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LOST YOUR JOB? YOUR TEETH MAY BE NEXT

As Stock Portfolios Grind Down, So Do Teeth

New York, NY January 21, 2002 - As the unemployment rate peaks at its highest level in more than eight years, stress levels are following in suit. But stress and blood pressure worries are not the only reasons workers should keep their calm – the issue may be whether or not they keep their teeth.

Stress-related tooth clenching and grinding is a serious problem that does not just result in a few seemingly harmless headaches, according to New York dentist Dr. Clifford Williams. "Clenching and grinding will actually noticeably shorten your teeth," says Dr. Williams, who sees between 10 to 15 cases a week in his office. "In a relatively short period of time, regular tooth grinding will wear through nearly two millimeters of enamel on the tooth's biting surface. Not only will patients end up with short, cracked and stubby teeth, but they will throw off the entire mechanics of their mouth, leading to numerous other problems."

WAR AND TEETH

The majority of patients in Dr. Williams' Manhattan practice are professional business people, and he has noticed a steep increase in the problem of grinding since a recession was "officially" declared in March of 2001. "People from New York are notorious for clenching and grinding, but the minute the tech bubble burst, I had more people in my chair wondering why their teeth were getting shorter," he states. "The numbers went up again after September 11, and are now going up even more with the threat of war. When we're stressed out, so are our teeth."

"I review the medical history of every patient who sits in my chair and I can definitively say there that there is a direct correlation between blood pressure and teeth grinding," continues Dr. Williams. "And as your pressure goes up, your biting surface goes down."

TOOTH LOSS, 24/7

The effects of this stress on the teeth vary from night into day, but with similar negative results. According to Dr. Williams, patients grind their teeth at night, usually during REM sleep. When they're awake, the grinding is often replaced by tooth clenching. "Look around your office," he says. "You'll probably see two or three people sitting at their desks who look like they are grimacing or flexing their cheek muscles." In either case, grinders and clenchers almost never know they are doing it.

DOWNWARD SPIRAL

But while the economy may keep patients gnashing their teeth, Dr. Williams says that it's imperative that a lack of money doesn't keep them from going to the dentist. "It's a downward spiral," he says. "Losing a job may cause a person to grind, but it also keeps that person out of the dentist chair and that will lead to far more expensive problems down the road. And if you think that going to the dentist causes stress, imagine the stress of knowing that you could have saved thousands of dollars by avoiding costly onlays, crowns or veneers."

When Dr. Williams explains to his patients that they are losing irreplaceable tooth matter to grinding and clenching, 30% to 40% are proactive and do something about it. But the vast majority usually "pooh-poohs" the advice and only when they notice their teeth getting much shorter do they panic and come back into the office. But by that time, it may be too late to rebuild the tooth structure inexpensively.

GOING, GOING...

Teeth are not solid masses of the same material – they are structured in layers. The outside shell of enamel is by far the hardest layer of the tooth, followed by the dentin layer, which has a consistency more like bone. But while enamel may be the hardest substance in the body, once a patient grinds through it and hits the dentin layer, he or she will go through the tooth five times as fast. And it will be five-times more painful.

"Patients are almost always shocked that they can actually kill a tooth through grinding," says Williams. "They shrug it off thinking that it may cause a couple of headaches -- not thousands of dollars in restorative procedures."

If Dr. Williams gets to the tooth in time, he can save it with onlays, crowns and veneers. "If the biting edges of the incisors and canines aren't too far ground down, we can still utilize the remainder of the tooth to fit the patient with veneers," says Dr. Williams. "If the wear and tear is on the molars, we can use crowns or onlays to literally reupholster the biting surfaces of the teeth and restore them to their original size."

GONE.

It's rare, but if the patient has worn far enough into the dentin layer, the tooth might need a root canal or possibly an extraction. Dr. Williams explains that this would necessitate bridgework or possibly implants.

NO CURE, BUT...

While Dr. Williams says that the only cure for tooth grinding is for patients to try to relax and take steps to alleviate the stress in their lives. However, having their bite frequently checked and adjusted decreases grinding and clenching. After their teeth have been restored via onlays, crowns or veneers, a bite plate is still necessary. A comfortable, discreet bite plate should be worn during sleep and even at work if need be.

HOW TO TELL IF YOU'RE GRINDING YOUR TEETH

Dr. Williams offers these tips to tell if you may be grinding or clenching your teeth:

LOOK IN THE MIRROR: On the lower, anterior teeth, patients will notice a dark yellow or brownish halo on the surface of the teeth, which is the dentin layer being exposed. "Patients often come in thinking they just need a cleaning or whitening, but they really need a resurfacing."

WAKING WITH JAW PAIN: After a night of grinding teeth, patients often wake with stiffness and soreness in the jaw. "At night, patients are literally over-exercising the jaw muscles and like any over-used muscle, it will become sore."

WAKING WITH HEAD PAIN: In addition, a patient may wake up with a "temporal headache" on the side of his or her head, centered almost right on each temple. "This is often mistaken for just a 'regular' headache, but in fact is irritation to the jaw muscles, which wrap around the sides of the head."

WAKING WITH TOOTH PAIN: Teeth can also become sore in the roots and in the gums around the teeth. "The pressure from clenching and grinding can even loosen teeth," adds Dr. Williams.

RINGING IN THE EAR: Temporomandibular Joints, better known as TMJ, is the disorder suffered when the jaw is repeatedly tugged out of the socket by a bad bite, and this is often caused by tooth grinding. "TMJ can result in ringing in the ears, dizziness and headaches."

ASK YOUR SPOUSE: Ask your bedmate if he or she hears a grating or squeaking noise while you are asleep. "That is the sound of a patient rubbing the enamel of his teeth together."

AT THE DENTIST: When tooth grinding begins, your dentist will see a flat shiny spots on the teeth that really only he or she can notice. "After that, I will begin to see tiny cracks and chips in the teeth, followed by exposure of the discolored dentin."

Clifford Williams, DMD, FACD, specializes in restorative and aesthetic dentistry and is a consultant to several dental companies and laboratories. He is also the High-Technology Editor of Periodontal Practice and Aesthetic Dentistry magazine. Dr. Williams is a member of the American Academy of Restorative Dentistry, American Academy of Cosmetic Dentistry, American College of Dentists, New York Academy of Dentistry, International Congress of Oral Implantologists and Academy of Dental Facial Esthetics.

Dr. Williams Web site is www.drcliffordwilliams.com.

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