Behind every beautiful smile should be a healthy mouth
Creating beautiful and healthy smiles, one patient at a time

When it comes to comprehensive dental care, you’re in the right place. Since 1992, patients have trusted the Coast Dental family of dentists to provide quality care in a friendly, caring environment. Their trust has made Coast Dental one of the leading dental providers in the United States.

Our comprehensive general and specialty dental services include:

- crown & bridge  
- implant restorations  
- partial & complete dentures  
- root canal therapy  
- oral surgery  
- extractions  
- veneers  
- whitening  
- advanced oral cancer screening  
- periodontal disease management  
- hygiene services & cleanings  
- exams & x-rays  
- laser-assisted hygiene therapy
You deserve a beautiful, healthy smile

At Coast Dental, we take your oral health as seriously as you do. Whether you need basic, preventive, cosmetic care or major dental work, our coordinated approach is unique. We call it Coast Comprehensive Care® or C3® for short. C3 incorporates advanced technology and leading-edge protocols with education to help you achieve optimum oral health and maintain good overall health.

Good health starts with early detection

Think you can’t get oral cancer? Think again. Oral cancer is on the rise, especially among young people with no traditional risk factors. Experts have linked this rise to exposure to the sexually transmitted disease, human papilloma virus (HPV 16/18). When detected early, oral cancer is one of the most curable cancers. That is why we supplement conventional head and neck exams with advanced screening technology that can detect it in its earliest stage.

A beautiful smile is more than just great white teeth

It begins with a strong foundation of healthy gums. Crowns, bridges, partials, veneers and professional whitening can help you achieve your ideal smile. Placing them on healthy gums helps protect the investments you’ve made in these procedures and gives them more staying power. More importantly, the health of your gums is directly connected to your overall health. It’s not just about your teeth anymore!
Periodontal disease is a serious infection

Periodontal (gum) disease is the most common bacterial infection found anywhere in the body. The source of the infection is plaque, a sticky, colorless film that forms on your teeth and multiplies deep below the gum line. Left untreated, the bacteria release toxins that can destroy the gum tissue and bones supporting your teeth. Periodontal disease is the leading cause of tooth loss in adults.

Ineffective oral hygiene is a primary cause of periodontal disease. But you can get it even if you brush and floss regularly because of other contributing factors:

- stress
- tobacco use
- family history
- hormonal changes
- grinding or clenching teeth
- certain medications or medical conditions

Except in the earliest stage called gingivitis, periodontal disease can’t be completely cured. It can only be managed and controlled.

Common, but not normal

3 out of 4 adults have some form of periodontal disease
Your mouth is the gateway to your entire body

Left untreated, periodontal disease can produce serious health risks. That’s because the bacteria and toxins present in periodontal disease can travel to other parts of the body through the bloodstream and cause inflammation and additional health problems. In fact, clinical studies have linked periodontal disease to:

• stroke
• diabetes
• Alzheimer’s
• heart disease
• certain forms of cancer
• adverse pregnancy outcomes
• adverse impact on artificial joint replacements

Once you understand the connection between oral health and overall health, you’ll appreciate why visits to your dentist are as important as visits to your medical doctor for maintaining good health.
Diagnosing periodontal disease

Periodontal disease is often painless and symptom-free, which is why this diagnosis is often surprising to people. Bleeding gums are usually the first sign of a problem, but a diagnosis requires x-rays and periodontal probing along with a complete periodontal evaluation:

- bleeding or inflamed gums
- presence of infection (pus)
- detachment of the gum from tooth
- exposure of tooth root surfaces
- bone loss revealed on x-rays
- periodontal pocket depth
- family history
- bad breath

Know your numbers

We use a dental ruler called a probe to measure the depth of the gum tissue (pocket) around each tooth.

- Within manageable limits measurements range from 1 – 3 millimeters.
- Measurements larger than 3 millimeters usually indicate pockets of infection that must be treated.

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1–3 mm Healthy</td>
<td>Healthy gums</td>
</tr>
<tr>
<td>4 mm Gingivitis</td>
<td>Inflammation/Bleeding</td>
</tr>
<tr>
<td>4–5 mm Slight</td>
<td>Periodontal pocket</td>
</tr>
<tr>
<td>5–6 mm Moderate</td>
<td>Clinical attachment loss</td>
</tr>
<tr>
<td>6 mm+ Advanced</td>
<td>Bone loss</td>
</tr>
</tbody>
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Healthy Gums

Infected Gums
Treating & managing periodontal disease
Since periodontal disease is not a reversible condition (except for gingivitis), the goal for treatment is to get the disease under control and stop it from progressing. There are two approaches to treating periodontal disease — surgical and non-surgical.

Non-surgical therapy
Clinical advancements enable us to offer non-surgical therapy which can eliminate the need for painful surgery in most cases. Non-surgical therapy involves a partnership between you and your dental professionals.

