



THE DENTAL MIRROR

SELF-INTRODUCTION FROM DR. ROBERT NG

Greetings everyone!! I am the latest addition to the office and my main role is to provide root canal treatment for "dead or dying" teeth and troubleshoot failed root canal treatment. Prior to undertaking post-graduate training in endodontics (the dental specialty concerned with root canal treatment) in the UK, I was in general practice in London for over 12 years.

As some of you already know, I have been teaching at the Faculty of Dentistry of the University of Hong Kong for the past 3 years. Being able to work in an office which has similarly high standards in terms of equipment and quality of staff to the faculty is very important, as it allows me to continue to provide a high standard of care. In this office, installed with the latest equipment and supported by high caliber staff, I have found what I have been looking for.

I only joined the office in February and probably have not met most of you. However, I look forward to meeting the rest of you in the future (and not necessarily when you are in pain!!).



吳邦彥醫生：自我介紹

各位好！我是最新加入這個牙科專業隊伍的成員吳邦彥醫生，主要的職責是為壞死或垂死的牙齒提供根管治療，亦能替失效的根管治療再次進行治療。在英國完成牙髓病學(根管治療)研究院訓練之前，我在倫敦一間普通牙科診所實習了超過12年。

我在香港大學的牙醫學院任教已有三年。在一間醫務所能夠提供和牙醫學院一樣高質素的器材及人才是非常重要的。而在本醫務所，有先進的儀器及高水平的員工支持下，能讓我繼續提供高質素的服務，我感到十分榮幸！

雖然我在今年二月才到任，可能未有機會認識各位。無論如何，希望將來有機會認識大家(希望不是在你們牙痛之時才會面！)。

THE LOWDOWN ON ROOT CANAL TREATMENT by Dr. Robert Ng

Root canal treatment is usually required when the pulp (containing nerves and blood vessels) in a tooth has become badly inflamed, infected or dead. The most common cause of this situation is dental decay but severe periodontal disease, accidental trauma or cracked teeth are some of the other causes. Occasionally, an old root filling could fail and the tooth could become painful or uncomfortable. If the tooth is to be saved, then root canal retreatment is usually needed.

The aim of root canal treatment is to **clean** the root canal of any inflamed tissues and bacteria, **shape** the canal into a "funnel" shape and finally to **fill** up the canal completely to prevent re-infection. Carrying out the "clean, shape and fill" steps successfully in root canal treatment is complicated by the facts that most root canals are curved, some are very narrow and hard to locate, and the back teeth have multiple canals in each tooth. These obstacles could be overcome but time and patience is required from the dentist and the patient.

Recent advances have revolutionized provision of root canal treatment. For example, the operating microscope, which is the latest equipment that has been installed in our office, has revolutionized the provision of root canal treatment. The operating microscope, which is also used in other fields such as eye, vascular and brain surgery, has made many aspects of root canal treatment easier by providing good lighting and magnification (up to 22 times). Considering that some canals have a diameter as small as 0.1 mm, the benefits of good lighting and magnification from a microscope cannot be over-emphasized. In retreatment cases, a microscope allows the operator to see deep into the root canals to remove the old root fillings before carrying out the "clean, shape and fill" procedures.

Some people have the idea that root canal treatment is very painful. However, in modern dentistry, if the tooth and its surrounding area are numbed adequately, the procedure can usually be carried out with the minimal amount of discomfort. With the advanced equipment at the dentist's disposal, root canal treatment can be performed with a high degree of success and save teeth that would otherwise be extracted.



