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San Diego County
DENTAL SOCIETY

OCTOBER
2021

October 1
DPA/Infection Control

October 7
Oktoberfest

October 14
New DDS Seminar:
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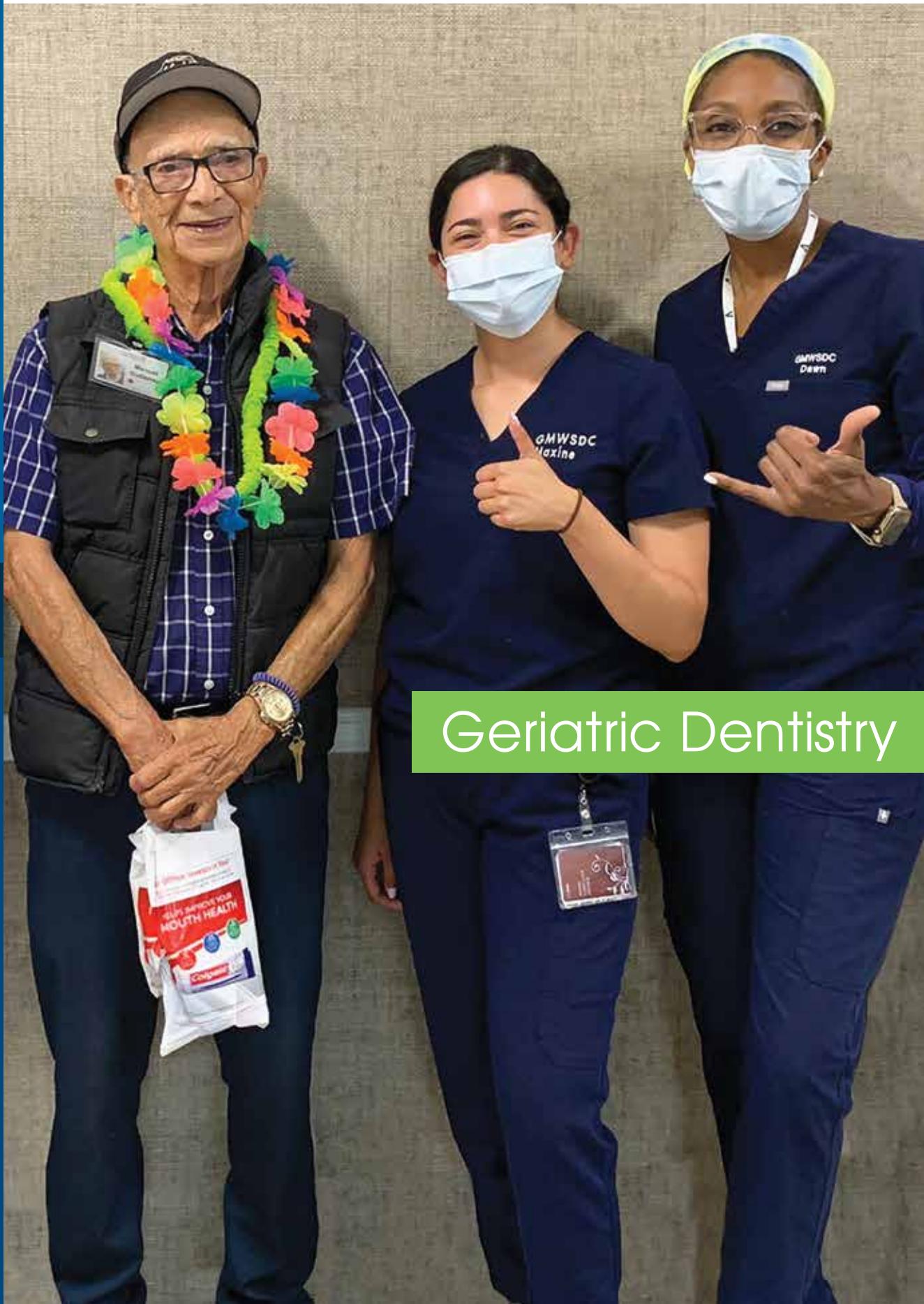
October 21
BLS Renewal

October 29
Technology in Dentistry

November 4
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November 18
Ken Rubin
Practice Sales Seminar

December 9
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Stepping outside your usual routine

As the days again grow shorter and summer comes to an end, October is my favorite non-summer month. Not only is the weather still usually warm here in our beautiful city, but it is also the month in which my favorite holiday lands, Halloween! As a kid it probably had to do with collecting loads of candy that I would feast on until Santa brought me more, but I've also always enjoyed wearing costumes. In fact, I will always wear a costume if given the opportunity, regardless of the time of year. I guess I find it fun because it's a break from the normal monotony of life. A way to step outside the usual day-to-day routine. I think that's why I enjoy attending conferences so much too, and I am really looking forward to my first in-person conference since 2019; *The ADA Annual Session*. This year, they are calling it "SmileCon" and it will be held October 11-13.

