



Occlusion, Bruxism and DentaKOTE S

As with all medical and dental professions, the more we deploy services, treatments, and the like, the more we understand patient responses and efficacies. The law of large numbers produces data that is difficult to replicate in clinical trials and only becomes evident as all variables surface when examining large data sets. We have taken the same approach to the Dentity Global family of products and employed an “appreciative inquiry” approach to patient/clinician responses post treatment.

After thousands of applications of our DentaKote S product by dentists, we have had the benefit of reviewing the large post treatment dataset. Our review of the data has identified an outlier, which is evident in a small percentage of patients post treatment.

In delving into the outlier data, we find that there are different levels of patient efficacy regarding the cessation of sensitivity. As with most products that are successful, the bell curve indicates that 95% of patients treated will have 100% effectiveness from treatment. As such, it is important to understand the 5% who experience varying degrees of relief. The data shows that some patients have a large degree of relief but not 100% while others still have significant (extreme outlier) sensitivity post treatment.

What we have learned is that the differing outcomes is directly correlated to the diagnosis and pre-clinical evaluation of the patient.

Over the last 3+ years in testing the DentaKOTE S product, we have uncovered what we refer to as sensitivity layers of this illness or condition. The main condition layer is of course, gingival recession and cervical root exposures. This is the main purpose of this product and the foremost diagnosis and intention for using the DentaKOTE S product. However, the review of post clinical studies is proving once again, the human body differs from one subject to the next.

A critical factor in the degree of sensitivity relief is indicated by the degree of that mal occlusion plays in not just creating the gingival recession which at times does lead to root sensitivity, but more importantly the secondary layer that clenching and bruxism plays in adding an additional layer to the sensitivity reactions, especially to cold beverages.

What we have found quite simply requires a thorough understanding and attention to this detail when the evaluation and examination procedures are being conducted. When evaluating a patient, understanding the impact that past orthodontic treatment, wear facets especially on load bearing teeth like cuspids and first bicuspids play are very important. These teeth are primarily the ones that are supporting the occlusion in the lateral movements and are therefore at the front of the stress load area support.

When a tooth is under abnormal lateral stresses like in the case of bruxism, the periodontal ligament is the first in line for defense and is quite often overloaded. When this occurs, the overload transfers to

the attachment apparatus thereby causing the gingival recession. This is more evident on single rooted teeth as is also the teeth more affected by the sensitivity effects.

Evaluating the teeth during the examination for decay, periodontal disease, abscesses is the standard. But what gets overlooked many times is the wear facets on the anterior dentition and most certainly the guiding and support teeth as in the case of the cuspids. One must understand this phenomenon and look for fremitus and signs of breakdown in the periodontium if we are to be successful in not just ceasing the sensitivity effects but preserving the dentition long term. A dentist must intently look for these signs of breakdown, find the reason why this is happening and address those as well. Simply using the DentaKOTE S product alone will not be a long-term solution.

The protocol and the clinical checklist have been meticulously crafted to provide guidelines and a sort of checklist for the dental practitioner and hygienist to follow. It is not intended to be a cure for all. Common sense will guide us in most cases, but a practitioner will find very so often that a case of sensitivity creeps and returns after a few days complaining again of the very same thing they were complaining about before.

The DentaKOTE S is a phenomenal product and curbs the sensitivity in every case we tested clinically when the proper diagnosis and evaluation was followed. Adhering to the protocols of application and strict guidance using the clinical checklist will undoubtedly give the practitioner more clarity as to the nature and etiology of the root cause of the sensitivity condition.

Feel free to reach out to our clinical team for more information or assistance in this method. We are here to support your endeavors.