THE DENTAL MIRROR

牙根管治療的真相 資料由吳邦彥醫生提供

當牙髓(含有神經及血管)內部嚴重發炎、被感染或壞死時，通常就要進行根管治療。引致根管發炎的，最常見的是由蛀牙造成，此外牙周病、意外撞傷或磨損牙齒也是成因之一。偶然也許因舊的根管治療失效而再次引起腫痛或不適。為了保存牙齒，必需再次進行根管治療。

根管治療的目的是徹底清除牙根管內發炎組織及細菌，將牙髓鏟除至漏斗形而最後在髓腔內完全封填以阻隔再受感染的機會。能成功地完成清除、鏟除及封填這些步驟才算是完成一個根管治療。而事實上有些牙根管是彎的，有些窄的及位於牙腳底部的深處，不易到達，或是一隻牙有很多的牙根管。這些障礙全都可以克服，只要醫生與病人花多一些時間及耐性便可克服。

現今科技先進改革了根管治療，例如手術用的顯微鏡，本診所最近亦有裝置這種最新的儀器。這種手術用的顯微鏡亦適用於其他的醫學用途，例如眼、血管及腦部手術。這種能提供充足燈光及放大功能(最高可達22倍)的顯微鏡令牙根管治療更加容易進行。考慮到有些牙根管的直徑只有0.1毫米，一支有燈光及放大功能的顯微鏡功不可沒。在重複做根管治療的過程中，一支顯微鏡能讓使用者可以深入牙根管，去除舊有的封填而再次進行清除、鏟除及封填的步驟。

有些人認為進行根管治療是非常痛楚的。現今的牙醫學，只要在牙齒周圍有適當的麻醉，整個過程只會有些微的不舒服。而且配合牙醫的先進儀器，根管治療的成功率非常高並且能保存原有的牙齒。

STEPPING UP INFECTION CONTROL

by Miss Samantha Law

Infection control has always been one of our top priorities and even more so this year because of the SARS outbreak. In our office we have adopted the "universal precaution" approach which means that we treat everyone as a potential source of infection. For your protection and peace of mind we would like to tell you how we have stepped up our infection control measure this year:

1. We have changed our uniform to a disposable gown, which is discarded at the end of the day. Those who provide treatment is also wearing an additional protective sheet that is discarded after each patient to minimize cross contamination.

Our objective is to provide you treatment in a safe environment; and because we are always looking at ways to improve, we would appreciate your comments and feedback.



2. In addition to disposable gloves and masks, protective face shield is also adopted.
3. In addition to the standard high heat/high pressure sterilization procedure (autoclave) for reusable items, we are using a lot more plastic wraps for items that cannot go in the autoclave. These wraps are immediately disposed after each patient.
4. All items that go to and return from commercial dental laboratories are properly disinfected.

加強感染管制

資料由羅桂蘭姑娘提供

感染控制一直是我們醫務所首要的任務。自非典型肺炎在今年爆發以來，我們更實行「全體預防措施」，即視每一個病人都有可能是帶菌者。為了保障及讓你們安心，以下是今年在醫務所內加強了感染控制的守則：

1. 我們在制服上加穿即棄的工作袍，而且每日更換。提供治療的醫生亦會穿上額外的保護圍巾。為了避免交叉感染，治療後圍巾會即棄。
2. 除了即棄的手套及口罩外，亦有保護面部的面罩。
3. 儀器除了使用合乎標準的高熱/高壓消毒殺菌程序外，我們亦把不能進入高壓消毒爐的工具套上保護膠。在每位病人治療後，保護膠會立即棄掉。
4. 所有被傳送到製牙工場或回收的牙模都經過正確的靜化消毒。

我們的目的是在安全的環境下提供治療令大家安心，為了使我們不斷改進，歡迎閣下提出意見及回應。



THE DENTAL MIRROR

WHAT IS BRUXISM ?

by Dr. Ellen Yiu

Bruxism is the technical term for grinding and clenching of the teeth. It usually happens during sleep, although some people grind their teeth during the day as well.

How common is bruxism?

- A good percentage of adults grind their teeth at night, and many grind their teeth in a destructive way. Children also grind their teeth, but usually in response to discomfort caused by colds, ear infections or allergies. Most cases of bruxism in children resolve on their own without causing tooth damage or other problems.

What causes bruxism?

- Bruxism can have a variety of causes, but the most common are emotional factors such as stress, anxiety, anger, pain and frustration. Certain sleep disorders can trigger grinding of the teeth as well. People who are competitive, aggressive, and rushed may also be at greater risk for bruxism. Lastly, alcohol and some medications may worsen teeth grinding.