Big conferences like ADA's and CDA's are great opportunities to network and earn CEs, but you don't have to wait all year and travel out of town to enjoy these perks of organized dentistry. We are finally starting to host in-person CE events again, right here in San Diego. As a society, our mission is to help you succeed. One way we strive to achieve this monumental goal is by hosting local, high quality CE events. Your *Committee for Continuing Education* works hard all year to plan events to support you professionally as well as your life outside of clinical dentistry. We are always trying to think of interesting topics and find engaging speakers for your educational enjoyment. We recently held events about forensic dentistry, marketing, tax advice and financial planning, and we regularly host the required CE courses like BLS renewal and Dental Practice Act updates. We also host at least 2 "Shred-a-thon" events throughout the year where members can dispose of old paper records and electronic items, for free. Even if you do not have any items to get rid of, members are invited to come enjoy some free food and socialize with colleagues.

Our *Recruitment and Retention Committee* is also always thinking up creative programs to support your need for networking. They regularly host various happy hours and social events



throughout the county to help facilitate members getting to know one another, both new in town and well-established. For those who are seeking practice advice from a more experienced colleague, we offer the mentorship program. If interested in participating, either as a mentee or mentor, one must simply contact the dental society staff and they can connect you with a colleague who has also expressed interest in the program. Whether it be for clinical advice, business tips, or just balancing life in general, past participants have expressed considerable gratification from their involvement.

One of the most recent and novel ways our society is helping you succeed is via the *Dental Assistant Bootcamp program*. In recent years there has been a substantial shortage of dental assistants available to work in our practices. This deficit of workers is not unique to San Diego County, which is why CDA has worked in collaboration with the state to develop a dental assistant training course to teach infection control and some basic dental skills to students over a 4-week period. There are currently two pilot programs in the state, and we are lucky to have one right now in San Diego. After completing the classroom portion of the program, students are hired by local dentists to continue their education. The employers will then be required to follow an in-office curriculum for the dental assistant-in-training. As an incentive to hire participants, half of the wages for the assistant will be covered by the *San Diego Workforce Partnership* for the first 6 months of employment. We are hopeful that this program will 'help our members succeed' by attempting to fill the workforce void.

As you can see, we take our mission to support our members very seriously and work tirelessly to serve you however we can. We are always open to suggestions and feedback as well, so please feel free to contact society staff or a member of your leadership anytime! In the meantime, I hope you can step away from work for a bit and enjoy some autumn festivities! I'm particularly excited about honing my pumpkin carving skills!•





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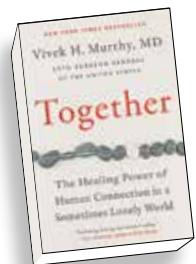
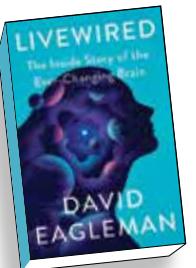
Editor's Fall Reads

October 1 is *International Day of Older Persons*, and as we are a dental journal, for this reason we dedicate October's issue to our geriatric patients and to geriatric dentistry. Those who know me personally know that I am a voracious reader. My tastes run the gamut of fiction, memoir, non-fiction, you name it and given that **this month's issue is dedicated to geriatrics**, I am excited to talk about two books I read recently. The subject matter of these books cover topics that can help our patients age well and with grace and allow us to do the same! I will refrain from making this a book report but read them if you haven't already!

The first of those books is "*Livewired: The Inside Story of the Ever Changing Brain*" by David Eagleman, a neuroscientist and professor at Stanford University. It is a highly "readable" book, a testament to his ability to make a seemingly dry topic fascinating. A lot of the book challenges common conceived notions about the brain's waning plasticity and malleability of our brain. Which brings us to aging.

To maintain mental acuity, one must continue learning and trying new things. It is long known that we are more adept at learning new things when we are younger, but it is now known that our brain continues to change and the more we provide it with "new experiences", the healthier and more functional our brain will continue to be. Those individuals who are "masters" at something, whether it's tennis, chess, etc, show far less brain activity than those who are novices. So keep trying new things!

Another book is "*Together*" by Dr. Vivek Murthy, M.D. who is also our newest Surgeon General of the United States. The book was written early last year, and despite the optimistic tone of the title, this book covers a heavy topic: loneliness and its negative impact on both our mental health as well as our physical health. One can imagine how the social isolation of Covid 19 has negatively affected many of our patients, chief among them our geriatric population!

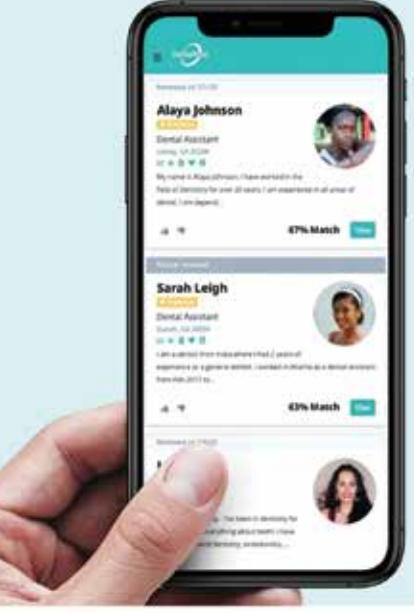


There are countless solutions to these problems, many of them involving maintaining social interaction with others. In various parts of the world, including tightknit immigrant communities and those whose communities who are stronger tend to have fewer of the physiologic problems of those who tend toward social isolation. To combat this trend in both Australia and in the UK, they implemented community "workshops" for carpenters and men who had previously been involved in the trades, though that wasn't a requirement. The physiologic and mental health benefits were many. A study of nuns over a long period of time found that after dying, there were many who had the physical signs of Alzheimers that did not manifest physiologically, as they lived in close community with other nuns. The social benefits of interacting with others overrode their potential for Alzheimers! I am willing to bet that there will be studies going forward on how people fared during the pandemic, comparing those who quarantined with others vs. those who did not.