- Adherence to a regular schedule of office visits
- Removal of plaque & calculus below the gum line (scaling and root planing)
- Laser-assisted hygiene therapy
- Application of antibiotics & antimicrobial agents
- Following your prescribed home care routine
The earlier you treat periodontal disease, the

<table>
<thead>
<tr>
<th>Healthy</th>
<th>Gingivitis (Reversible)</th>
<th>Slight Periodontitis (Irreversible)</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1.png" alt="Healthy Teeth" /></td>
<td><img src="image2.png" alt="Gingivitis (Reversible) Teeth" /></td>
<td><img src="image3.png" alt="Slight Periodontitis (Irreversible) Teeth" /></td>
</tr>
</tbody>
</table>

**Clinical Findings**
- **Healthy**
  - 0 – 3 mm pockets
  - No bone loss
  - Gums pink & firm
  - No bleeding on probing
  - No root exposure
- **Gingivitis (Reversible)**
  - 4 mm pockets
  - No bone loss
  - Red, swollen gums
  - Bleeding on probing
  - Inflammation present
  - No root exposure
  - Plaque & calculus present*
- **Slight Periodontitis (Irreversible)**
  - 4 – 5 mm pockets
  - Bone loss
  - Bleeding on probing*
  - Pus present*
  - Slight root exposure
  - Plaque & calculus present*
  - Slight clinical attachment loss

**Hygiene Procedure**
- **Healthy**
  - Prophylaxis: Cleans areas above the gum line
- **Gingivitis (Reversible)**
  - Gingivitis Therapy: Removes bacterial plaque & calculus build-up on teeth for a full periodontal assessment
- **Slight Periodontitis (Irreversible)**
  - Scaling & Root Planing With Laser Therapy & Antibiotics: Removes bacterial plaque & calculus build-up above & below gum line
  - Periodontal Maintenance: Provides cleaning & maintenance above & below gum line to manage the disease process

**Investment**
- **Healthy**
- **Gingivitis (Reversible)**
- **Slight Periodontitis (Irreversible)**

*Not always present in 100% of periodontitis cases*
less expensive and less extensive the treatment.

### Clinical Findings
- **Moderate Periodontitis (Irreversible)**
  - 5 – 6 mm pockets
  - Bone loss
  - Red, swollen gums
  - Bleeding on probing*
  - Pus present*
  - Moderate root exposure
  - Plaque & calculus present*
  - Moderate clinical attachment loss
  - Loose teeth*

- **Advanced Periodontitis (Irreversible)**
  - 6 mm or greater pockets
  - Bone loss
  - Red, swollen gums
  - Bleeding on probing*
  - Pus present*
  - Severe root exposure
  - Plaque & calculus present*
  - Severe clinical attachment loss
  - Loose teeth

- **Refractory Periodontitis (Irreversible)**
  - Unresponsive to non-surgical treatment
  - Continued worsening of condition after treatment
  - Red, swollen gums
  - Bleeding on probing*
  - Pus present*
  - Varying degrees of root exposure
  - Plaque & calculus present*
  - Varying degrees of clinical attachment loss
  - Loose teeth*

### Hygiene Procedures
- **Moderate Periodontitis (Irreversible)**
  - Scaling & Root Planing With Laser Therapy & Antibiotics: Removes bacterial plaque & calculus build-up above & below gum line
  - Periodontal Maintenance: Provides cleaning & maintenance above & below gum line to manage the disease process

- **Advanced Periodontitis (Irreversible)**
  - Scaling & Root Planing With Laser Therapy & Antibiotics: Removes bacterial plaque & calculus build-up above & below gum line
  - Periodontal Maintenance: Provides cleaning & maintenance above & below gum line to manage the disease process
  - Referral to periodontist if no improvement

- **Refractory Periodontitis (Irreversible)**
  - Patients with this condition will be referred to a periodontist (specialist)

### Investment
- **Moderate Periodontitis (Irreversible)**
- **Advanced Periodontitis (Irreversible)**
- **Refractory Periodontitis (Irreversible)**
Frequently Asked Questions

▶ Is periodontal disease curable?
Only the earliest stage of the disease, called gingivitis, can be completely reversed with proper in-office treatment and good home care. The later stages of the disease cannot be cured, only managed and controlled.

▶ Why won’t the free cleaning covered by my insurance be enough to control my periodontal disease?
The type of cleaning you get depends on your dentist’s clinical findings after a full exam is conducted. Most insurance plans provide for a healthy mouth or preventive cleaning every 6 months, which removes plaque and calculus above the gum line. When gums aren’t healthy or an active infection is present, periodontal therapy is needed to treat the areas below the gum line.
Treating infected and unhealthy gums with a healthy mouth or preventive cleaning would be ineffective, unethical and unwise. It would be like waxing a dirty car, but much more dangerous.

