

Straightening priorities

Caroline Holland looks at hygiene management within an orthodontic practice

By royal appointment?

The Duchess of Cambridge, Kate Middleton, is reported to have had lingual treatment. With a smile which sells publications in their millions around the globe, it's likely that trend-setting Kate has made the lingual technique highly desirable.

It's been said that her smile was altered with 'micro-rotations' to achieve perfect asymmetry, in other words, a subtle approach to achieve a natural-looking smile.

Did she or didn't she? Confirmation is unlikely!

Patients who opt for orthodontics at the London Lingual Orthodontic Clinic (LLOC) have one focus, improving their smile. What they don't appreciate, is that by the time the appliances come off, they won't just have straighter teeth, their dental health will be improved, too.

This is due to the central role of the two hygienists, Sarah Urquhart and Katharine Wright, who are closely involved in the patient journey and work in partnership with Dr Asif Chatoo, the founder and principal and his colleague, Dr Didier Fillion. Sarah and Katharine are given free rein with their motivational skills, not to mention being allowed the time with patients to make a difference.

Appointments are structured so that at the start of treatment, the new patient will spend as long with the hygienist as they do

with one of the orthodontists. Often, Sarah or Katharine will take impressions for preliminary study models and photographs for the records and every patient is given a complimentary initial hygiene appointment.

The involvement of the hygienists continues throughout the treatment, as Asif explains: 'Routine appointments are usually one and a half hours, split between a hygienist and myself. The patient sees me first and I take out the wires. Then I walk them to the hygienist's surgery where they have an appointment of about 45 minutes and then back to me for new wires.'

Interestingly, patients do not complain about the length of their appointments. 'Patients like the fact that we take out the wires and then we can properly get in between the teeth and make the cleaning effective.'

I get patients to visualise how their gums might look if they are not properly cleaned, but instead swollen and inflamed by toxins and growing into the bracket. Because of the effort we put in, most of our patients have very clean teeth and gums



Katharine (left) and Sarah (right) with dental nurses Farah and Alex

Asif continues: 'Patients become very positive about keeping their teeth healthy and the process becomes patient-led. We do not need to send out reminders because the patient makes the next appointment as they leave their last.'

Minimal risk

Research has shown that there is a lower risk of visible marking or decay on the teeth. If there is, it will be on the reverse side of the teeth. At LLOC, there is minimal risk of marking of any kind, thanks to Sarah and Katharine. It's normal practice for patients to finish treatment with healthier mouths as well as straighter teeth!

Sarah has worked with Asif for several years at Bow Lane Dental where he works one day a week. She has provided hygiene for lingual patients for so long she is almost surprised if she treats any patient with labial appliances.

'Motivation is a huge part of what I do and I like to think I motivate patients practically. What they do at home on a daily basis is always going to have more of an impact than what I can in 45 minutes once every three months.'

Katharine and Sarah have discussed the way they work and have made sure that they are consistent with their approach. They both use ultrasonic scalers with fine tips so they can both clean and flush away all the plaque.

Katharine finds that many patients she sees for the first time do not know what plaque is. She uses the analogy of the Domestos advertisement to illustrate just how invasive bugs can be and often draws little pictures.

'I try getting patients to engage with using several senses to understand what might be lurking in their mouths. For instance, I encourage them to use the tip of their tongue to feel between the gum and the bracket.'

'Then I get them to visualise how their gums might look if they are not

properly cleaned, but instead swollen and inflamed by toxins and growing into the brackets. Because of the effort we put in, both with cleaning and education, most of our patients have very clean teeth and gums.'

The exceptions, she says, are the patients who have transferred from elsewhere and have not had the same kind of start to their orthodontics. Usually, they haven't had an appointment for months and can be distraught.

'Some have never seen a hygienist before and I warn them they may feel a little sore. I have had more than one patient accuse me of "giving them gaps" because they have forgotten what it is like to have clean teeth with spaces between each one.'