These books reminded me of my grandmother who lived to be 97. By all accounts, she was in perfect health until she had a fall, which caused a blockage and she didn't survive the necessary surgery. She was the kind of person who continued to make friends with the children in her Oakland neighborhood, continued to read even when her eyesight made it difficult. Her mental acuity was on par with people decades younger than her.

And it reminded me of my patients. Those who kept active (I had a patient who still played tennis at the age of 95!) were generally the most in tune with the world around them, where the most healthy, lived the longest, and led highly satisfying lives. We as dental health providers can encourage these practices and screen for these kinds of situations and help them accordingly. •





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Local Dentists are being sued

This week we got word that yet another one of our dentist members is being sued – this one for \$25,000. It's not because of malpractice. It's because their website is not ADA compliant and accessible to people who are visually or hearing impaired.

Is your website compliant, or are you open to a lawsuit? The intent of the law is good given that people with disabilities are certainly entitled to access your products and services as are abled people. Unfortunately, there are unscrupulous players out there that are undoubtedly bringing lawsuits solely to exploit the law and make easy money. But whether they intend to become your patient or not has little bearing on the outcome of the lawsuit. Like it or not, you need to get your website in order.

There's a lot to making your website ADA compliant, and it's probably best handled by professionals. Do you remember who developed your website? Have them do a review of your site to be sure it's in line. Meanwhile, this Web Content Accessibility Guide will give you a good idea of what's required. <https://www.w3.org/WAI/standards-guidelines/wcag/>.

Welcome NEW San Diego County Dental Society Members

Alex Dang, DMD: Tufts Univ. 2021

Amna Alwardi, DDS: Univ. of MD Baltimore 2019

Amanda Barba, DDS: Univ. of Texas Houston 2021

Theresa Ta, DDS: UCLA 2018

Kevin Hildebrandt, DDS: UCSF 2021

Skyler Liatti, DDS: LLU 2014, Orthodontics at LLU 2017

Spencer Nice, DMD: Tufts 2018

Sheila Merat, DMD: Univ. of Connecticut 2006

Matthew Desiderio, DMD: Univ. of Penn 2020

Renee Tai, DDS: Ohio State 2014

Laura McFarland, DDS: Univ. of Texas San Antonio 1996

Krista Schulte, DDS: Oregon Health Science Univ. 2018

May Manswer, DDS: USC 2021

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The Future of Care - Part I

by Eric Shapira, DDS, MAGD, MA, MHA

Geriatric Dentistry is a “sub-specialty” of General Dentistry. Yet, it has not been recognized as a specialty of Dentistry by the ADA to date. However, in order to be proficient in this field of dentistry, one must know their Geriatric Medicine, which is a recognized specialty of Medicine. I have high hopes that it will become a recognized specialty in dentistry by the ADA one day soon. Regardless, we must treat our older patients in the best possible way we know how and then some.

All too often I have found in my almost 50 years in dental practice and teaching geriatric dentistry, that many dental practitioners tend to treat older, sometimes infirm and compromised patients like any other patient that frequents their offices. This is a mistake. We need to be aware of many factors when working with this cohort of the population, which will soon outnumber the younger population in our Society.

Many older adults still want to feel and look younger, and their smiles and oral health are important assets to them. They make dentistry and their oral health a priority, and try to save their



teeth at any cost. Then there are those older people that may not have access to care or cannot afford “top of the line” dental care, who therefore, must settle for much less in some cases. Older patients on minimal income tend to be conservative in having regular care due to the cost. This leads to a high percentage of these adults wearing dentures, partials or going edentulous due to the aging process. The end result can be brittle teeth susceptible to fracture and loss, advanced or chronic ‘geriatric’ periodontal disease, supervised neglect, and accompanying systemic disease issues that compound their dental situations.

Older patients with cognitive decline or special needs of one kind or another, need special attention by the dental practitioner and his/her staff. It takes a great deal of good communication, listening skills and our abilities to be empathetic in the way we treatment plan and treat these ‘special’ people. There is a great need for MID, or Minimally Invasive Dentistry, when it comes to these types of situations with the older patient. Keeping treatment simple, direct, workable and affordable is an important goal we need to strive for when treating these patients. •

For us to make a difference and to inject a positive impact into our aging population’s dental health, we need to better understand the following:

1. Geriatric dentistry is unique and demands a new way of planning and executing dental treatment.
2. Geriatric patients deserve to be counseled and educated on choices of treatment they make and how they are impacted by these choices as they grow older and move through retirement years.
3. Dental providers should understand and develop maintenance programs and support to address management of failures and long-term wear of dental prostheses.
4. Dental practitioners need to know how to define Geriatrics and understand its’ implication’s.
5. Dental practitioners need to know Geriatric Medicine, because the older one gets, the more susceptible to diseases they are and changes in health and a lowered immune system go hand

in hand. Geriatric dental treatment hinges off geriatric medical issues.

