



# Guiding one patient at a time to better oral health

Anna Middleton presents the case of a patient with a whole-mouth BPE score of 2, subsequently achieving a full clean using an effective new protocol that is both minimally-invasive and pain-free...

A regular attendee at the practice, seeing both the hygienist and dentist, this 43-year-old male patient presented with poor oral health. Extra-oral and intra-oral examinations were carried out, including oral cancer screening and a Basic Periodontal Examination (BPE), and he was assessed to have a score of 222/222 (i.e. no pockets >3.5 mm, but supra- or sub-gingival calculus/overhangs).

Visually, there was a clear lack of interdental cleaning, with bleeding on probing and marginal inflammation, as well as visible plaque and calculus deposits. On the plus side, he was a non-smoker and at the time of presenting his general health was good.

## Guided Biofilm Therapy

A solution was proposed that would provide the most suitable course of treatment for the patient based on clinical findings. This involved a personally-tailored oral hygiene routine and full-mouth Guided Biofilm Therapy (GBT) with EMS AIRFLOW (using PLUS powder and ultrasonic (USS) debridement of the calculus). Not only would this procedure achieve the desired results, it would also be minimally-invasive and pain-free.

Once everything had been explained to the patient, he gave consent for GBT treatment to go ahead.

A gentle, effective and safe state-of-the-art system, GBT consists of treatment protocols

based on a patient's diagnosis and risk assessment.

Following assessment, the patient's full mouth was disclosed. The patient was shown what had been disclosed and educated in how to manage his oral hygiene effectively at home. Full-mouth GBT and full-mouth USS was then performed. This was followed by the application of a fluoride gel to the teeth.

Using GBT rather than more traditional prophylaxis methods (i.e. scale and polish) left a good amount of time in the 45-minute appointment to educate the patient about what had been done, why it had been done, and what was needed going forwards.

## Looking to the future

This discussion included the provision of verbal post-op instructions, and the patient was again advised of his clinical diagnosis of generalised gingivitis and the importance of good oral hygiene.

This led on to a review of his oral hygiene and personalised home care instructions. He had been using a manual toothbrush and performed no interdental cleaning. Instead, he was advised to use an electric toothbrush twice daily, clean between the teeth with interdental brushes and make use of a single-tufted brush.

The patient was advised to book a 30-minute review appointment in 2 to 4 weeks to reassess

his periodontal health, to ensure the bleeding and inflammation had resolved. During that appointment, the patient's oral hygiene instructions would be reviewed, and debridement performed as appropriate (i.e. another round of GBT).

For further details about what EMS Dental has to offer dental professionals in the UK, please visit [www.ems-dental.com](http://www.ems-dental.com)

## ABOUT THE AUTHOR

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Anna Middleton is a multi-award-winning dental hygienist. She studied at The Eastman Dental Hospital after working as a dental nurse, and graduated in 2015 from the Faculty of Royal College of Surgeons. She is the founder of London Hygienist, which has a mission to change the way oral health care is delivered to patients. Anna is a key opinion leader for Philips, a global Guided Biofilm Therapy ambassador for EMS Dental and a member of the British Society of Dental Hygiene and Therapy. Anna lectures, and writes regularly for both industry and consumer press.