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ADA Comments on the Report: “A Costly Dental Destination”

The American Dental Association agrees with much of the report. “A Costly Dental Destination,” released on 2/28/12 by the Pew Center on the States, which points up the burden placed on already strained hospital emergency departments by patients needing dental care. The report validates what the ADA has been saying for years: Too many Americans face barriers that impede their ability to get dental care. People in pain often have no recourse other than seeking care in hospital emergency rooms. Most ER’s can treat only symptoms by dispensing antibiotics and pain medication, palliatives that provide only temporary relief, meaning that the problem will persist.

A study conducted last year by the South Carolina Dental Association showed that treatment for an abscessed tooth in a hospital emergency department— which in the majority of cases cannot cure the underlying problem— costs Medicaid on average \$236 while the

same problem treated by a private dentist— treatment that ends the problem —would cost the program \$107. With Medicaid funding for dental care already woefully inadequate in so many states, this is a waste of precious resources on ineffective treatment.

States can and must do more to address oral health disparities. The best strategy is to ensure proper preventive measures. Medicaid programs must be funded adequately to attract sufficient numbers of dentists so that program participants receive proper and regular care. Programs that help young children receive routine preventive care, whether in dental offices, pediatricians’ offices or schools, are critical. States must be serious about preventive measures like community water fluoridation and dental sealants programs.

Unfortunately, the Pew report misses the mark on some key points. Projections published in the *Journal of Dental Education* in 2009 estimate

that both the ratio of dentists to population and the net number of dentists will increase, not decrease, contrary to what the Pew report states. The idea of relegating patients with the kind of complex conditions

that lead them to seek treatment in hospital emergency departments to care by so-called “midlevel dental providers” is wrongheaded. Patients whose health has deteriorated

continued on reverse

News You Can Use

Common oral bacteria breaks into blood stream to infect organs.

Fusobacterium nucleatum, a common oral bacteria, acts like a common thief picking locks to let in itself and other bacteria.

Yiping Han Ph.D., professor of periodontics at Case Western Reserve School of Dental Medicine in Cleveland, discovered that the bacteria, one of hundreds in the mouth, can open a door in human blood vessels allowing itself and other bacteria to infiltrate the body and cause disease.

Dr. Han, a microbiologist, has studied *F. nucleatum* for more than a decade. She discovered *F. nucleatum* binds to endothelial receptors that trigger breakdown of intercellular junctures interlocking endothelial cells on the surface of blood vessels. The bond-breaking process is described in a December 2011 article in *Molecular Biology*: “*Fuso-*

bacterium nucleatum Adhesion FadA Binds Vascular Endothelial Cadherin and Alters Endothelial Integrity.”

The gram negative anaerobe’s presence has been uncovered in brain abscesses and in infection in the lungs, liver, spleen and joints. Dr. Han also found direct evidence linking the bacterium to preterm labor and fetal death, as *F. nucleatum* can cross the blood-brain and placental barriers that usually block disease causing agents.

When *F. nucleatum* invades the body through breaks in the mucous membranes in the mouth, due to injuries or periodontal disease, it may trigger an increase in endothelial permeability allowing it and other bacteria to colonize at different sites throughout the body. The colony of bacteria induces an inflammatory reaction that can lead to tissue necrosis and fetal death. (ADA News Feb 20,2012)

Dental Fun Fact

People with red hair are more sensitive to pain and consequently need more anesthetic during operations than other patients. Researchers have found that redheads need 20 percent more anesthetic to numb the pain.

New Scientist, Oct 2002

to this point deserve care from fully trained dentists. More important, major efforts should be directed to making certain that such conditions never develop in the first place, through dramatically ramped up pre-

vention and oral health education programs.

Surely, all can agree that no one should have to seek dental treatment in a hospital emergency room. The inability to surmount the barriers to oral health care can result in de-

layed diagnosis, untreated oral diseases and conditions, comprised overall health status, and, occasionally, even death. Unfortunately, oral health continues to elude many Americans. We believe that part of the solution involves a funda-

mental shift away from surgery and toward prevention. Investing in oral health education and prevention in the near term pays off in greatly reduced costs of treating disease over time. (from ADA <http://www.ada.org/6828.aspx>)

Dr. Brian Simpson
announces the eleventh meeting of the
NANUET IMPLANT STUDY GROUP

speaker: Kenneth Hilson, DDS
Prosthodontist and Diplomate
of the American Board of Sleep Medicine

**“Snoredontics: Wake Up to a
New Era in Dentistry”**

Thursday, June 14, 2012

Dinner: 6:30 Presentation: 7:00 — 9:00 pm

Restaurant X 117 North Rte. 303 Congers, NY

2 CE credits awarded by the Ninth District Dental Association

Cost: \$45.00

**Please bring your cases and documentation
(photos, x-rays, models) for discussion.**

**To register, contact Theresa: 845-623-3497
or email her at theresag@drbriansimpson.com**

“Hope lies in dreams in one’s imagination and in the courage of those who make dreams into reality” – Jonas Salk