



# Steps to Reduce Your Caries Risk

**Cariou lesions (cavities)** are not the disease but the result of a disease process caused by a bacterial infection. Placing a filling restores the damaged tooth structure but has little effect on the activity of the cariogenic (cavity-causing) bacteria. It is no mystery why many patients have teeth restored only to return again and again with more carious lesions. Therefore, in addition to tooth restoration, caries treatment must address the bacterial infection. Antibacterial strategies can be designed to control the cariogenic bacteria in your mouth. Success will depend largely on your compliance with your instructions.

## Step 1 – Eliminate the Nidus of Infection

- a) Restore any cavities (cariou lesions)
- b) Seal remaining deep, retentive pits and fissures

## Step 2 – Implement Preventive Measures

(Steps 1 and 2 may be completed simultaneously as discussed with our staff, including):

- a) Diet survey / modification
- b) Oral hygiene instruction
- c) Evaluate salivary flow
- d) In-office fluoride

- e) Home fluoride -
  - 1) Fluoride dentifrice 2 or 3 times daily
  - 2) 1.1% neutral sodium fluoride gel applied in custom fluoride carrier tray for 5 minutes at bedtime
- f) Xylitol chewing gum - chew sugar-free gum for 5 minutes, 3 times per day
- g) Use of electric toothbrush. Sonicare toothbrush, by Philips, has been shown to be much more effective at removing plaque and stain compared to a regular toothbrush.



**CALL OUR OFFICE (905) 646-0104 WITH ANY QUESTIONS**

### **Step 3 – Antibacterial Mouth Rinses**

(Chlorhexidine regimen will not be started until all cavitated lesions have been restored!)

a) Chlorhexidine Gluconate (.12%) - rinse with 1/2 ounce for 30 seconds morning and night for two weeks

### **Step 4 – 3 Month Recall**

a) Monitor measures in step 2  
b) Monitor sealant retention

Possible reasons for persistent high Mutans Streptococci (cavity-causing bacteria) levels:

- 1) Patient still maintaining high refined carbohydrate diet
- 2) Carious lesions still present
- 3) Possible inoculation from another individual



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