6. Practitioners need to understand the “normal” aging process.
7. Practitioners need to understand the pathology of abnormal aging as well.
8. Practitioners need an understanding of pharmacology and the interactions that can affect dental care and after treatment.
9. A geriatric dental assessment is an integral part of fully understanding a systemic approach to planning oral care for the older adult. No treatment should ensue without this kind of approach.
10. Specific questions should be asked prior to treatment which can illuminate the forth-coming treatment itself.

The Future of Care - Part II

by Tony Chammas, DMD

Geriatric dentistry addresses our aging population’s dental needs. It is similar to other medical disciplines in terms of diagnosis and prevention theories, but it differs in management and delivery. It has deep and close ties to medicine and the medical management of each patient.

Prosthodontics plays an especially important part of the care of older people. One needs to be prepared to restore older persons mouths in an affordable and practical way. For example, making it easy for them to place and remove their dental prostheses, keeping their mouths and fixtures clean, as well as returning at regular 3-4-month intervals for dental recall to ensure that they keep their investment in themselves.



Geriatric dental patients can be grouped into 2 major categories:

- 1- Patients with **acute** dental needs
- 2- Patients with **chronic** dental needs

Geriatric patients with **acute** needs should be treated immediately, diligently, with dignity and with passion. The resources for these people can be very limited! Their treatment plan should be kept simple, easy to comprehend, easy to maintain, and sustainable over a long period of time.

Geriatric patients with **chronic** needs tend to afford time for treatment planning and may be better able to choose from a multitude of treatment options. In this group of patients, we may be able to expand our choices, and allow for more advanced and /or unconventional treatment modalities. This is where coordinating with other medical providers is important so that we could take into account any medical clinical condition that each patient is dealing with.

Treatment choices

We as providers need to educate our patients into making responsible choices that will not have negative financial and practical ramifications, especially as they grow older and perhaps have fewer choices in mobility, access to care and medical issues. We can be more flexible in our approach, offer multiple treatment plans, and present different scenarios for both short term and long-term solutions.

In many instances, family members and/or care givers need to participate in the planning and choosing of dental care. Instructions should be given to all involved both verbally and in writing as it relates to maintenance, removal and seat of prostheses,

cleaning under bridges and implants, etc. This is yet another reason why our choice of treatment needs to stay simple and clear for the patient as well family members or partners.

Technology

Technology should be used to facilitate treatment and to deliver practical restorations. Let us keep in mind that more sophisticated restorations might need more expensive and extensive maintenance. While there might be room in younger patients to correct and adapt to newer technologies, it is more challenging to do that in an older patient, especially someone with limited resources.

Retirement planning and Dental needs

One often overlooked aspect of helping our geriatric population is in helping them incorporate their dental health into their overall retirement planning. Educating patients on the cost of regular recall visits, the maintenance of their expensive treatment, or on replacement of their dental work during retirement years is important. While it is obvious to us dental practitioners that more complex and advanced treatment choices will carry higher costs of maintenance, it is not always the case for our patients.

Access to care

Access to care remains the main limiting factor in how we can treat our aging population. While aging patients tend to have lesser dental coverage than younger adults, their access to care is hampered by both physical and monetary challenges. Elderly patients with limited access to drivers will suffer longer and are forced to put off dental treatment due to their limited mobility and challenges in getting around. Limited resources lead to advancing dental disease, more complex dental problems, and a decline in their lifestyle quality.

Unfortunately, it remains a fact that geriatric dental needs are generally ignored in the big scheme of general medical care. Our insurance laws fall short of requiring or providing solutions for dental issues in our aging population. Medicare, the federal health insurance program for people who are 65 or older doesn’t cover most dental care, dental procedures, or dental supplies. It certainly does not cover preventive procedures and visits.

Our law makers need to do more in terms of access to resources and medical/ dental coverage for essential dental needs. The dental community must communicate and push forth this issue. Our Geriatric dental patients deserve better! •

Geriatric Dentistry Insights from the experience at the Gary and Mary West Senior Dental Center

By Karen Becerra-Penagos DDS MPH

Every 10 seconds someone in the United States turns 65 and by 2030, 20% of the U.S.A population will be older adults. In addition, for the first time in U.S history, by 2034 the number of older adults will outnumber the number of children.

The aging population should be a concern to all health-care givers including oral health providers; as with such a shift in the U.S. demographics, more dentists and their dental teams will need to be properly prepared to provide the care these aging patients deserve. In this article we will provide a short overview of the nuances of geriatric dental care based on the experiences at the Gary and Mary West Senior Dental Center.

The Gary and Mary West Senior Dental Center is a unique non-for-profit dental clinic providing services to the older adult population. Seniors typically present to our locations in Downtown and San Marcos with different functional needs. These needs can be classified according to their level of dependency into 3 groups: independent, semi-dependent and fully dependent. The majority of our patients have some type of cognitive or memory impairment which range from very mild to severe. Patients also present with multiple chronic conditions and typically take multiple medications. In most cases they face barriers in access to care with no dental insurance, limited income and problems with mobility and transportation.

