

Caring for teeth and gums

How do I keep my teeth and gums healthy?

The key to healthy teeth and gums is proper plaque removal every day. Plaque is the sticky colourless film of bacteria that is constantly forming on your teeth. If it is left to build up, it is one of the main causes of tooth decay and gum disease.

Follow these simple instructions and you'll be off to a great start:

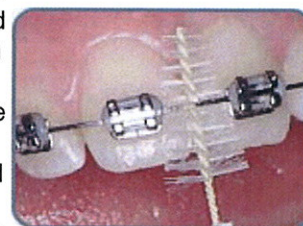
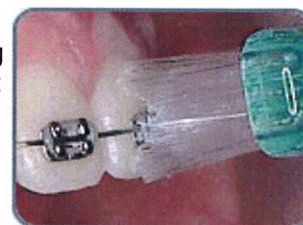
- Brush your teeth, gums and braces at least three times a day (and especially after eating)
- Clean between the teeth at least once daily - and definitely before you go to bed
- Use a fluoride toothpaste - fluoride is proven to help prevent cavities
- Use a fluoride mouth rinse at least once daily to help reduce the risk of cavities

Try to carry your toothbrush and floss with you at all times so that you can clean your teeth even when you are not at home

How do I clean all areas of my mouth while wearing braces?

At first, doing a good job removing plaque from your teeth and along the gum line may seem difficult with braces. But keep at it - with a bit of practice it will get easier! Following these tips will also help:

- First, take off any removable parts like elastic bands and headgear
- Place your gum at an angle of about 45 degrees to the gum and apply gentle pressure as you brush with a gentle back and forward, up and down, or round and round motion. Clean each tooth individually for about 10 seconds
- Use the same brushing motion on the inner and outer surface of all teeth
- Don't forget to brush the chewing surfaces of your teeth - and make sure you reach the back teeth too
- Finish by cleaning around your braces, brushing first from the top and then from the bottom. Brush gently and take care not to bend or break any of the brackets or wires



How often should I clean my braces?

It is vital that you clean your braces every time you brush your teeth. Braces can act as a "plaque trap", increasing the amount of plaque on your teeth, which in turn can lead to an increased risk of caries and gum disease.

How do I floss with fixed braces?

Flossing removes the plaque between your teeth and under your gum line - areas beyond the reach of your toothbrush. In fact, if you don't floss, you're leaving up to 40% of your tooth surfaces untouched and uncleaned.



Choose a floss (such as "Super floss") with a stiffened end that threads it through the gap between each tooth - above the wire for your upper teeth and below the wire for your lower teeth.

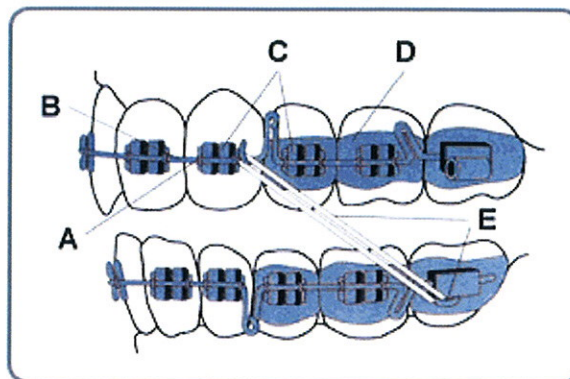
Curve the floss around each tooth in a "C" shape and gently move it up and down the side of each tooth, including under the gum line. Unroll a new section of floss as you move from tooth to tooth.

Common problems

Orthodontic emergencies do occur occasionally and, although they may be a little upsetting for the patient and parents, they are actually fairly simple to treat.

For some emergencies, you may need to contact your orthodontic practice.

To help you accurately describe an emergency situation to your orthodontist / staff, use the diagram below, which illustrates and names each part of a typical set of braces.



A. Ligature

The archwire is held to each bracket with a ligature, which can be either a tiny elastic or a twisted wire.

B. Archwire

The archwire is tied to all of the brackets and creates force to move teeth into proper alignment.

C. Brackets

Brackets are connected to the bands, or directly bonded on the teeth, and hold the archwire in place.

D. Metal Band

The band is the cemented ring of metal which wraps around the tooth.

E. Elastic Hooks & Rubber Bands

Elastic hooks are used for the attachment of rubber bands, which help move teeth toward their final position.

Tools & Supplies

With these tools and supplies on hand (most of which you will already have), you will be prepared to handle the most common orthodontic emergencies.

- Non-medicated orthodontic relief wax
- Dental floss
- Sterile tweezers
- Small, sharp clipper
- Salt
- Interproximal brush
- Toothpicks

- Non-prescription pain reliever
- Topical Anaesthetic (such as Orabase or Ora-Gel)

Emergency Treatments

The following orthodontic emergencies and their treatments are listed in the order of the least severe to the most severe. Only the most severe emergencies will require immediate attention by an orthodontist or medical doctor. The majority of these are easily treated with a follow-up by the patient's orthodontist.

