

WHY CONSIDER THE ARM-ER® APPROACH?

Assess and identify the nature of the decay.

Redefine the status of the affected lesion and the ongoing effect that the silver fluoride has had on the tooth.

Manage the future of the tooth for the individual patient.

With.....

Education — good and relevant information is the key to keeping your mouth (and body) in a health state. You probably know already that staying healthy is not a 'one size fits all' answer?

And then..

Review? Repeat? Restore? Rehabilitate? Re-establish

Your dental practitioner will help you guide you in the course of care which is best suited for each tooth.

1. Tooth after silver fluoride treatment
2. After black 'callus' has been cleaned— remineralised tooth tissue remains
3. Lining material placed
4. Tooth is filled with white filling material



Surface staining is temporary and only decay is permanently stained - this indicates it has been arrested.

2 weeks after application—remineralised, desensitised and only the decay is stained. Gum health is also improved when the silver continues to inhibit plaque formation.



In patients, where cleaning is difficult or the mouth is drier, silver fluoride may need to be re-applied every six months. This simple application improves the strength of the tooth, and supports the retention and of natural teeth in the mouth.

After the caries (decay) is treated with silver fluoride, the affected part goes black if the decay process is stopped,

We nickname these

'Black Diamonds'

These teeth may then be suitable for minimal intervention treatment.

Minimal invasive treatment is :

- ◆ readily acceptable
- ◆ less discomfort
- ◆ less extractions
- ◆ reduction in emergencies
- ◆ reduction in need for hospital admissions



Dr. Graham Craig

THE ARM-ER. APPROACH TO CARIES AND SENSITIVITY MANAGEMENT



Assess

Redefine

Manage —

Educate and then

Review? **R**epeat? **R**estore?

Rehabilitate & **R**e-establish

USING SILVER FLUORIDE TO *ARREST* AND REDEFINE CARIES, ADDRESS *SENSITIVITY* AND *THEN* CHOOSE THE MANAGEMENT

silver ion = wrecking ball

Antimicrobial:

- denatures *all* proteins.
- breaks cell walls & membranes.
- inhibits DNA replication.

Strengthens dentin:

- protective layer formed by reaction with dentin proteins is acid resistant (Hill & Arnold, 1937).
- penetrates ~50µm.



Silver ions enter the dentine and continue the bacterial "kill" allowing the remineralisation to continue

The use of silver fluorides is effective in the following way:

- ◆ Caries status is detected
- ◆ The lesion's status is redefined (active or arrested?)
- ◆ Bacterial control is established.
- ◆ Immediate improvement of oral health status is gained
- ◆ Remineralisation *and* desensitisation is achieved as an ongoing effect of the silver fluoride application.

Then a management plan can be formulated -

- ◆ Offering improved quality of care, (with short and long term gains)
- ◆ Allowing time for management plan to be formulated to address individual patient needs.
- ◆ Is very cost effective so addresses patient's immediate needs and allows for future treatment planning.

The ARM-ER® approach

- ⇒ Simple, painless and safe
- ⇒ Can be used for caries status management in patients of all ages.

The procedure:

1. The affected area is dried.
2. A very small amount of silver fluoride (a clear and odourless solution) is placed on the affected area for 1-3 minutes and followed by a very small application of stannous fluoride. (also clear and odourless) The immediate reaction on active caries is that the area will blacken— 'Black Diamonds'
3. A 'holding' solution is applied (such as orobase paste or remineralising varnish)

The treated area of the tooth will turn a blackish colour but only the area of the tooth which was decayed will stain permanently.

The ***Black Diamond*** effect!