Understanding the patient: Our patients' complexities become evident during the new patient exam, where we aim at developing a good understanding of the feelings/attitudes the patient has and the level of independency and self-care that can be expected. This helps us understand how the patient will function in their own environment and how the care provided will be impacted long term.

They require more empathy: Seniors often require additional reassurance and communication around their present issues, therefore having empathetic team members is beneficial to make this process as efficient as possible. Establishing trust reduces dental anxiety and improves final treatment outcomes.

Keeping them safe and comfortable: At every appointment, vitals are recorded and changes in health and medications are reviewed carefully to make sure the care will be delivered in a safe manner. After this initial review, patients often need extra time to make adjustments due to chronic pain needs (back, neck, shoulder, hip, etc.) in order to be able to sit comfortably in the dental chair.

Care Coordination: In our clinics coordinated care and medical inter-relation are as vital as communication with family, caregivers, and other health care professionals such as pharmacists, social workers etc.

It takes more time: On average it takes significantly more time to care for older adults than caring for younger patients; this is in part due to reduced mobility, memory issues, visual and hearing barriers. Many patients use canes, walkers, wheelchairs and some even present in stretchers, hence access ways, waiting rooms and operatories need to be designed accordingly.

It's not just Dentures: Today's seniors are not only living longer, but the majority are also keeping their teeth longer. Their treatment needs are typically more complex than just a regular set of dentures. This is in part thanks to the advancements in fluoridation, new dental technologies, and improved oral hygiene. Chronic diseases of the mouth, such as root caries, periodontitis, tooth loss, xerostomia, mucosal lesions, oral cancer are some of the most common issues. Despite these conditions being preventable and treatable many seniors do not have access to the needed treatment and this affects their quality of life and wellbeing negatively.

Early Prevention and Education: In our clinics, emphasis on prevention and education helps reduce the oral health deterioration that could be expected. As patients continue to age, their functionality and dependency changes and our dentists often have to adjust treatment plans, which allows them to provide oral healthcare that can accommodate any physical or mental health deterioration noticed.

The mouth body connection: Increasing evidence continues to link oral health with general health and studies suggest a relationship between periodontal disease and diabetes, cardiovascular disease, pneumonia, rheumatologic diseases and even dementia among others. Dentists, family physicians, and all types of care providers must increase collaboration and communication to benefit coordinated care.

The upcoming changes in the older adult's demographics will force our healthcare industry to rethink how care needs will be provided. Aging brings a series of physiological challenges that will be inevitable. More seniors will come to our offices, and we will need to be prepared to serve their needs. We have a lot to thank our seniors for. They are members of society that deserve compassionate, accessible, quality oral healthcare. We dentists can help them so they can eat, speak, and smile with dignity as they continue aging.



Gary and Mary West Senior Dental Center staff enjoying a celebratory time for treatment completion. This 88 year old patient suffers from Hypertension, Arthritis, Benign Prostatic Hyperplasia and Dementia, and uses hearing aids. Patient has regained his ability to eat, speak and smile and he loves his new look. His family is amazed by his new appearance and the change it has brought to his personality and social interactions.



Top right:
This 68 year old patient suffers from COPD, Anxiety, Depression and has mobility limitations. He used to think that he would go the rest of his life without teeth. He was unhappy and avoided social interactions. After receiving his dentures he has completely changed his life and he feels like a new person.



Middle right:
This 83 year old patient suffers from Hypertension, Diabetes, Osteoarthritis and Osteoporosis. She has been a GMWSDC patient for the last 4 years. Before coming to us she was always self-conscious about the appearance of her mouth and teeth. Her new denture and partials have helped in improving her health and her outlook in life. She graduated from college in 2020 and has plans to remain very active in her community!







Scripps Oral Pathology Service Presents

“Oral Pathology: From Differential Diagnosis to Biopsy”

2021 October Oral Pathology Conference
October 30, 2021 @ Marriott San Diego/Del Mar
8 CE Unit Approved by California Dental Board & AGD-PACE

Speakers:
Gretchen Folk, DDS, MS, Laboratory Director
Lee Slater, DDS, MS, Staff Pathologist
Brenda Nelson, DDS, MS, Staff Pathologist
Sahar Mirfarsi, DDS - Oral Medicine and Facial Pain, Guest Speaker

Course Description: This is an 8 hour CE course designed to include lectures and interactive participant group discussion. The focus of this course is to expose general dentists, dental specialists, dental hygienists and medical colleagues to a wide variety of head and neck conditions while focusing on the more commonly occurring disease processes that involve the oral cavity and craniomaxillofacial bones. Diagnostic mimickers and clinical pathology pitfalls encountered in patient management will also be discussed.

Course Objectives: At the completion of the course, participants should have a strong understanding of the principles of oral disease, oral cancer, and current trends in Oral and Maxillofacial pathology. The participant should understand the parameters of a thorough head and neck exam, identify potential disease, and form a reasonable differential diagnosis based on the clinical findings. The participant should be able to contribute in the case management of the patient and enhance the delivery of appropriate primary oral health care.

