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DIAGNOSIS, NONSURGICAL WHY IS SALIVA SO AND SURGICAL TREATMENT **OF OBSTRUCTIVE SLEEP APNEA**

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eep-disordered breathing is a hot topic in dentistry and Omedicine today. Dentists are in a unique position to screen for, diagnose and treat their patients with obstructive sleep apnea. OSA is a serious, potentially life-threatening condition which can result in hypertension, congestive heart failure and even death. This presentation will cover the screening, diagnosis and contemporary management of sleep-disordered breathing in a comprehensive format, both for the general restorative dentist, the orthodontist and the oral and maxillofacial surgical specialists. From the medical history and clinical examination, to radiographic and diagnostic imaging findings, to a detailed discussion of the clinical polysomnogram and sleep medicine consultation referral, to mandibular advancement oral appliance therapy and CPAP therapy, to upper airway surgery including uvulopalatopharyngoplasty (UPPP), laser-assisted uvuloplasty (LAUP), nasal septoplasty, inferior turbinectomy, tonsillectomy and adenoidectomy, radiofrequency tongue and soft palate ablation, to maxillomandibular advancement and genioglossus advancement, to tongue and hyoid suspension, this presentation will provide direct and practical real life ways to improve the health and prolong the life of your patients with maximal fulfillment in return.

IMPORTANT FOR YOUR PATIENT'S HEALTH?

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his course will touch on several clinical conditions in which saliva plays a very important role. The first of these is dental caries and the second is dental erosion. In both these conditions tooth mineral is dissolving due to the presence of acid in the mouth. We will discuss why teeth dissolve in acid and the different ways in which saliva and the acquired enamel pellicle influence these two conditions, as well as those of attrition and abrasion. Participants will learn how to differentiate among the various possible causes of erosion and dental caries. The opposite problem is the formation of dental calculus, where mineral is depositing in dental plaque. We will discuss how saliva influences this process and its role in the site-specificity of dental calculus. Saliva has recently been suggested to be important for the health of the oesophagus, particularly in patients with acid reflux. Participants will learn the possible benefits for the oesophagus of salivary stimulation. Participants will also learn to differentiate among the many possible causes and treatments available for patients with xerostomia or dry mouth, with an emphasis on the various drug categories which may lead to this condition. Since saliva is being used in preference to blood as a diagnostic fluid for various drugs and diseases and particularly as a source of DNA for genetic studies, we will discuss some of the implications of these studies.

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