SOUND OFF ON SEALANTS

Dental hygienists weigh in on their use of sealants in the dental practice and their role in selecting the right product.

Compiled by THAIS CARTER

When it comes to using dental sealants on pediatric patients, we were excited to find that 96% of you are actively engaging in this form of preventive care.

On the flip side, it was disappointing to find that in the instances when you wouldn't (or couldn't) place sealants, the majority of you (66%) said it was because insurance won't cover the procedure. And, even as we all work toward encouraging dental insurance companies to cover more preventive procedures, as 39% of you indicate, educating patients is still a hurdle as well.

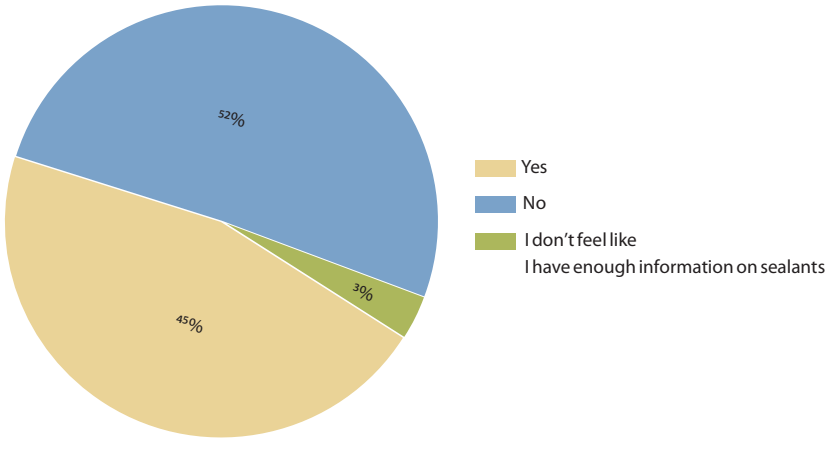
> "We believe the high preventive benefits of sealants far outweigh the risk. So until the dental industry creates alternative materials, we recommend their continued use. But we do recommend precautionary application techniques."

Top 3 Brands

The following three products, based on reader feedback, appear to be the most-used in dental practices:

- 3M ESPE Clinpro Sealant
- Ultradent UltraSeal XT Plus

IF YOU DO NOT USE sealants in your practice, is that a decision you and your dentist agree on?



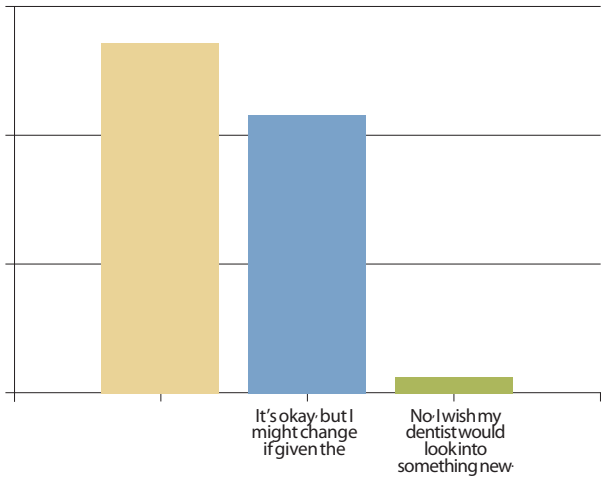
96% of respondents would feel comfortable explaining the science and benefit behind sealant use.

Source: March 2011 Sealant Survey

38% of children 12 to 19 have dental sealants.

Source: National Health and Nutrition Examination Survey (data

If YOU DO USE sealants in your practice,



30% of children 6 to 11 have dental sealants.

Source: National Health and Nutrition Examination Survey (data collected

96% of respondents use dental sealants on pediatric patients in their practice.

ABOUT THIS SURVEY

The March 2011 Sealant Survey was e-mailed to 15,000 dental hygienists in the U.S. The survey was completed by 342 people.

ADA on BPA

Excerpts from the Council on Scientific Affairs Statement (July 2010)…

BPA can become part of dental composites or sealants in three ways:

- As a direct ingredient: ADA research, confirmed by direct communications from dental manufacturers, indicates that BPA is rarely used as a formula ingredient in dental products.
- As a product of the degradation of the material in the oral cavity: Composite resins are formulated from a mixture of monomers that are commonly based on bisphenol A glycidyl methacrylate (bis-GMA). Some composite resins may contain other monomers, in addition to bis-GMA, that are added to modify the properties of the resin. An example is bisphenol A dimethacrylate (bis-DMA). Bis-DMA-containing materials can release very small quantities of BPA because bis-DMA is subject to degradation by salivary enzymes.
- As a trace material: BPA may be used in the production of other ingredients found in some dental composites and sealants. Bis-DMA and bis-GMA are both produced using BPA as a starting ingredient, so residual trace amounts of BPA may be present in the final product.