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Dental Horoscopes Part II

2021 Summer Horoscope by Dental Specialty (part 2 of 2)

Endodontics

Your fall schedule is quickly filling up. While you may want to condense to shorter appointments in order to fit everything in... remember this: don't forget to give yourself enough time, and always use your rubber dam!

Periodontics

Perio, thinking about taking up a new hobby with this potential second self-quarantine lockdown? Why not try gardening? You are great at cleaning up around the yard and planting colorful (red) flowers; gardening could be a great new hobby to try. You'll see. These weeds in the garden will blossom into flowers in no time.

Pediatrics

Have some of your friends been fighting like children lately? You are just the perfect person to get to the bottom of what's really bothering them. To help resolve your uncooperative friend's issues, sit them down and talk this through. Also – a little sleepy juice never hurt anyone.

Prosthodontics

Are you finding it difficult lately to articulate your thoughts prosth? Well, fear not! There is a new challenge around the corner that will not only help you nail down what's behind that hesitation, but it will also help take a big bite out of tackling future challenges to come. •

Disclaimer: I know nothing about horoscopes, star charts, or astrology. I hope this blog brings a little bit of laughter to your day.

Yvette Carrillo DDS, MS graduated from Loma Linda Univ. School of Dentistry 2015 & 2018 respectively. She is a diplomate of the American Academy of Periodontics. In addition to private practice, she is an adjunct faculty member at various teaching institutions. Dr. Carrillo enjoys blogging, working out, cooking, and spending time with her fiancé, Dr. Riley Garrett, a medical anesthesiologist practicing in San Diego.



Live Well Oral Health Champions 2021

Dr. Mary O'Connor & Cura Smiles Dental Clinic. Thank you for demonstrating a commitment to oral health equity!

1: (L-R): Dr. Lindy Rucks, Ryan Burger (Schein rep), Kenton Bosch (pre-dental student at PLNU), Dr. Ronald Fritz. Seated; Janet Simpson, RDA and Darlene McCarthy, RDAEF



2: (L-R): William Bramley Esq. Chairman of the Board of directors, Dr. Thomas Fitzpatrick, Executive Director



3: (L-R): Britney Shaw (PLNU Pre-Dental), David De Rosier, DDS, Darlene McCarthy RDAEF, Natalie Sepulvada (PLNU Pre-dental)



4: (L-R): Nancy K. Starr, RDH, MPH Dr. Mary O'Connor, Dr. Thomas J. Olinger, Chief Dental Officer





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LA MESA: 7 Modern Ops, 4 Equipped, Digital X-Rays, Eaglesoft in an excellent stand-alone location with easy freeway access. 2019 GR \$696K with room to grow with specialties. Don't miss this rare opportunity. #CA1915

SAN DIEGO: 4 Ops with Adec equipment and computers in each op with I/O Camera and ScanX. Modern and beautiful **SOLD** with solid collections. Highly desirable area, this listing will go quickly. 2019 GR \$881K. #CA1601

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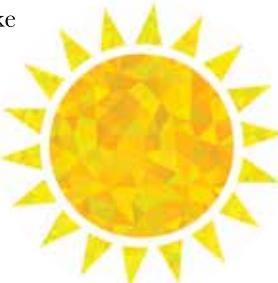
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As I write this blog, we are in the thick of summer with long days of daylight and beach weather. Weather is the universal topic of conversation that can lead to many others. For example, I've noticed that my patients who are transplants from the Northeast don't seem to mind the heat. Those who are native to California seem to prefer cooler temperatures. So when our humidity levels crept up this week, I asked my patients how the weather outside was and I got a range of answers. I asked not only for the sake of good conversation but also because ever since the COVID pandemic hit us, our thermostat is stuck at 69. Unless we step outside, being in our Arctic practices wrapped up in 15 pieces of flare allows us no real sense of the external temperature. "Not bad", "awful, really hot", "nice, comfortable" were the range of responses I got. Now when we dig deeper and ask why at 85 degrees, some might think that that temperature is "not bad" and others "awful", naturally, age and medical conditions may be factors. More often than not, however, whether we are wincing through a hot day or thankful that it isn't overcast and rainy re-

lates to where we come from. Many of our readers may remember my blog titled "Home is where the heart doesn't freeze", where I wrote about why the weather has a great effect on me and others who move from colder climates to warmer ones. I'm realizing that my San Diego patients (and team members) who are native to Southern California would much prefer a rainy 69-degree day, whereas I and others who hail from frigid states, have no issue with a hot day, humid or not humid. The patients who left a life of winter for one that doesn't include shoveling snow, say they will gladly take an 85-degree day. As they say, "it's all relative". Which is why when my boyfriend first came to San Diego and asked a restaurant host if it was nice enough to sit outside, the host replied, "not really but you sound like you're from Canada so you'll think it's nice".



Dr. Barakat graduated from Boston University School of Dental Medicine, completed an AEGD residency in Detroit and practiced in New England before moving to San Diego. She is currently in private practice and is the President of the San Diego AGD component. She is a regular contributor to the AGD's Daily Grind blog.



