

HEALTH & WELLBEING

Multi-factorial
tooth wear

Face to face with tooth wear: action points for the agenda

BY PROFESSOR ANDREW EDER

ONLINE MEETINGS have become such a big part of our working lives that we've rightly become more self-conscious about the state of our teeth when smiling at the camera. This has also given many of us an opportunity to pause and reflect on the impact of our lifestyles, both inside and out.

WHAT IS TOOTH WEAR?

When the outer tooth surface is lost due to mechanical or chemical activity in the mouth, this is known as tooth wear and it's an increasingly common problem. Teeth can simply dissolve away or wear down to varying extents as time passes. This contrasts with gum disease and tooth decay, which are caused by bacteria in the mouth.

WHY IS TOOTH WEAR A GROWING CONCERN?

Dental health surveys in the UK over the past 30 years show gum disease and tooth decay appear to be decreasing in society. Tooth wear, however, is on the increase, with almost three quarters of adults and more than half of children assessed having some form of tooth wear.

As people live longer and diets change, teeth are being challenged in myriad new ways. For example, while our diets may be good for our medical health, they may be detrimental to our dental health and can have a significant impact, as they often contain high levels of acidic food and drink, such as fruit juices and sparkling drinks. Sports drinks have also become more popular and are high in acidic content.

Stressful lifestyles and eating disorders can also increase tooth wear through tooth grinding and stomach acid reflux. Increased lev-

els of tooth wear are also seen in those who ingest higher than normal levels of alcohol or recreational drugs.

WHAT HAPPENS AS TEETH WEAR?

To be clear, everyone experiences some tooth wear due to the normal use of their teeth. However, it can become a real problem if the level of wear becomes much more significant. Due to one or more of the causes mentioned below, teeth can become unattractive, short as well as rough or sensitive. Even chewing or speaking can become a problem, and some people also experience jaw and muscle ache.

WHAT CAUSES TOOTH WEAR?

Erosion, attrition and abrasion are the three distinct causes of tooth wear.

Erosion may be a result of consuming acidic foods and drinks (such as fruits and juices, sparkling drinks, alcohol, sports drinks) or having stomach acid reflux (for example due to hiatus hernia, bulimia, pregnancy sickness).

Attrition describes the contact of opposing or neighbouring teeth over and above normal use, as seen

in patients who generally clench and grind their teeth at night, which is often linked to a stressful lifestyle.

Abrasion involves excessive rubbing away of the outer enamel and the inner dentine.

Vigorous tooth brushing, a coarse diet, and even ceramic crowns rubbing against natural teeth are among possible causes.

More often than not, tooth wear is multi-factorial – that is, due to a combination of causes – and unravelling this complexity is key to successful management.

HOW DO YOU MANAGE TOOTH WEAR?

In my practice, and after more than three decades of looking after patients presenting with tooth wear, we use an evidence-based holistic approach for comprehensive care, and advice may also be sought from dental or medical colleagues in related specialities.

Early diagnosis is important so that simpler treatment, including prevention and monitoring, can be provided wherever possible.

Preventative advice is based on three areas: lifestyle, diet and one's oral healthcare regime at home.

On occasion, more complex treatment can be necessary to restore a pleasing appearance and satisfactory function.



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If you are concerned that your teeth may be wearing, speak to your own dentist in the first instance, or contact Professor Eder for more information: andreweder.co.uk; andrew@andreweder.co.uk; 020 7486 7180