Why bruxism can be a serious problem?

- When you grind your teeth at night with no food to absorb the impact, the force can cause permanent damage to your teeth including cracked and chipped enamel, hairline fractures, and even wearing down of the teeth. If bruxism isn't treated, it can lead to gum damage, loss of teeth and restorations, and other more complicated jaw-related disorders (such as temporomandibular joint or TMJ disorders). Over time, your teeth will become sensitive due to exposed dentine, and your jaws may even move out of balance. Grinding your teeth can also

cause a wide variety of other symptoms including soreness and fatigue in your jaw and facial muscles, and earaches or headaches, especially when you wake up in the morning. There is no known cure for bruxism, but there are ways to reduce or stop your grinding and limit further damage.



If you think you might be grinding your teeth at night, the first thing to do is visit your dentist to assess any possible damage. It's essential to stop further damage to your teeth, gums, and jaws. A custom-fitted plastic appliance, called a night guard, constructed of either hard acrylic or rubbery latex, may be recommended for you to wear on your teeth at night to absorb the damaging forces of teeth against teeth.

大、焦慮、憤怒、痛楚及挫折。連續的睡眠紊亂亦能引致磨牙。一個精神緊張及性急的人亦好大機會患上磨牙症。最後，酒精及某些藥物亦可能令磨牙的情況更嚴重。

為甚麼磨牙會是嚴重的問題？

- 由於睡眠時牙齒長期咀嚼，而沒有食物阻礙撞擊，這股力足以損壞你的牙齒及引致很多問題，包括令牙齒崩、珐瑯質磨走、牙齒有裂紋、牙齒鬆動、牙床受損及顎骨關節炎。如不治療，可能引致牙齒的珐瑯質失去而露出牙的本質會令到牙齒越來越敏感，上下頷亦可能甚至失去平衡而移位。磨牙亦會引起其他病徵，包括顎位及面部肌肉酸痛和疲勞，更會引起耳痛、頭痛，特別在早上起床時。目前磨牙症是沒法痊癒的，但可以減少及防止磨牙對牙齒的損壞。

假如你懷疑睡眠時有磨牙的情況，首先要讓牙醫評定損壞的程度。防止牙齒、牙床及顎部的損壞是非常重要的。一個為你們特製的塑膠器具，名為牙膠分別由硬膠及軟膠二種物料製造，大致都會推薦給有磨牙症的病人，以減低在睡眠時磨牙的力度及對牙齒的損害。

甚麼是磨牙症？

資料由姚靄安醫生提供

磨牙症是牙齒咬緊或上下牙對磨時發出聲響的病徵。通常發生在睡覺的時候，亦有些人會在白天都有這種現象。

磨牙症是否普遍？

- 超過一半的成年人晚上會有磨牙的現象，有些成年人更會破壞性地磨牙。兒童亦有磨牙的情況，但通常是由傷風、耳朵受感染或敏感所引起的不適而做成。大多數兒童的磨牙都會自我痊癒而不會對牙齒造成損害或引起問題。

是甚麼導致磨牙？

- 磨牙的成因有很多種，而最普遍的可能與情緒因素有關，例如精神壓力



THE DENTAL MIRROR

ORAL HYGIENE TIP OF THE YEAR!

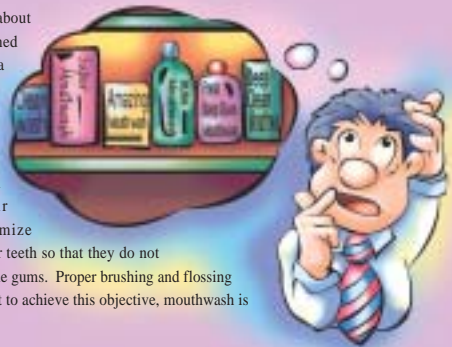
by Miss Samantha Law

Do I need to use a Mouthwash?

