

# Tooth Surface Loss – the latest, and possibly the greatest, challenge to oral health!



**Professor Andrew Eder**  
*Dentistry & Oral Health*

**D**id you know that over 50% of children and pretty well all adults show signs of tooth surface loss? From as young as we can remember, we are all told to brush our teeth to stop them from becoming decayed and also to prevent gum problems. As a positive result of these ingrained habits and also through the addition of fluoride to toothpaste and drinking water, we are keeping our teeth longer. However, “wear and tear” is instead becoming a significant problem.

Tooth surface loss happens as a direct result of any of the following three causes. Firstly, many of us subconsciously grind our teeth, normally at night, often by way of stress relief so wearing away the enamel surface. Secondly, abrasive foods in a “healthy” diet and over-brushing can cause teeth to simply wear away. Thirdly, and very much on the increase, is erosion of the outer tooth surfaces from acidic foods and drinks or even stomach acid regurgitation. It is often hard to arrive at an absolute diagnosis and it is normally a combination of one or more of the above.



As Co-Editor of the authoritative textbook on Tooth Surface Loss and Clinical Director of the London Tooth Wear Centre®, Professor Andrew Eder is an international opinion leader in this growing area. He has a special interest in clinical aspects of the causes and patterns of tooth surface loss as well as the aesthetic and functional management of patients with tooth wear.

Professor Eder says “Our patients are generally self-referred or advised to come and see us by either their doctor or dentist, normally complaining of sharp and sensitive teeth which may look shorter on smiling or just speaking. Patients often also report that chewing may have become a bit of a problem.” Where possible, he likes to work closely with the patient’s general dental practitioner and believes strongly that it is the local dentist who plays a key role in the early diagnosis of such problems together with dietary and social advice to help limit the problem moving forward.

“Critical to success is identification of the cause of the tooth wear at the outset,” Professor Eder confirms “otherwise the more comprehensive treatment is likely to fail.” For example, patients who present with regular stomach acid regurgitation should be referred for medical investigation and management whilst those drinking lots of fruit juice and sparkling drinks may simply be advised to reduce or modify their pattern of intake. Social drug abuse is also highlighted as a cause of tooth wear as prolonged periods of grinding and clenching go hand-in-hand with this unfortunate craving.

Professor Eder also comments on changes and pressures seen in today’s lifestyle. “Prolonged periods of intentional vomiting are not only seen in the most unfortunate of anorexics and bulimics but also in those who simply wish to keep a trim figure for professional purposes such as acting or dancing. An increasing problem is also seen in athletes who regularly sip on sparkling sports drinks and also the very regular swimmers where the repeated contact with acidic chlorine in the water can be a major problem. Such sports-related issues will be more widely reported as we approach the London Olympics in 2012.”

Professor Eder is Director of Education at the UCL Eastman Dental Institute where he is responsible for postgraduate training and continuing education for dentists nationally. He is also Associate Dean for Continuing Education at the UCL School of Life and Medical Sciences. As a Consultant and Specialist in Restorative Dentistry and Prosthodontics, he also maintains a specialist Private Practice in Central London.

*For more information, please visit [www.restorative-dentistry.co.uk](http://www.restorative-dentistry.co.uk) or email [info@restorative-dentistry.co.uk](mailto:info@restorative-dentistry.co.uk) or call 020 7486 7180 to arrange an initial consultation.*

## ARE YOU WORRIED ABOUT YOUR FRONT TEETH?

**Have they become more sensitive?  
Are they sharp or chipping at the edges?  
Have you stopped smiling?**

This could be related to acidic foods and drinks in your diet, stomach acid reflux or even grinding and clenching which often takes place at night.

Most often, it is a combination of problems and, as we all keep our teeth longer, such problems of tooth wear are on the increase.

**THERE ARE MANY WAYS WE CAN HELP YOU TO PROTECT YOUR TEETH.**

**PLEASE DO CONTACT US FOR FURTHER INFORMATION.**

Professor Andrew Eder BDS MSc MFGDP MRD FDS FHEA  
Specialist in Restorative Dentistry & Prosthodontics  
Clinical Director, The London Tooth Wear Centre®

A: 57a Wimpole Street, London W1 | T: +44 (0) 20 7486 7180  
E: [info@restorative-dentistry.co.uk](mailto:info@restorative-dentistry.co.uk) | W: [www.restorative-dentistry.co.uk](http://www.restorative-dentistry.co.uk)