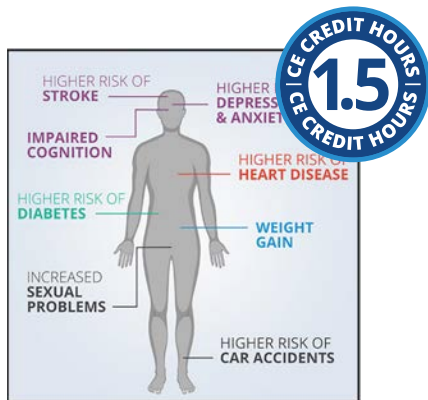


The Synergistic Interplay Between Dental Sleep Medicine and General Dentistry, Should Your Practice be Concerned? Why?



Course Author(s): Gene Santucci, DDS, MA

CE Credits: 1.5 hours

Intended Audience: Dentists, Dental Hygienists, Dental Assistants, Dental Students, Dental Hygiene Students, Dental Assistant Students

Date Course Online: 11/11/2020

Last Revision Date: N/A

Course Expiration Date: 11/10/2023

Cost: Free

Method: Self-instructional

AGD Subject Code(s): 730

Online Course: www.dentalcare.com/en-us/professional-education/ce-courses/ce621

Disclaimers:

- P&G is providing these resource materials to dental professionals. We do not own this content nor are we responsible for any material herein.
- Participants must always be aware of the hazards of using limited knowledge in integrating new techniques or procedures into their practice. Only sound evidence-based dentistry should be used in patient therapy.

Conflict of Interest Disclosure Statement

- Dr. Santucci reports no conflicts of interest associated with this course.

Introduction – Sleep Disorders

Disturbed sleep is a Public Health issue exhibited by 2/3 of the world's population. Sleep related breathing disorder treatment was outlined in a new policy in 2017 by the ADA. How does this policy effect your private practice? What are the co-morbidities that may affect the patient's treatment?

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Overview

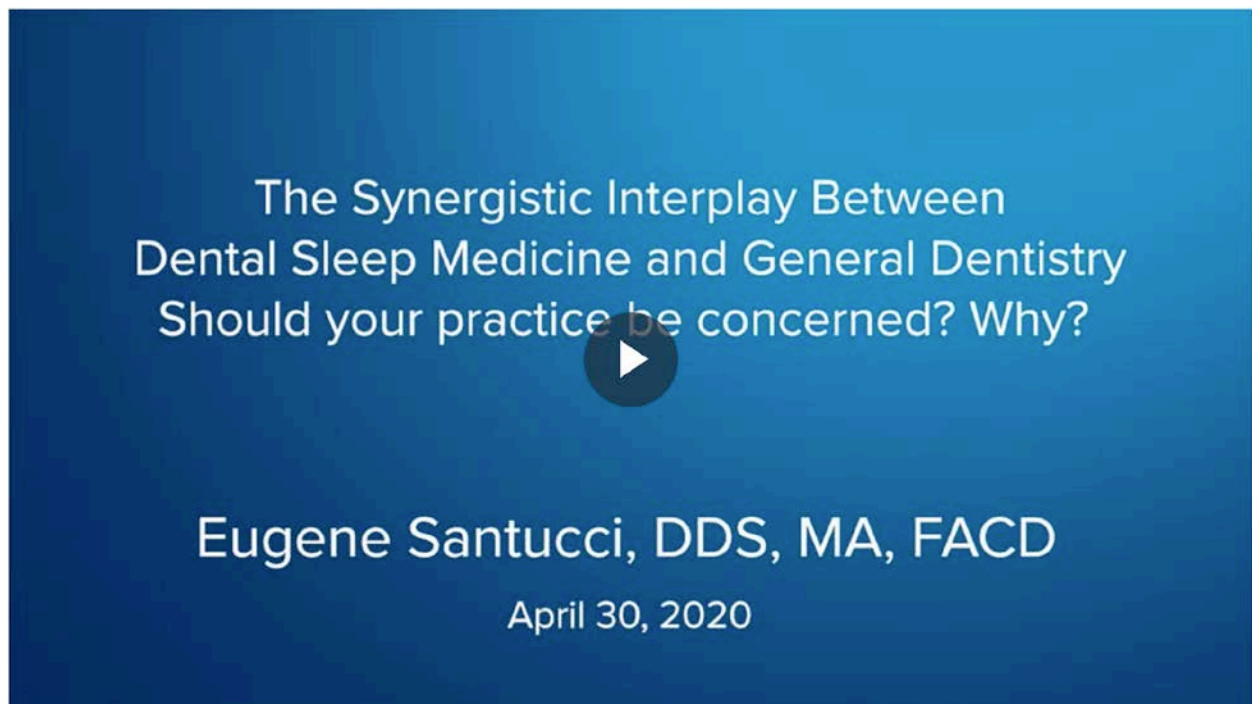
This course will bring to light not only the need to evaluate your patients for disturbed sleep patterns but offer the basic information to add to your existing evaluation process for all patients of record. As dentistry expands its vision of care to encompass the total patient, sleep is definitely in the crosshairs.