To put the exposure from dental materials into perspective, consider the exposure that occurs from the placement of six dental sealants containing bis-GMA in a child (7 to 14 years of age). The estimated one time exposure (upon sealant placement) for a male child of median body weight (51 to 112 pounds)[1] is approximately 5.5 micrograms,[2] which is two to five times lower than the estimated daily exposure from food and environmental sources.[3]

According to the CDC, dental caries remains the most common chronic disease of children aged 5 to 17 years. Untreated cavities can cause pain, dysfunction, absence from school and poor appearance—problems that can greatly affect a child's quality of life… The ADA fully supports continued research into the safety of BPA; but, based on current evidence, the ADA does not believe there is a basis for health concerns relative to BPA exposure from any dental material.

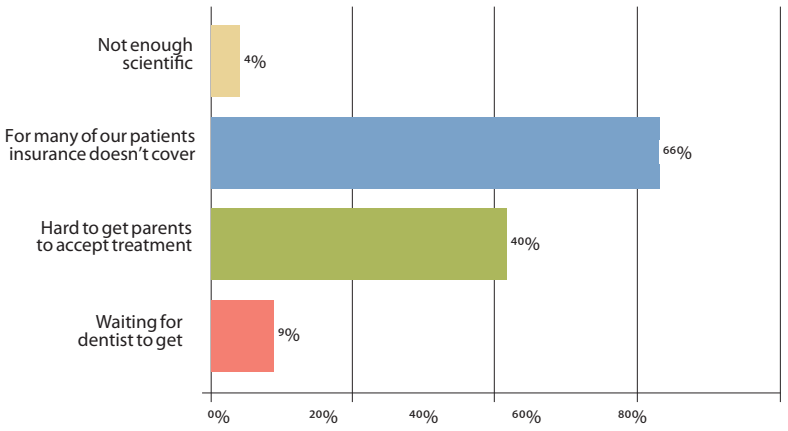
REFERENCES

1. Centers for Disease Control and Prevention. Growth Charts 2 to 20 years: Boys

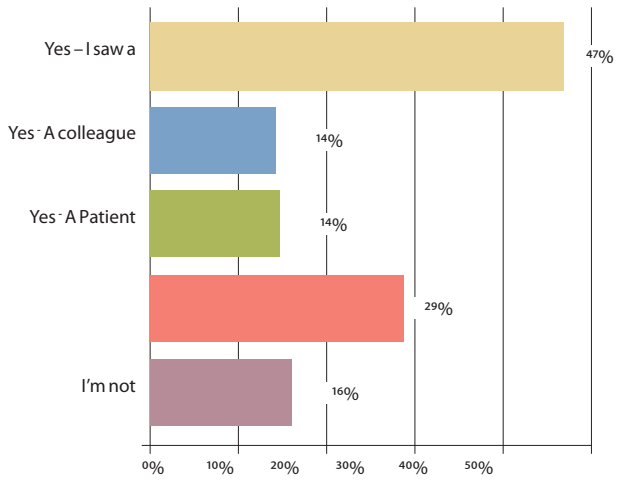
2. Joskow R, Boyd Barr D, Barr JR, Calafat AM, Needham LL, Rubin C. Exposure to bisphenol A from bis-glycidyl dimethacrylate-based dental sealants. J Am Dent Assoc. 2006;137:353-62.

3. Center for the Evaluation of Risks to Human Reproduction. National Toxicology Program U.S. Department of Health and Human Services. NTP-CERHR Expert Panel Report on the Reproductive and Developmental Toxicity of Bisphenol A. November 26, 2007.

What are some of the main reasons you wouldn't



Are the recent concerns over possible BPA (Bisphenol A) in dental sealants something that has caught your eye? Check all that apply…



"People shouldn't be scared by this. The amount of exposure is extremely low… the layer that contains BPA can be wiped off with cotton or rinsed off with a stream of water…"

Dr. Burton Edelstein, chairman of social and behavioral sciences at the Columbia University College of Dental Medicine, in an interview with MSNBC

Getty Images / Paul Burns