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# Aspect

## A QUARTERLY NEWS BULLETIN

Great Health Starts Here

Fall/Winter 2016 Issue 4 Welcome to Aspect, Nevada Dental Benefits, Ltd.'s quarterly newsletter, through which we offer contemporary news information on oral health, the dental industry, the latest research and advice for providers. 🏷 Nevada Dental Benefits, Ltd. 🖱 a PRIMECARE company

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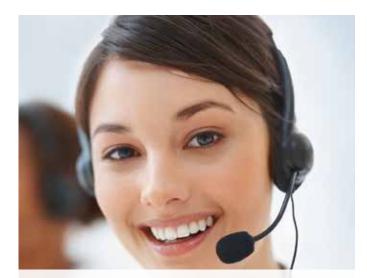
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#### IT'S NOT TOO LATE TO JOIN THE PRIME-**CARE ADMINISTRATORS NETWORK!**

Join PrimeCare Administrators





#### Converge 2016

The National Association of Dental Plans (NADP) held its annual conference, CONVERGE 2016, on Wednesday, September 14th, 2016 in San Antonio, TX. Dr. Fred Horowitz, President of Nevada Dental Benefits, Ltd., lead the general session titled: "Technology, Terminology and Care Delivery: What Changes Lie Ahead for Dental Benefits?" The convergence of care delivery technology, statistical analytic tools and the promulgation of a useful diagnostic terminology set, will allow significant changes to the dental benefits industry in the coming five years. Better information and a more streamlined process will both reduce costs and improve the patient experience. There is an opportunity to truly reduce the administrative burden on both providers and payers with the adoption of these technologies.

Dr. Horowitz was also recognized for his continuing volunteer efforts on behalf of the NADP, by being awarded the STAR award for the third time by the organization. He is also a three-term board member and former chairman of the NADP research foundation. He currently represents the NADP at the Code Maintenance Committee (CDT) of the ADA.







Meet NDB's Dental Director Patricia Steiner, DMD. Currently a Dental Quality Alliance Ambassador, Certified Dental Consultant and member of the American Dental Association, Nevada Dental Association and Southern Nevada Dental Society, Dr. Steiner is using her 17 years of experience in the healthcare industry to provide valuable tips as our resident dental expert.

#### **DENTAL UNIT WATER QUALITY**

The dental community was saddened to learn about reported contamination in the dental unit waterlines, believed to have led to infections resulting in the hospitalization of 30 children in Southern California. In light of such a tragic situation, it is imperative to remember that maintenance, monitoring and shocking of the dental unit waterlines is necessary to ensure patient safety. I hope you find this quick review helpful as you evaluate your own office protocol for dental unit water quality.

The Centers for Disease Control (CDC) Key Recommendations:

- Use water that meets EPA regulatory standards for drinking water (i.e., less than or equal to 500 CFU/mL of heterotrophic water bacteria) for routine dental treatment output water.
- Consult with the dental unit manufacturer for appropriate methods and equipment to maintain the quality of dental water.
- Follow recommendations for monitoring water quality provided by the manufacturer of the unit or waterline treatment product.
- Use sterile saline or sterile water as a coolant/irrigant when performing surgical procedures.

Keep in mind, manufacturer guidelines vary greatly from recommending monthly monitoring and detailed disinfection procedures to almost no written recommendations. In fact, some manufacturer guidelines recommend maintaining less than or equal to 200 CFU/mL of heterotrophic water bacteria, which is much lower than the EPA standard. It is important to remember, if the manufacturer does not have written recommendations for maintenance and testing, in order to comply with the CDC Key recommendation and ensure patient safety, you should set a water testing protocol for your office. In the event that the water does not meet the EPA regulatory standards for drinking water, you will have to do something about it. That "something" will likely be the shock and maintenance protocol you establish for your office.

For more information, the following references have been provided:

- 1. www.cdc.gov/oralhealth/infectioncontrol/questions/dental-unit-water-quality.html
- 2. www.cdc.gov/mmwr/PDF/rr/rr5217.pdf

#### **To Floss or Not to Floss**



With all of the media coverage of flossing lately, we found a good article that summarizes the issue and provides good advice for patients about the benefits of cleaning between teeth.

### SHOULD YOU BOTHER TO FLOSS YOUR TEETH?

By Sari Harrar

#### What recent research and our experts reveal about this dental-health practice

Flossing isn't usually seen as an enjoyable activity. Fifty-five percent of Americans, in fact, would rather wash dishes, sit in traffic, wait in a checkout line, or even clean the toilet than floss, according to a 2015 survey from the American Academy of Periodontology. If you're in that camp, you may have rejoiced recently when headlines proclaimed that the medical benefits of flossing were unproved. But does that mean you can simply toss the floss? Here's what you need to know about flossing and your dental health.

#### Dental Floss: Where's the Evidence?

The fuss about floss arose shortly after Jeff Donn, a writer for The Associated Press, noticed that the latest version of the Dietary Guidelines for Americans, issued at the end of 2015, included no recommendation for flossing although earlier versions did.

Donn looked at the medical literature on flossing and found little solid evidence that using dental floss reduces the amount of plaque, the sticky, bacteria-laden biofilm that forms on teeth. And there's also scant proof that the practice prevents advanced gum disease, or periodontitis.

