Tooth related injuries: What do you do?

March is upon us. As Barrington residents, we not only have the annual Home and Garden issue of Quintessential Barrington to look forward to, but the start of the season for the Chicago Slaughter. The Chicago Slaughter is a professional indoor football team that plays in our backyard at the Sears Centre Arena in the Prairie Stone complex in Hoffman Estates. This year, I have been honored by being selected as the team dentist. There is no question that professional athletes in rough contact sports place their teeth at risk for trauma every time they go out on the field, but professional athletes are not alone. We are also at risk for facial and dental trauma.

What is dental trauma?
Dental trauma can be defined as any injury to the mouth, which includes teeth, lips, gums, tongue, jawbones, and the TMJ (jaw joint). Dental trauma can be categorized based upon the location of injury, and can occur in many different ways. Sporting activities are some of the most common but motor vehicle accidents, bicycle accidents, fighting, falls, and even eating very hard foods can cause dental trauma. In general, any dental trauma should receive prompt treatment from a trained dentist or medical professional.

An ounce of prevention
First, most dental trauma is preventable. Car seat belts should always be worn and young children secured in appropriate car seats. Anyone who participates in contact sports such as football, basketball, ice hockey, and wrestling should always wear a mouth guard. Mouth guards should be worn along with helmets in noncontact sports such as skateboarding, in-line skating, and bicycling. Mouth guards can be purchased at the local sporting goods store, but may not fit well. For the best fit and protection, ask your dentist to make a custom mouth guard. All that is needed is a mold of your teeth.

Dental first aid
The treatment of a broken tooth will vary depending upon the severity of the fracture. For immediate first aid, the injured tooth and surrounding area should be rinsed with warm water to remove dirt, and then covered with wet gauze to ease any discomfort. Any broken pieces should be saved, and a dentist should examine the injury as soon as possible. If a piece of the tooth has chipped, but the pulp (nerve) is not disturbed, the dentist may be able to repair the tooth with a filling. For larger breaks, the tooth may require more protection in the form of a veneer or crown. There are times, however, that the tooth fracture is deep enough to involve the pulp.

Younger teeth seem more prone to pulp exposure and injury due to the inherent larger size of the pulp space. In this case the tooth will require a root canal in which the injured pulp is removed from the tooth. Important to note is that even if the pulp is not exposed, close monitoring of the health of the pulp over time is necessary as the nerve may die years later. Lastly, if the fracture to the tooth is too severe it may be necessary to remove the remaining pieces of the tooth. Careful planning in anticipation for dental implant placement must occur prior to removal of the tooth.

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If a tooth sustained an injury, it may also have damaged the surrounding structures of the gums and bone. With this type of injury the tooth will may have moved out of position and become loose, or been knocked out of the socket. An evaluation and treatment by a dentist must occur immediately.

If a permanent tooth has been knocked out, it may be saved with prompt action. The tooth must be found and managed correctly. It should be picked up by the crown and not the root. The tooth may be rinsed with cool water but should never be scrubbed or washed with soap, toothpaste, mouthwash, or any other chemical. It should not be dried or wrapped in tissue or cloth. The tooth may be placed in a clean container of milk, cool water with a pinch of salt, or even in saliva. There are also emergency solutions for tooth preservation available at www.save-a-tooth.com and can be kept with your first aid kit. In general the tooth should be reimplanted by the dentist and stabilized within 30 minutes. The shorter the length of time the tooth is out of the socket the better the chance for survival.

Have fun this season, wear your mouth guard, and be careful.