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SDCA Carnival

by Dr. Hoa Audette

On July 24th, 2021, San Diego County Dental Society members joined the American Student Dental Association District 11 to provide oral hygiene instructions to the San Diego community and to provide mentoring and guidance to aspiring dental students. Student dentist and ASDA District 11 Trustee, Maya Giannetti, is a DDS candidate at the UCLA School of Dentistry, class of 2022 was present along with other dental students from UCLA, USC, Loma Linda, UCSF, UOP, and Western. SDCDS volunteers enjoyed helping the community raise oral health and professional awareness.

by Maya Giannetti

The eleventh district of the American Student Dental Association, the child organization to the ADA's District 13 volunteered their time at the San Diego Community Assist (SDCA) Carnival on Saturday, July 24, 2021. The aim of the carnival was to provide the community a much-needed moment to socially connect and celebrate their community, all while raising money to support the community. These students and aspiring dentists, alongside some of our own San Diego Dental Society Dentists volunteers, provided oral hygiene instruction and pre-dental aid to the children and families attending the event. It was such a joy to see not only students, but active practitioners come together to support a community in need. A special thanks to the ADA and District 13 Trustee Dr. James Stephens for connecting District 11 ASDA with San Diego County Dental Society. The students were able to not only volunteer their time for the community but engage with potential mentors who demonstrated how they can continue to engage locally once in practice. Additionally, they were able to be part of a larger group of community influencers dedicated to making a local impact. Local government officials including Mayor Todd Gloria, and David Neislet, the chief of police were also in attendance.



SDCDS members representation: Dr. Hoa Audette (GP), Dr. Christine Hsu (OS), Dr. Pamela MacPherson (Prosth), Dr. Susan Nguyen (Perio), Dr. Melanie Parker (Ortho), Dr. Nora Tleel (Ped), Asda from UCLA, USC, and Loma Linda.



LET ME INTRODUCE...

Interview by Dr. Malieka Johnson

Dr. Leslie Strommer



“Tell me a little about yourself”

Where are you from or where did you grow up? “I am from Cupertino, CA (Bay Area). My dad's family is from Hawaii and I have a lot of cousins there and spent a lot of time there. I moved to San Diego in 1991 after graduating dental school and getting married. My mom lives in OC and my brother lives in LA.”

What was one of your favorite childhood memories or activities? “So many things. Riding my bike, roller skating, skateboarding. We didn't have a lot of activities. Hanging around the neighborhood with my buddies was fun. We were unattached. Our parents didn't know where we were and we showed up when it was dinner time.” (She laughs reflecting on these memories)

What was your “aha” coming to dentistry moment? How did you choose this fine profession? “I knew it checked a couple of boxes. My mom thought about going to hygiene school and I had a fond relationship with my dentist. He had a lot of passion. I remember when he got his first fiberoptic on his handpiece because he showed me. I wanted to do something in healthcare and the sciences. I wanted to work independently. I liked working with my hands. I did an internship at Davis and found it was a good fit for women. I had many other jobs before working for others and I knew I wanted to work for myself. I found out af-

ter I was in the profession that there were many things I loved that I didn't know before I went in.”

Where did you attend dental school and what year did you graduate? “I graduated from UCLA in 1991. It's been 30 years this year.”

Are you married? And do you have kids? “Yes, I am married to Dr. Scott Strommer, who is also a general dentist. We met in dental school at UCLA. We sat in the same 2nd floor lab area because our last names both started with S.” (She laughs). “We have two boys Kyle 27 and Ryan 25.”

Do you own your own practice? “Yes, Isabella Avenue Dentistry in Coronado. We acquired it in 2017 and New Image Dental in Mission Valley was our first practice built in 1994.”

What do you love most about dentistry? “I love making people smile. Rather it be Invisalign, or ceramics, I love enhancing people's smile. It's just fun! Being creative, scientific, and the beauty of it.”

You are the volunteer President of the SD County Dental Foundation. How else do you enjoy your time outside of dentistry?? “I hike a lot with my friends. I like walking places like

Let me introduce... is a new column featured in Facets as a way to introduce us to the many members that make up the depth and breadth of the San Diego County Dental Society. We hope you enjoy getting to know your colleagues better. Let me introduce...Dr. Leslie Strommer. I have had the privilege of knowing and working with her for many years. Dr. Leslie is a general dentist, private practice owner, mother, mentor, and President of our San Diego County Dental Foundation. Yet, spending time to learn about her during our recent phone interview revealed even more cool nuggets I didn't know about this remarkable woman. Please meet Dr. Leslie.

Mt. Soledad. I do Pilates, walk with my dog and listen to an audible or music. I love to cook. I like hanging out with family. Scott has a lot of family down here. A lot of my hobbies involve dentistry. I am involved with Kois in Seattle and mentoring young dentists. I really enjoy supporting young female dentists in their careers.”

Do people ever tell you that you look like someone famous? “Yes.” (She laughs) “Chip and Joanna Gaines. A patient of ours posted a picture spoofing us and Chip and Joanna Gaines.”

Thank you Dr. Leslie for taking the time to allow us to get to know you better. If a fellow dentist wants to reach out to you or refer a patient to you, how can they contact you. “Thank you for asking me and I can be reached by email at drleslie@isabellavenuedentistry.com.”

