

Branching Out

Dear Patients...

Wow! It's already well into a new year and spring is in full bloom! Things have been busy at the office. Ashley is in the process of revamping our website and working with Google. You may have noticed a text or email prompting you to give a review of our office. This is to promote our Google presence on the web. Thank you in advance for your support!

If you would like to receive appointment reminders via email or text message, please let us know at the front desk.

As I'm sure many of you are aware, I am currently president of the Indiana Dental Association. So far, I have helped dedicate a state landmark for Dr. Otto King, and I have met with several state and federal legislators to share with them the importance of dental health to the population, and to let our legislators know what our patients need in terms of oral health. I have been on several committees to discuss health issues, and was selected to serve on the voting and interview committee in January to select the new dean of Indiana University School of Dentistry in Indianapolis. Thank you for your patience, as I was required to attend several meetings in Indianapolis and had to be away from the office.

In the upcoming months, I have several meetings that will take me across the country, and as such I'm very glad to have Dr. Mark's assistance in the office. My term as president of the IDA will end in June. The time has gone by quickly, but I can honestly say that it has been a wonderful experience and a great ride!

Somehow I found time to do a little woodworking over winter break! In case you hadn't heard, I broke a few ribs while playing in my barn just after the new year. So that was another reason why I was out of the office. I am now all healed up and doing better than ever ... ready to help with your dental needs.

Thank you all for your continued support of our practice over the years. It's because of patients like you that I am still very excited about my profession. I look forward to working together and bringing you the very best that dentistry has to offer.

Wishing you only the best,

Dr. Fridh

**Produced for
the patients of
Daniel W. Fridh,
D.D.S., M.A.G.D., and
Mark A. Jurek, D.D.S.**

1200 Andrew Avenue
La Porte, IN 46350

OFFICE STAFF

Patient Care Coordinators:

Patty Gangwer
Monica Mendoza
Linda Pinkstaff

Business Manager:

Ashley Fridh Stout

Expanded Function Dental Assistant:

Lindsay Gogel, EFDA, CDA

Dental Assistants:

Bonnie Igelski, EFDA
Elaine James, EFDA

Licensed Hygienists:

Jennie Alexander, LDH
Sharon Humphrey, LDH
Sharon Mullen, LDH

Office Hours

Mon.	8:30 a.m.-1:30 p.m. 3:00 p.m.-6:00 p.m.
Tues.	8:30 a.m.-1:00 p.m. 2:00 p.m.-5:00 p.m.
Wed.	8:30 a.m.-1:00 p.m. 2:00 p.m.-5:00 p.m.
Thurs.	8:00 a.m.-Noon
Fri.	8:00 a.m.-1:00 p.m.

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Whatever your needs...expect excellence.

The Benefits of Sugarless Gum

A few simple actions can help you maintain good oral health: brush twice a day, floss daily, visit the dentist on a regular schedule, and limit your sugar intake. Chewing sugarless gum complements that regimen nicely, providing oral-health benefits beyond the absence of sugar.

The act of chewing spurs saliva production. Saliva helps to neutralize or wash away acids on a tooth's surface, as well as food particles, reducing the risk of tooth decay. Bacteria feed on sugars and carbohydrates found in tooth plaque, then release acids. These acids attack the enamel of the teeth and need to be neutralized/removed. Chewing sugarless gum for 20 minutes following a meal is beneficial.

Whitening treatments can cause tooth sensitivity. Increased saliva flow from chewing sugarless gum seems to lessen its intensity, according to research published in the *British Dental Journal*, although the reasons for this aren't fully understood.

The sweetener in some sugarless gums, xylitol, reduces the number of acid-producing bacteria in the mouth and makes it more difficult for them to stick to teeth, keeping tooth enamel strong. Some sugarless gums contain calcium and phosphate, which fortify a tooth's enamel.

Enjoy a stick of sugarless gum! Your oral health stands to benefit.



**Thank you for
choosing us!
We are so grateful
for wonderful
patients like YOU!**

Daniel W. Fridh, D.D.S., M.A.G.D.
Comprehensive Dentistry
1200 Andrew Avenue
La Porte, IN 46350

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Dentists Haven't Used Novocain in Over 30 Years!

It's true. Here's a brief look at the rise and fall of Novocain in dentistry.

The first widely used local anesthetic in dentistry was ... cocaine. It was introduced to the dental world in 1884. Some general anesthetic products were entering the scene concurrently (e.g., nitrous oxide). A few shots of whiskey counted as anesthesia in some areas.

Cocaine was an effective pain-numbing agent, but with hindsight we know the downsides: its addictive nature and negative effect on cardiovascular health. In 1905, procaine was synthesized to replace cocaine and was branded as Novocain. Novocain was effective, safer, and became a dental mainstay for a good chunk of the 20th century.

Over time, however, it was noted that some Novocain recipients suffered allergic reactions. New local anesthetics were developed in the 1940s that lowered the incidence of allergic reactions but maintained excellent pain-numbing qualities. They became commercially available in the 1950s and began pushing Novocain to the side. By the mid-1980s, dental usage of Novocain in this country ended unceremoniously. Today, lidocaine rules the roost, although other options are available.

However, the word "novocaine" (generic usage, with an "e") has survived in the nondental lexicon as a blanket term referring to all injectable local anesthetics used in dentistry—akin to referring to all facial tissue as "Kleenex."