Mouthwashes, when used properly, can reduce bacterial plaque and mask odors for a few hours; although the overall benefit is only slightly better than brushing and flossing alone. One of the causes of bad breath may be due to poor oral hygiene and/or tartar build up around teeth. If this is the case then no amount of rinsing, brushing or flossing can remove bad breath. Tartar can only be removed at your dental visit with special tools. Persistent bleeding gums can be a sign of gum disease and the use of a mouthwash is not a cure.

Certain brand of mouthwash works by loosening the bacteria before brushing, others may be used after brushing as an antiseptic. Most contain fluoride, which can prevent cavities. Some mouthwashes are designed to treat gum infection but not recommended for long term use because they can stain teeth. The list goes on and on, if you would like to find out which one is suitable for you, please ask at your next dental visit. We can recommend one to you based on your needs and after a complete assessment of the condition of your mouth.

If you are good about getting your teeth cleaned and checked on a recommended interval, then the use of a mouthwash is entirely optional. The truth is we all have bacteria in our mouth and our objective is to minimize bacterial growth on our teeth so that they do not damage our teeth and the gums. Proper brushing and flossing are extremely important to achieve this objective, mouthwash is only an accessory item.



口腔健康貼士 - 漱口藥水

資料由羅桂蘭姑娘提供

我需要用漱口劑嗎？

漱口劑如適當使用的話，能減少口腔內的細菌，更能令口腔清新長達數小時；不過總括來說，刷牙及用牙線的效益比漱口劑更好。導致口臭的其中一個原因可能是口腔健康有問題，及由生長在牙齒週圍的牙石和細菌造成。牙石只能由牙醫或牙齒衛生員使用特別的儀器清除，牙肉出血是牙周病的先兆，使用漱口劑是不能夠醫治的。

若干牌子的漱口劑都是先在刷牙前將細菌軟化，其他則在刷牙後用來減少細菌生長。大多數的漱口劑都含有防止蛀牙的氟化鎂。某些漱口劑則專為牙床感染而設，但是不建議長期使用，否則牙齒會留有污漬。總之，有關漱口劑的問題數之不盡，如果你想選擇一隻適合你的漱口劑，不妨下次來訪時，徵詢牙醫或牙齒衛生員的意見。我們會根據你牙齒的需要，口腔的情況作出專業的評估。

假如採用正確的刷牙方法並作定期檢查，你不一定需要使用漱口劑。事實上，我們的口腔裡都有細菌，而我們的目的是減少細菌生長以及防止它們損害牙齒及牙床。正確地使用牙刷及牙線是極為重要的，漱口劑不是必須的。



THE DENTAL MIRROR

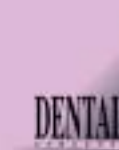
醫務所最新消息

我們已集合牙醫學上最常見的問題，及各種不同的治療方法，全都放在電腦螢幕上。這服務已在醫務所的電腦內設置，希望閣下找到所需及有關的資料。



過往本醫務所只提供現金及支票付款的方式，由現在開始，為方便閣下在信用卡賺取積分優惠，你可以用 VISA 卡或萬事達卡付款。

由九月份起，本醫務所的电郵地址已改為 dentist@dentalmirror.com.hk，如果你想預約或有任何疑問，歡迎隨時聯絡我們。



THE DENTAL MIRROR

Drs. Chan, Cheung & Associates
Dental Surgeons

Address: 503 Aon China Building, 29 Queen's Road, Central, Hong Kong SAR. Tel: 2522-5752, 2522-5979 Fax: 2530-5618 Email: dentist@dentalmirror.com.hk

December 2003

WORDS FROM DR. WILLIAM CHEUNG

Year 2003 started with the much-anticipated war in Iraq. Thankfully it did not last as long a time as many had originally thought it would. However, the repair and reconstruction of the damage resulted from war will take much longer. Our thoughts and prayers are with those who suffered physical and emotional trauma, and many innocent ones who lost their lives, these are unfortunately irreparable damages.

