

Sports safety—avoiding mouth injuries

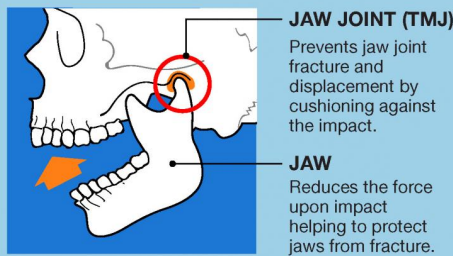
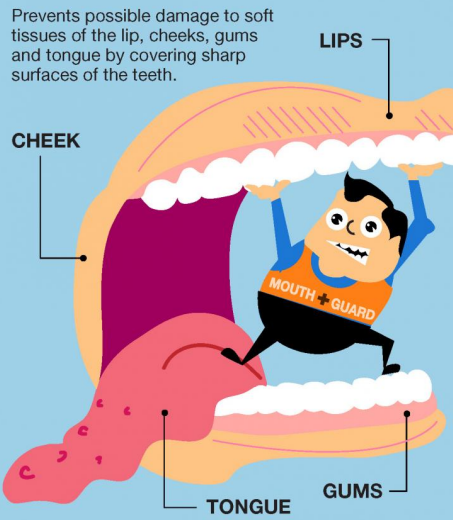
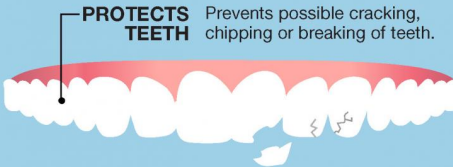
October 26 2016, by Adam Pope

BITE ME

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WHY YOU NEED A MOUTH GUARD



TYPES OF MOUTH GUARD



STOCK
Pre-formed and ready to wear, but typically do not fit very well.



BOIL AND BITE
Come in pre-formed shape and are customized by softening in boiling water.



CUSTOM
Require a visit to the dentist and offer the best fit and protection.

Credit: University of Alabama at Birmingham

As fall begins, so do youth sports like football, baseball, softball and soccer—all of which can result in sport-related injuries to the mouth.

In older children and adults, sports injuries are common. Dentists estimate that between 13 and 39 percent of dental injuries occur while playing sports. Nearly 80 percent of all dental injuries affect at least one of the front [teeth](#), while damage to the tongue or cheek is common.

More than 5 million teeth are avulsed, displaced from their socket, each year, many during sports activities. This results in nearly \$500 million spent on replacing these teeth each year. According to the CDC, sports-related dental injuries account for more than 600,000 [emergency room visits](#) each year.

Basic protection

UAB School of Dentistry Associate Dean for Academic Affairs Ken Tilashalski, DMD, says when it comes to protecting teeth, the best mouth guard is the one that will actually be used.

"Wearing a mouth guard reduces the chances of tooth fractures, tooth dislocations and soft tissue cuts," Tilashalski said. "The guards also protect against jaw fractures and concussions by absorbing the energy of a traumatic blow to the chin."

There are three basic types of mouth guards:

1. Stock, which are pre-formed and ready to wear, but typically do not fit very well
2. Boil and bite, which come in a preformed shape and are customized by softening in boiling water
3. Custom-made, which require a visit to the dentist and offer the best fit and protection

"Having four active kids, I understand the time crunch parents are faced with just making it through most days, and this will influence decisions," he said.

Tilashalski also coaches youth soccer and has seen what can happen when children do not protect their teeth.

"For my kids, I have chosen to use custom mouth guards as they fit and feel better, do not interfere with speech, and are essentially invisible," Tilashalski said. "Mouth guards need to be replaced as they wear down, and athletes in the tooth-forming years will have to have these replaced more often as the mouth grows and the teeth change."

Tilashalski also says rinsing the guards off after use and storing in a hard container will help keep germs from building up. Athletes should not chew on the guards, as it will dramatically shorten their life span.

Between one-third and one-half of all athletes will receive a sports-related dental injury, and most of these occur in athletes who are not wearing mouth guards. Considering that the lifetime cost of replacing a permanent tooth has been estimated to exceed \$20,000, UAB dentists suggest a good mouth guard is one of the best investments to be made in sports equipment. It has been shown to reduce the risk of sports-related dental injury by 60 times.

In 1962, high school and collegiate football players were required to

wear faceguards and mouth protectors during practice sessions and in competition. Several studies confirm that, since this requirement, the percentage of orofacial injuries in football has dropped from approximately 50 percent to one-half of 1 percent.

According to the American Dental Association, an American Association of Orthodontists survey found that 84 percent of children do not wear mouth guards while playing organized sports because they are not required to wear them. Although other protective materials, such as goggles, helmets, shoulder pads or shin guards, are required in order to participate, mouth guards sometimes are not.

"Our family rule is that a mouth guard must be worn for both practices and games," he said.

Taking the field

Organized sports that have the most oral injuries include basketball, wrestling, field hockey, ice hockey, football, soccer, lacrosse, baseball and softball.

"Many cases of facial trauma are actually seen in unorganized or pickup sports activities," Tilashalski said. "Biking, skating and skateboarding are the recreational sports that have the highest chances of injury."

In case of emergency

If a tooth is knocked out of its socket, the best thing to do is to put the tooth back into the socket.

"Even if a tooth has been knocked out, it often can be saved if you get to a dentist quickly enough," said Assistant Professor and Director of the

UAB Pediatric Dentistry Clinic Lina Soler-Ballman, DMD.

Depending on the injury, Soler-Ballman says that, in many cases, dentists have to splint damaged teeth with a flexible wire to hold them in place to heal. Some cases require a tooth-colored filling material to repair the tooth. In the worst-case scenario, damaged teeth have to be removed.

"If the tooth is dirty, you can wash it off quickly with water," she said. "If you cannot place the tooth back into the socket, the preferred medium to store the tooth in is a tooth-saver solution, milk or saliva."

Tilashalski urges parents and children to play it safe when protecting teeth.

"I have four soccer players at home," he said. "Having a mouth guard in place seems a small price to pay to prevent a lifetime of dental treatment as a consequence of a knocked-out tooth."

Provided by University of Alabama at Birmingham

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