have gum disease.	Not always. Bad breath can be caused by dry mouth, certain medications or other health issues. Certainly, persistent bad breath or a bad taste that lingers can be a sign of periodontal disease. Only your dentist can tell the difference.
Periodontist Visit is dread	We all want to avoid having a periodontal visit. When this is scheduled, gum disease has gotten advanced. Periodontists should not be a source of fear. They are highly trained and have diagnostic equipment and treatment techniques that can get gum disease under control.
Poor Oral Hygiene causes Gum disease	While it is true you need to brush and floss daily, poor oral hygiene is not the only factor that can lead to gum disease. Stress, tobacco use, genetics, diabetes and poor diet can all lead to gum disease.
Pregnant women always have bleeding gums	No, not true. Some ladies do. Bleeding gums can be prevented during pregnancy with a good professional cleaning.
There is no chance of gum disease if there are no cavities	It's a misleading information. Teeth need not to have a problem to have gum disease. Periodontal disease is painless in its earliest stages. Bleeding gums are a sign of gingivitis (early gum disease). Gingivitis needs to be treated early to stop the ravages of gum disease before your teeth are affected.
You always lose teeth with gum disease	This does not have to happen. That is why catching gum disease in its earliest stages is so important. Schedule a consultation with Dr.Alexander, Our Periodontist to have proper diagnosis and treatment of gum disease.

Yes, We have a Dental hygienists !

Who is a dental hygienist?

Dental hygienists are specially trained to work as part of the dental team to give care to patients. They have an important role in dental health care and provide necessary preventive dental procedures and help to treat gum disease. They also provide instruction on daily home care routines to help patients maintain their oral health.



Our Dental Hygienist

Maryam graduated from Howard community college with an Associate's degree in Dental Hygiene.

Does every practice have a dental hygienist?

Not all dental practices employ a dental hygienist, however, more offices are starting to see the importance of the dental hygienist's role in a patient's dental health.

Can a dental hygienist help prevent dental disease?

Yes, with the patient's help. It is very important to know preventing dental disease requires teamwork. The dental hygienist and patient work together to maintain a healthy mouth.

The dental hygienist has been trained to carefully remove hard deposits of tartar (or 'calculus') from the teeth and check for the health of the gums. He or she also works to educate the patient on a proper homecare routine while the patient agrees to implement that routine.

By talking to you about your diet, and recommending other preventive measures, the dental hygienist can help you keep to a routine that will slow down or prevent dental disease. Regular visits and advice will help build your confidence in keeping your mouth healthy.



What's happening at our office?

Please join us in welcoming



Wendy Diehl
Patient Coordinator for Orthodontics.

Wendy has a master's in Human Resource Management from University of Maryland and more than 2 years of experience as a patient coordinator.

Connie

Dental assistant

Connie has more than 18 years of experience in dental assisting with all phases of dentistry. She is very proficient and has extensive knowledge in dental assisting.



Heather
Patient Coordinator for orthodontics and Pediatric dentistry.

Heather has experience more than 10 years in dental field as a patient care coordinator.



hosted a training session for care credit for **staff conducted** by Care Credit contractor **Ms. Marcia** on January 5 '2017 at our office. We learned that Care Credit offers:

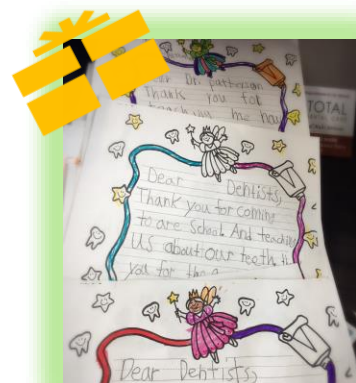
- Low monthly payments
- No upfront costs or prepayment penalties
- Low interest or no interest payment plans

Stop by to find out how care credit can help you pay for all your dental needs.

Our new
year gift from
William. B.
Gibbs
Elementary
school children.

They sent cute
thank you notes

for **Dr. Patterson** for her oral care
presentation at school.





The Tooth Fairy corner



The longer you let the remnants in your mouth, the greater the chance for tooth decay. It is the second most common disease in the United States is.



For Parents

Care don't share



Don't share utensils with your child or "clean" a pacifier by putting it in your mouth. You can transfer cavity-causing germs to your child.

Eat healthy

and drink fluoridated water



First dental visit

no later than age 1 year old

Use fluoride toothpaste



as soon as teeth come through the gums. When kids can brush their own teeth, have them brush

2 minutes



2 times per day

Seal out decay

Ask your dentist about applying dental sealants to chewing surfaces of teeth.



Find the Dental words

S D E C A Y Y B R

Y Y F Y L S A W Y

A V T R X C L T A

R T S I T N E D S

X W E E V M P S R

F W R X O A O Q I

S I B L A L C F N

A E A P F M E S S

Q R Q F M S S K E

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staff In the **Spotlight**

Sabrina, Position: Concierge

What I LOVE about Total Dental Care: I love how caring the Doctors are with the patients. And the team is like a family. The practice is so beautiful equipped with the latest technology machines. The office is paperless, not only does that help patients but also the environment.



Favorite part about my job: Helping patients in the reception area and attending their needs before they see the doctor.



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OUR TDC DENTISTS



MARY B. ALEXANDER
(PERIODONTIST)



ASHA NARENDRA
(GENERAL DENTIST)



SIVAKUMAR SREENIVASAN
(ORAL SURGEON)



COURTNY PATTERSON
(GENERAL DENTIST)



DUANE ERICKSON
(ORTHODONTIST)



BHAVANA MISTRY
(GENERAL DENTIST)



JOSEPHINE AMIGO
(PEDIATRIC DENTIST)



SROTALINA KHANNA,
(GENERAL DENTIST)



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Why choose us?

- Gentle Dentist and Caring staff
- Clean, safe and modern office.
- Help maximize insurance benefits
- Financing available, major credit cards accepted
- We help you feel comfortable during your visit
- Bilingual staff: English and Spanish

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