Food Caught Between Teeth

This is not an emergency, but can be a little uncomfortable or embarrassing for the patient. It is easily fixed with a piece of dental floss or use an interproximal brush or toothpick to dislodge food caught between teeth and braces.

Lost Wire or Ligature

Tiny rubber bands or small, fine wires, known as ligatures, hold the wire to the bracket. If a rubber or wire ligature is lost, notify the orthodontist who will advise whether the patient should be seen.

Ligatures Come Off

If a rubber ligature should come off, you may be able to put it back in place using sterile tweezers. If a wire ligature comes loose, simply remove it with sterile tweezers. If the wire ligature is sticking out into the lip but is not loose, it may be bent back down to eliminate the irritation.

Of course, when one ligature pops off or breaks, others may follow. Missing or broken ligatures should be brought to the attention of the orthodontist.

Discomfort

It's normal for a patient to have discomfort for a day or two after braces or retainers are adjusted. But it can make eating uncomfortable. Reassure the patient that the discomfort is both normal and temporary. Encourage soft foods. Have the patient rinse the mouth with warm salt water. If the patient is allowed to have over-the-counter pain relievers, these may be effective.

Mouth Sores

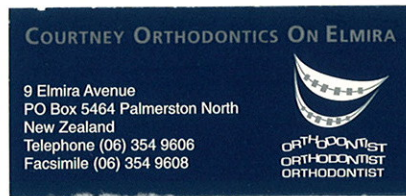
Some patients are susceptible to episodes of mouth sores. While braces do not cause them, they may be precipitated or exacerbated by an irritation from braces. One or several areas of ulceration of the cheeks, lips or tongue may appear. This is not an emergency, but may be very uncomfortable for the patient. Prompt relief may be achieved by applying a small amount of topical anaesthetic (such as Orabase or Ora-Gel) directly to the ulcerated surface using a cotton swab. Instruct the patient to reapply as needed.

Irritation of Lips or Cheeks

Sometimes new braces can be irritating to the mouth, especially when the patient is eating. A small amount of non-medicinal relief wax makes an excellent buffer between metal and mouth. Simply pinch off a small piece and roll it into a ball the size of a small pea. Flatten the ball and place it completely over the area of the braces causing irritation. The patient may then eat lunch more comfortably. Let the patient know that if the wax is accidentally ingested it's not a problem. The wax is harmless.

Protruding Wire

Occasionally the end of a wire will work itself out of place and irritate the patient's mouth. Use a suitable implement to push the wire so that it is flat against the tooth. If the wire cannot be moved into a comfortable position, cover it with relief wax. (See Irritation of Cheeks or Lips above for instructions on applying relief wax.) The orthodontist should be notified of the problem.



In a situation where the wire is extremely bothersome and the patient will not be able to see the orthodontist anytime soon, as a last resort, you may clip the wire. Reduce the possibility of the patient swallowing the snipped piece of wire by using folded tissue or gauze around the area. Use a pair of sharp clippers and snip off the protruding wire. Relief wax may still be necessary to provide comfort to the irritated area.

Loose Brackets, Wires or Bands

If the braces have come loose in any way, the orthodontist should be notified.

A Bracket is Knocked Off

Brackets are the parts of braces attached to teeth with a special adhesive. They are generally positioned in the centre of each tooth. The bracket can be knocked off if the patient has eaten one of those hard or crunchy foods orthodontic patients are instructed to avoid, or if the mouth is struck while at play. (Encourage the patient, especially if he or she is wearing braces, to wear a protective mouth guard while playing sports.)

If the bracket is off centre, the adhesive may have failed. Notify the orthodontist, who will determine the course of action.

If the loose bracket has rotated on the wire and is sticking out, and the patient cannot immediately be taken to the orthodontist, you can do a temporary fix to alleviate discomfort and prevent further damage. But take care to prevent swallowing or other injury.

To put the bracket back in place, use sterile tweezers to slide the bracket along the wire until it is between two teeth. Rotate the bracket back to the proper position, then slide it back to the centre of the tooth.

Piece of the Appliance is Swallowed or Aspirated

This is rare, but when it does happen, it can be fairly alarming to the patient. Encourage the patient to remain calm. If the patient is coughing excessively or having difficulty breathing, the piece could have been aspirated. If you are able to see the piece, you may carefully attempt to remove it. But do not make the attempt if you would cause harm.

If there is no coughing or difficulty in breathing, call the appropriate emergency number for your area for advice or instructions and notify the orthodontist.

If appropriate under the circumstances, examine the patient's braces for problems that may result from the missing piece, such as looseness or irritation, and treat as specified above.

If you are unable to see the piece and believe it may have been aspirated, call the appropriate emergency number for your area, then notify the parents and the orthodontist immediately. The patient should be taken to an urgent care facility for an x-ray to determine the location of the piece. A physician will have to determine the best way to remove it.