The more we learn about one another and the more we come together around our commonalities and our diversities the more we grow and thrive as a community. That's how we build not only our collegial network but it is one way we can build friendships. We hope you like this new series. Enjoy getting to know someone new each issue. We are indeed better together!

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FRIDAY
OCT 01
4CE unit

Dental Practice Act and Infection Control
FREE CE*

Summary: This course reviews the DPA topics and regulations that are required for re-licensure. Then review CDC guidelines and State regulations for Infection Control.

Time: 8am-12:30pm (7am check-in)
Location: MCAS Miramar
 Commissioned Officer's Club 4472
 Anderson Ave San Diego, CA 92126
Register: sdcds.org 619.275.7188 or admin@sdcds.org
 Registration closes Sept. 22, at 5pm
Pricing: member/member staff \$75, nonmember \$99 *Eligible for 1 FREE CE Member Benefit* Use coupon code: CEMEMBER2021
Includes: Continental breakfast provided during check-in (indicate special dietary needs when registering).
Sponsors: California Dentists' Guild, Fortune Management, Garfield Refining, Ken Rubin Practice Sales, Union Bank

Speaker:
 Diane Arnes


THURSDAY
OCT 07

Okttoberfest


Summary: Prost! The fest is on!

Time: 6-8pm
Location: Harland Brewing 10115 Carroll Canyon Rd SD, 92131
Register: sdcds.org | (619) 275-7188 | membership@sdcds.org
Price: Free for members plus 1 guest
Includes: Traditional German fare and beer!
Sponsors: Menlo Dental Transitions, Straumann, Westpac Wealth Partners



THURSDAY
OCT 14

New DDS Seminar: Buy it Build it Lease it

Summary: This panel style seminar will feature experts across the dental field with advice on what to do if you are looking to buy, build or lease your practice

Time: 6 - 8 PM (5:30 PM check-in)
Location: SDCDS Office
Register: sdcds.org | 619.275.7188 | Membership@sdcds.org
Pricing: Free for members
Includes: Dinner
Sponsors: Henry Schein



THURSDAY
OCT 21
4CE units

BLS Renewal for Healthcare Providers
FREE CE*

Summary: Register early if your CPR card is expiring; limited spaces available.

Time: 5:30-9:30pm (5pm check-in)
Location: SDCDS Office
Register: sdcds.org
 619.275.7188 or admin@sdcds.org
Pricing: member \$40... (or use your *1 free member benefit CE for 2021). nonmember \$60, member staff \$50
Includes: Dinner & refreshments provided during registration (please indicate special dietary needs when registering).
Sponsors: Kunau & Cline, INC and TDIC



FRIDAY
OCT 29
3CE unit

Technology in Dentistry

Summary: Learn the systematic approach to find the points of obstruction that are not identified by most CBCT. Discussion of interdisciplinary collaboration between medical and dental. Review of the technology used to diagnose & treat TMD & Sleep Breathing disorders.

Time: 9am-12:30pm (8am check-in)
Location: Admiral Baker Golf Course Clubhouse 2400 Admiral Baker Rd #3604 SD, CA 92124
Register: sdcds.org 619.275.7188 or admin@sdcds.org
Pricing: member/member staff \$75, nonmember \$99
Includes: Continental breakfast and light snacks during breaks.
Sponsors: California Dental Association, California Dentists' Guild, Carestream Dental, Empower IS, Fortune Management, Garfield Refining, General Refining Corporation, Ken Rubin Practice Sales, Union Bank

Speaker:
 Dr. Steven Olmos


THURSDAY
NOV 04

New DDS Social

Summary: Come out and be social and relax in Pacific Beach with views of the beach and ocean!

Time: 6-8pm
Location: Waterbar: 4325 Ocean Blvd. San Diego, California
Register: sdcds.org | (619) 275-7188 | Membership@sdcds.org
Price: FREE
Includes: 2 free drinks and apps
Sponsor: Patterson Dental



THURSDAY
NOV 18
3CE unit

2021 Annual Practice Transition Seminar

Everything You Need to Know Now About Your Dental Practice Transition (Planning today for a successful transition tomorrow)

Summary: Just as rapidly as dentistry is changing, so is the environment for dental practice sales. If you are considering selling your practice anytime in the next 5 years, you will find this content-rich seminar to be extremely valuable.

Time: 6-9pm
Location: SDCDS Office
Register: Please RSVP to Vanessa Alvarez: vanessa@krpracticesales.com
Pricing: Complimentary
 Includes: Dinner & refreshments provided during registration (please indicate special dietary needs when registering).
Sponsor: Ken Rubin Practice Sales




THURSDAY
DEC 09

Holiday Party


Summary: Join us as we celebrate the season

Time: 6 - 8:30pm
Location: La Gran Terraza
 Restaurant at USD 5998 Alcala Park, Hahn University Center, Level 1, San Diego, CA 92110
Register: sdcds.org | (619) 275-7188 | Membership@sdcds.org
Price: Free for members +1 guest
Includes: Dinner and drinks
Sponsor: Menlo Dental Transitions



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