▶ Why do I have to come back so often?
Harmful bacteria can re-establish in the mouth quickly and continue their destructive cycle if not controlled regularly by a licensed professional. The frequency of your visits are prescribed to stop the bacteria and their toxins from doing irreversible harm to your teeth and gums and to help prevent possible damage to other areas of your body.

▶ I’m diabetic. Why was my hygienist asking me about my A1C levels and blood sugar?
Oral health cannot be separated from overall general health. Your general health issues and oral condition determine the kind of cleaning you receive. Periodontal disease is harder to manage with diabetics because healing is often delayed. The treatment we provide may actually impact your long term blood sugar control. That is why we follow a treatment plan that best addresses your specific situation, diagnosis or condition.

▶ Why would I be prescribed both laser-assisted hygiene therapy and a localized antibiotic?
The combination of the two provides the most scientifically advanced periodontal treatment available and optimal healing results. Laser treatment effectively sterilizes the periodontal pocket while the antibiotic allows for a controlled release over the next 30 days to prevent re-infection of the pockets.

▶ Why do I need prescription fluoride instead of regular toothpaste?
The type of prescription strength fluoride toothpaste you get from the dentist is more effective in reducing harmful bacteria, controlling cavities and reducing sensitivity that can occur with periodontal disease. While regular toothpaste contains some fluoride, it does not contain the strength needed to help reduce symptoms that can be associated with periodontal disease.

▶ Will a power toothbrush get my teeth cleaner than a manual toothbrush?
Although many people do a good job brushing with a manual toothbrush, studies show that the majority of people get significantly better results with a power toothbrush. Patients suffering with arthritis or who have experienced a stroke may find it impossible to brush effectively with a manual toothbrush, making a power toothbrush a good alternative.

▶ Does periodontal disease cause bad breath?
Yes, because odor-causing bacteria can hide deep in the gum tissue and periodontal pockets surrounding the teeth and in the crevices of the tongue. It is important to remove bacteria daily through brushing, flossing, tongue scraping, prescription rinses and breath control products. We offer a complete product line that kills bacteria and prevents plaque build-up, a primary contributor to periodontal disease. Our products do not contain alcohol which can be drying to gum tissue.
Glossary of Terms

Antimicrobial Irrigation
A solution containing agents that kill bacteria and viruses that is generally applied below the gum tissue, usually after Gingivitis Therapy, scaling and root planing, or periodontal maintenance.

Clinical Attachment Loss
A calculation of gum recession around a tooth and the periodontal probing depth. It is used to identify the proper stage of periodontitis. This calculation is done to determine whether an infection has progressed or is in a controlled state.

Debridement
The mechanical removal of excessive mineralized and hardened plaque and calculus on the tooth surfaces at or around the gum line. This procedure enables a dental professional to perform periodontal probing or other diagnostic services.

Desensitizing Medications
Gels, rinses or liquids that reduce sensitivity to heat, cold, sweets or touch associated with recession, periodontitis or periodontal therapy.

Gingivitis
The earliest stage of periodontal disease. Symptoms include bleeding gums and inflammation that are present only above the gum line; the underlying bone is not affected. This is the only stage of periodontal disease that is completely reversible with proper in-office and home care treatment.

Laser-Assisted Hygiene
Therapy which employs laser technology to eliminate disease, infected, inflamed, and necrotized (dead) soft tissue while preventing cross contamination within periodontal pockets.

Periodontal Maintenance
The treatment for controlled (or inactive) periodontal disease. It involves the removal of bacterial plaque from above and below the gum line. It may also involve site-specific scaling and root planing, the placement of localized antibiotics when indicated, and polishing. This therapy is indicated for patients who have completed either non-surgical or surgical periodontal therapy.

Periodontal Scaling & Root Planing
A non-surgical approach to treating active periodontal disease by mechanically removing plaque, calculus, bacteria and toxins from the root surfaces and periodontal pockets to allow healthy reattachment of the gum to the root surfaces of the teeth.

Periodontitis (Periodontal Disease)
A serious bacterial infection that causes inflammation of the gums around the teeth. Generalized periodontitis includes 4 or more infected teeth in a single area or quadrant of the mouth. Localized periodontitis is limited to 3 or fewer infected teeth in any one area or quadrant. It can be characterized by periods of disease activity alternating with disease inactivity.

Professional Cleaning & Polishing
A preventive procedure that involves the removal of stains from teeth and plaque and calculus above the gum line. It is performed for patients with healthy gums and is not appropriate or indicated for patients who have gingivitis or any stage of periodontitis.

Recession
The loss of bone from the base of a tooth and associated gum tissue resulting in exposure of the root surface. Recession makes teeth more vulnerable to root cavities and increases sensitivity to heat, cold, sweets or touch.

Oral Cancer
The uncontrolled growth of abnormal cells in the oral cavity causing tumors or cancerous tissue in the teeth, gums, cheeks, lip, tongue, throat and hard or soft palate. It is the sixth deadliest form of cancer but is highly curable if caught in an early stage.
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