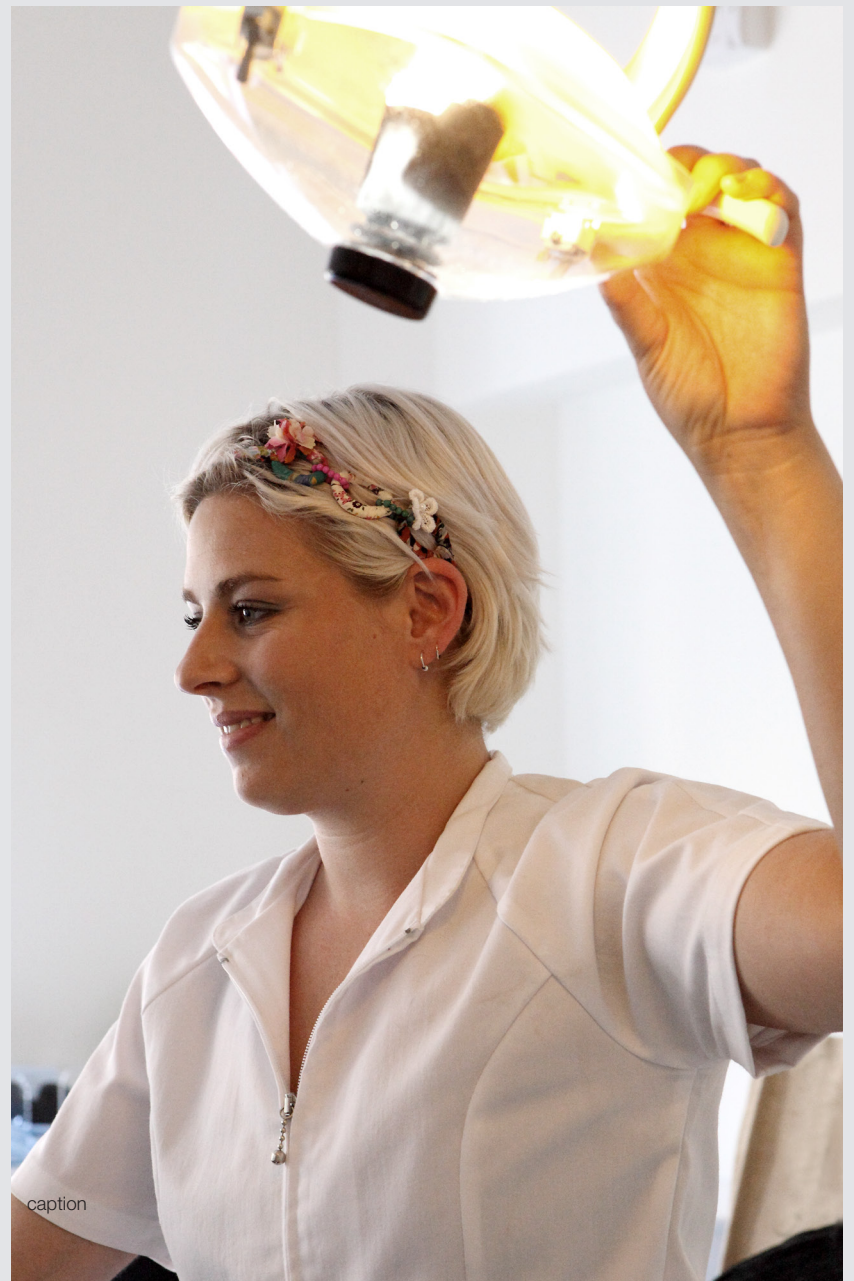
Both Sarah and Katharine have to be careful to keep their patients on side by being encouraging. Katharine says: 'I will always say "we will tweak your technique" even if they have no technique at all!'

She adds: 'Asif is caring and you can ask him tons of questions but the main thing is that the patients can feel that we are all working together on their behalf.'

It's difficult to imagine a dental clinic where hygiene is more central to a patient's treatment than the London Lingual Orthodontic Clinic. Not only are the staff evangelical about caring for patients' teeth but, by the end of their treatment, the patients appreciate the value of both a beautiful smile and a healthy smile. Their smiles are straight, and so are their priorities. **DH&T**

References

(1) Van der Veen MH, Attin R, Schweska-Polly R, Wiechmann D. Caries outcomes after orthodontic treatment with fixed appliances: do lingual brackets make a difference? *Eur J Oral Sci* 2010; 118: 298-303



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Motivational techniques

- Use of typodont to explain appliances and their different components and how to clean effectively
- Explanation of plaque and bacteria and their destructive effect
- Tips on how to get underneath wires and between brackets
- Emphasis on using different approaches – single tufted brush, mini brushes, rinse
- Diet advice
- Try to have regular three-monthly hygiene appointments

Home routine recommended to patients

- Increase brushing from two to three times a day
- Allow yourself an extra five minutes in the bathroom
- Use an interspace single tufted brush on the gumline
- Little brushes in between teeth in preference to floss
- Clean vertically with mini brushes,
- Use a fluoride mouthwash when possible
- Keep a toothbrush in your bag or pocket