Learning Objectives

Upon completion of this course, the dental professional should be able to:

- Detect the children and adults in your practice that suffer from disturbed sleep.
- Explore the effect on total body health as a result of the various comorbidities resulting from disturbed sleep and how it may affect your general dentistry.
- Understand why a child experiencing ADHD symptoms just may be the result of disturbed sleep.
- Explore the recent ADA resolution regarding your office's role regarding the detection, referral or treatment regarding this new paradigm of total patient care.

Video



[Click on image to view video online.](#)

Course Test Preview

To receive Continuing Education credit for this course, you must complete the online test. Please go to: www.dentalcare.com/en-us/professional-education/ce-courses/ce621/test

- 1. Acid erosion is a chemical dissolution of dental hard tissues without bacterial involvement. The acid source can be both intrinsic and extrinsic in nature.**
 - A. Both statements are true.
 - B. Statement one is true, statement two is false.
 - C. Statement one is false, statement two is true.
 - D. Both statements are false.

- 2. In a study by Fallor and Eversole, surface enamel loss was _____.**
 - A. less with sodium fluoride paste
 - B. less with high concentration sodium fluoride paste
 - C. less with stannous fluoride paste
 - D. not different when either paste was used

- 3. In his 2010 article, Dr. Rouse explained the interaction of _____.**
 - A. sleep bruxism, GERD and diabetes
 - B. sleep bruxism, GERD and sleep apnea
 - C. GERD, kidney disease and sleep apnea
 - D. bruxism, sleep apnea and orthodontics

- 4. Our saliva is composed of _____.**
 - A. 50% water and 50% electrolytes
 - B. 50% water and 50% glycoproteins
 - C. 99.5% water and 0.5% other components
 - D. 75% water and 25% antibacterial components

- 5. Which of the following sleep survey(s)is/are recommended for children?**
 - A. Stop-Bang
 - B. Bears
 - C. PSQ
 - D. Epworth
 - E. B and C

- 6. Senate Bill #238 encourages school districts to _____.**
 - A. start class times as early as possible
 - B. start class no earlier than 8:30
 - C. start class times at 7:30
 - D. encourages later afternoon session

- 7. Following a patient's diagnosis of Obstructive Sleep Apnea, which of the following treatment concepts is true?**
 - A. C-pap is both highly effective and exhibits high compliance.
 - B. A MAD appliance exhibits minimal effectiveness but high compliance.
 - C. C-pap is less effective over time along with low compliance.
 - D. A MAD appliance is slightly less effective than C-pap but exhibits high compliance.

8. **Following a child's consumption of a sports drink or cola, a parent is wise to _____.**
- A. increase the child's oral Ph by having them chew a piece of cheese
 - B. have the child brush their teeth immediately
 - C. not be concerned by the small amount of acid consumed
 - D. not be concerned since erosion occurs only in adults
9. **Pothole dental lesions resulting from acid attack should _____.**
- A. not be restored since bacteria is not involved
 - B. be treated aggressively with crowns to protect against future acid attack
 - C. consider conservative treatment with sealants or flowable composites
10. **The two main factors that determine awake and sleep pressures are Circadian Rhythm and Adenosine phosphate. Both are affected by caffeine.**
- A. True
 - B. False
11. **The ADA policy of 2017 related to breathing disorder treatment, suggests a policy for you to implement into your dental practice which is?**
- A. Become involved in treating these patients, no further training is suggested.
 - B. Include a sleep survey as part of your exam.
 - C. Only refer patients for sleep treatment to a dentist since they are accustomed to fabricating appliances.
 - D. Evaluate the sleep survey and form a diagnosis.
12. **A complete Hypnogram cycle consists of _____.**
- A. 4 stages of REM sleep followed by 4 stages of non REM sleep
 - B. 4 stages of non REM sleep followed by 1 stage of REM sleep
 - C. 2 stages of non REM sleep followed by 2 stages of REM sleep
 - D. 2 stages of non REM sleep followed by 1 stage of REM sleep

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Additional Resources

- No Additional Resources Available.

About the Author

Gene Santucci, DDS, MA



Dr. Gene Santucci is an Associate Professor in the Department of Preventive and Restorative Dentistry at the University of the Pacific, Dugoni School of Dentistry (UOP), in San Francisco, CA. He holds a master's degree in educational psychology and counseling from the University of the Pacific. He has balanced dental education with private practice for over 30 years. Dr. Santucci is Co-Director of the Dental Sleep Mini-Residency Program at UOP as well as Content Coordinator for Sleep Medicine Curriculum at the dental school. He was a faculty member in their prestigious complex and esthetic rehabilitation program and is Course Director for the second year integrated preclinical restorative course teaching a curriculum that includes esthetic dentistry, occlusion and implants. He was a member of and author on UOP's Task Force Report regarding sleep medicine course content, in dental education.

Dr. Santucci's goal is to encourage all dental professionals to become the first line of defense for children and adults in the evaluation, treatment or referral of patients with various types of sleep disturbances ranging from snoring to obstructive sleep apnea. Those of us in the dental profession can be responsible for many positive changes in people's health. We can have an impact on children who are not performing to normal school standards, as well as adults who have medical issues involving co-morbidities such as diabetes, stroke, cardiovascular disease, hypertension and gastric distress.

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