For example, a 2015 analysis of four large reviews on the prevention of periodontitis, conducted by an international team of experts and published in the Journal of Clinical Periodontology, concluded that "the majority of available studies fail to demonstrate that flossing is generally effective in plaque removal and in reducing gingival inflammation." A 2011 review of 12 studies by the independent Cochrane Collaboration found some signs that flossing might ease the gum inflammation of gingivitis but only "weak, very unreliable evidence" that doing it along with teeth brushing reduced plaque. But the evidence for flossing's benefits is inconsistent in part because studies haven't followed people long enough to detect potential improvements, says Jay W. Friedman, D.D.S., M.P.H., an expert on dental public health and quality standards and an adviser to Consumer Reports.

The mixed findings may also be related to how well or poorly people use dental floss. In a 2010 review of six studies, researchers at the University of Washington School of Dentistry found that when youngsters 4 to 13 had their teeth professionally flossed five days per week for 1.7 years, they saw a 40 percent drop in their cavity risk. But adolescents who flossed on their own saw no such benefit.

And some of us may overstate how often we floss. That 2015 AAP survey found that one in four Americans who claim to floss regularly were fibbing.

#### **To Floss or Not to Floss?**

The American Dental Association still endorses "cleaning between teeth once a day with an interdental cleaner," contending that the practice can reduce plaque. The Department of Health and Human Services concurs, noting that leaving flossing out of the most recent dietary guidelines didn't signal that the practice was unimportant. Be aware too, that the Dietary Guidelines Advisory Committee made a deliberate decision to focus on food and nutrient intake in its 2015 report, and that's why the flossing recommendation was dropped.

Friedman, an expert in evidence-based dentistry, says that whether you floss or use another method, it's worthwhile to clean between your teeth every day. Getting food particles out from between your teeth before they can break down—feeding bacteria and increasing the likelihood of bad breath—is one reason, he notes. That's especially important as you get older, because gum tissue between the teeth shrinks with age, leaving wider gaps where bits of your breakfast toast can get stuck.

He says that flossing can help dislodge small pieces of food, along with rinsing vigorously with water after eating. Flossing with a water-jet device may be especially helpful. "Water flossing has been shown to be more effective in removing plaque," Friedman says, "and is recommended by periodontists, in particular, for patients with periodontal disease and also for cleansing around dental implants to prevent or minimize peri-implantitis, the inflammation of the gums around an implant."

Interdental brushes, usually found in drugstores near the dental floss, may be another good option. The 2015 analysis found that they did a better job than dental floss at removing plaque, but they might be hard to use without irritating your gums. The researchers concluded that flossing is a good idea if you can't fit the tiny brushes between your teeth easily.

But no matter how you clean between your teeth, it should still be just one part of an overall dental-health plan aimed at preventing gum problems as well as cavities. "The most effective means of reducing tooth decay is public-water fluoridation, brushing with a fluoride toothpaste, a low-sugar diet, eliminating soda pop, and not smoking," Friedman notes. And if you floss, do it right. Instead of sawing away at those tender gums, follow these steps.

Read the entire Consumer Reports article online here.

#### Tammy Ishibashi | Professional Relations

he holidays are just around the corner, where we'll be spending time at family gatherings, sharing stories and catching up with relatives near and far. With this in mind, we have one dentist in our network that really brings family and dentistry together.



Meet Dr. Chad Gubler. Dr. Gubler is the son of Dr. Kay Gubler, who started dental practice in Las Vegas back in 1970. Dr. Chad Gubler is the oldest of eight children, four of whom became dentists and one that is a hygienist, who also married a dentist and whose brother is a dentist. That has to be a lot of dentists at the table come Thanksgiving!

#### TI: Was the field of dentistry an obvious choice for you growing up?

CG: In a way, I always thought the things my dad did were great. I started working in a dental lab just before I turned 16 and worked there for several years. As a kid, I liked creating things and building models. I also thought the body was a cool thing. I remember when I was about 9 years old I found a mouse in a trap. So I took my mom's good sewing scissors, a Gerber bottle with alcohol and pulled anything out that looked important. My mom wasn't too happy about me using her scissors or that I was handling a dirty mouse, but I think it's my real interest in creating things and experience in human anatomy and physiology in school that really came together and where I found dentistry to be a perfect fit for me.

Over 20 years later I still have a great passion for it! I'm excited about the advances in technology that are being made and the relationships between oral and systemic health that are emerging.

#### TI: Have any of your children expressed an interest in being a dentist?

CG: I have seven kids, so you never know. I would love having any of my kids go into dentistry, but I would only want them to do it if they really had a passion for it. Dentistry is tough enough, so you have to love it. And I do.

Thank you to Dr. Chad Gubler for taking time to share your story with us. Enjoy the holidays with your family and here's to the Gubler dental legacy!

If you know of a dentist that might like to be featured in one of our upcoming newsletters, please let us know. E-mail Tammy Ishibashi at tishibashi@nevadadentalbenefits.com.

# **FOODS YOU SHOULD FREEZE IN AN ICE CUBE TRAY**



COFFEE No more coffee-flavored water! Keep iced coffee strong and satisfying

MILK Keep it in the freezer and you'll always have some on hand when you need it

FRESH HERBS IN OLIVE OIL Stash herbs at the height of their flavor

WINE Use leftovers for cooking or Sangria

**FRUIT JUICE** Add a little fruit flavor to your water

For the complete list of Foods You Should Freeze in an Ice Cube Tray, by Cambria Bold, visit TheKitchn.com







#### JOIN PRIMECARE ADMINISTRATORS

It's not too late to join the PrimeCare Administrators Network!

Your invitation already arrived at your office via USPS. Return your application with the prepaid envelope included or request an application on our website.

This is your chance to be part of a network of dental professionals partnering with the most reliable and valuable dental plan administrator.