Just as everyone was hoping that the economy would recover after the war towards the end of February, we were then challenged by the outbreak of SARS in many parts of Asia. Hong Kong was hit the hardest among all the infected areas worldwide, with the highest number of infected cases in a single city and the highest number of deaths. The total economic loss that resulted was so huge it was not possible to estimate. This was undoubtedly a tragedy, but the people of Hong Kong became more united than ever as a result of this tragedy, and people are much more conscious



All of us have learned a painful lesson and we hope that we will be better equipped to face other health-related crises in the future. We pay a special tribute to our front-line medical personnel who fought bravely during our war against SARS and we are happy to see that there are definite signs that a post-SARS recovery is taking place in Hong Kong!

During the SARS outbreak in March and April, we not only monitored the progress of the spread of infection in Hong Kong closely, but also repeatedly evaluated our own infection control measures in the office. As a result of these evaluations, we have stepped up our measures in a number of ways to minimize any possible infections and cross-infections. In addition to highlighting these measures in an article by Miss Sam Law in this issue of the Dental Mirror, I have published an article on this topic in Dental Asia in June this year to share this with my colleagues throughout Asia. You will also find an interesting write-up by Dr Ellen Yiu on the topic of teeth grinding and clenching and their effect on us in this issue.

Dr Benjamin Ho left our office in the beginning of the year to relocate to Beijing. Dr Robert Ng, a root canal specialist formerly trained in the U.K., joined us in February and we welcome him on board our team. He will introduce himself in this newsletter and give you a briefing on the surgical microscope we have purchased, to enable us to monitor treatment clearly under high magnifications. This again is another effort on our part to improve our service to you as you have continued to support us throughout the years. All of us in the office wish you a Merry Christmas and a healthy and prosperous New Year.

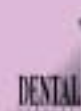
張偉民醫生的話

早已預料的伊拉克戰事終於由 2003 年開始。慶幸這場仗打的時間比大多數人想像中短。可是，戰後所造成的破壞，其重建及修復工作可能比這場仗的時間更長。我們要為在這件事中經歷了不論在心靈或身體上受盡痛苦及創傷的人禱告，亦為許多無辜地失去親人的人禱告，不幸這全都是無法彌補的傷害。

正當所有人都期望經濟會隨著戰事在二月底結束而復甦之時，我們又受到在亞洲多處地方爆發的非典型肺炎疫症所挑戰。香港是全球受感染城市中受到最沉重的打擊的地方，在感染數字及死亡數字上均居高位。在經濟上龐大的損失是無從估計的。毫無疑問，這是一個悲劇，不過這悲劇令香港人發揮了凝聚力，更令我們意識到個人及環境衛生對健康的重要。我們痛苦的上了一課，並希望大家能好好裝備自己以迎接未來的危機。我們向勇敢對抗非典型肺炎的前線醫護人員作高度致敬，亦喜見香港從非典型肺炎後漸漸康復過來。

非典型肺炎在三、四月爆發期間，我們除了密切留意感染的擴散過程之外，亦不斷重複評估我們醫務所的感染管制守則。而根據這些評估，我們亦加強了在感染管制守則內的其中幾項，從而將感染減至最低亦同時避免交叉感染。羅桂蘭小姐就藉這個題目在今期的通訊內撰寫了一篇有關評估的重點文章，而本人亦於六月份的一本牙醫專業刊物內發表了有關題目以供各亞洲同業分享。在今期的通訊你亦將會看到由姚靄安醫生撰有關磨牙及咬牙的問題及其影響。

何鴻基醫生已經在今年年初離職，他現在北京工作。而吳邦彥醫生，一位在英國受訓的牙根管治療專家，在二月已加盟本醫務所，全體員工藉此歡迎吳醫生的到任。吳醫生在這通訊中已自我介紹，並講述有關本醫務所最新添設的手術顯微鏡，此顯微鏡的高倍數放大功能，令我們在治療時對患處有更清晰的觀察。由於閣下在過去一年不斷的支持，使我們致力改善而為你們服務。謹代表醫務所各員工，祝願大家聖誕快樂，並於未來一年身體健康。



Drs. Chan, Cheung & Associates

Dental Surgeons

Address: 503 Aon China Building, 29 Queen's Road, Central, Hong Kong SAR.

Tel: 2522-5752, 2522-5979 Fax: 2530-5618 Email: dentist@dentalmirror.com.hk

