

PD Essentials

Your guide to the latest news and views

Hot off the press!

Spring is a time for the new – here, **Professor Andrew Eder** introduces emerging terminology in his research on tooth wear

Wikipedia describes ‘ablation’ as: **‘the removal of material from the surface of an object by vaporisation, chipping, or other erosive processes.’**

In dental terms, ablation has been used to describe certain types of tooth wear, often linked to self-harming, such as the abrasion that may be seen in patients with tongue piercings, most commonly causing wear of premolars, or those working as hairdressers, who may frequently hold hair pins between their anterior teeth.

It may be that one could categorise patients who bite their nails and chip anterior veneers as causing ablation. Other examples include home bleaching solutions, which can bring together erosive and abrasive substances, such as strawberries or lemons and sand or salt, to form a damaging erosive and abrasive paste, or recreational drug misuse, causing parafunctional attrition.

Frequent consumption of alcohol, or other acidic beverages, such as citric fruit juice, leading to erosion of the tooth surface, could also be considered ablation, as could swimming in a chlorinated pool.

Evidently, this new terminology requires further clarification and documentary evidence, which will, no doubt, come in time as awareness of tooth wear and its prevalence grows.

Bleachorexia

White teeth have always been considered an



attractive attribute. Historically, people have used abrasive substances to remove extrinsic stains and whiten teeth, but this, of course, removes enamel and causes tooth wear.

Latterly, the dental profession found that, at the right levels and frequency, carbamide and hydrogen peroxide can be applied to the teeth, producing the aesthetic benefits without the harmful effects. In addition, in recent years, the provision of tooth whitening has become commonplace in dental surgeries across the globe. In the increasingly materialistic world in which we live, appearance is more important than ever and this has given rise to an obsessive pursuit for ‘perfection’.

Bleachorexia is an addiction to tooth whitening; a condition arising from this shift

in cultural attitudes.

First described by the American Dental Association, bleachorexia features dysmorphia – an altered perception of reality, leading to an obsessive use of whitening products.

Facilitating this is unrestricted access to dental bleaching products from non-dental professionals, both online and at unlicensed locations, such as beauty salons.

Additionally, there is a growing industry in ‘at home’ whitening products, such as targeted toothpastes and gels, many of which achieve their results through abrasion of the tooth surface.

Some foods have also been reported to have a whitening effect (strawberries, for example), and these can be adopted in combination with an abrasive substance, as described above.

If these are frequently applied to the tooth surface, just like dental bleach, they can cause wear, which is exacerbated when in combination with abrasives.

As dental professionals, it is important that if patients ask about this increasingly popular procedure, we inform them of the safe and evidence-based ways to whiten teeth. **PD**

Professor Andrew Eder is a specialist in restorative dentistry and prosthodontics. He is clinical director of the London Tooth Wear Centre, a specialist referral practice in London. He is also professor/honorary consultant at the UCL Eastman Dental Institute and associate vice-provost (enterprise) and director of CPD and short course development at UCL. For further information visit www.toothwear.co.uk.