A Healthy Mouth in a Healthy Body

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Early dental education involved dental students studying alongside other medical students. They mastered the anatomy and physiology that pertained to the health of the human body, together as a group. After these systems were learned and understood, the medical students separated and began to study in their special spheres of interest. They knew that the organs and limbs of the body are interconnected and follow the same physiological principles. They knew that disease in one organ affects the vigor of the entire organism. They knew that disease does not honour anatomical borders.

So what happened? How is it that we have only recently come to the realization that oral health affects systemic health? We are simply speaking of health. Inflammation in the heart is the same as inflammation in the kidney is the same as inflammation in the crevicular fluid! We as dentists, specialists in oral structures, play an integral part in the creation of optimum health in our patients.

Welcome to the dental medical reconnection. It is a bond that should never have been severed. Today, many universities have dental and medical students studying together for several semesters. This makes for excellent after-graduation relationships, better communication and consultation between dentists and physicians.

Studying with medical students also exposes the dentist to a different paradigm in thinking and analysis. The treatment of disease is seen more from a medical model and less from a surgical model. Physicians understand that disease is multifactorial. Heart disease has a long list of contributing risk factors. So does diabetes. So do most degenerative diseases of the body. The downward spiral of disease in dental hard and soft tissue is multifactorial as well. We must fully understand this disease process and we must proactively intervene to slow or even stop its progress.

Forget “minimal invasive” or “minimal intervention” dentistry. We do not want to do the minimal amount. We do not want to “watch and wait”. We need to properly diagnose, assess risk, and proactively intervene before the situation requires more extensive treatment. Welcome to the concept of Proactive Intervention Dentistry.

This journal includes articles that discuss what would have been dental science fiction just a few years ago: healing caries with remineralization therapy, simple determination of endpoint in caries removal, effective elimination of dentin hypersensitivity, combating TMJ pain with low level laser treatment, a clinical protocol that effectively eliminates plaque accumulation, and using microbiological assessment to monitor progress in the treatment of periodontal disease.

Dr. Fay Goldstep sits on the Oral Health Editorial Board (Healing/Preventive Dentistry), has served on the teaching faculties of the Post-graduate Programs in Esthetic Dentistry at SUNY Buffalo, the universities of Florida (Gainesville) and Minnesota (Minneapolis). She has lectured nationally and internationally on healing dentistry, innovations in hygiene, dentist health issues and office design. Dr. Goldstep is a consultant to a number of dental companies, and maintains a private practice in Markham, ON, Canada and can be reached at goldstep@epdot.com.

Proactive Intervention Dentistry gives us the tools to do our part in creating a healthy mouth within a healthy body. In this way, we as dentists contribute to the overall well-being of our patients. We are instrumental in enhancing their active lifestyle of relationships, physical activity, family and friends. We have reconnected the body parts and we have reconnected dentistry with its medical source. The patient is the ultimate winner.