Tips from practicing dentists on using products to the best advantage

**Product Category**

FLUORIDE VARNISHES

**Dentist:** Ron Kaminer, DDS  
**Practice location:** Hewlett, NY  
**Type of practice:** General Dentistry  
**Years in practice:** 28  
**System/product to be described:** Enamelon Preventive Treatment Gel  
**Manufacturer:** Premier Dental Products Company  
**Company Website:** www.premsusa.com

**Description of this product and its benefits to the dental patient:**

To address common complaints of sensitivity and xerostomia and offer increased caries protection, Premier Dental Products introduced Enamelon Preventive Treatment Gel (EPTG). This gel has been shown to provide twice the fluoride uptake and 3 times the protection against enamel solubility, all with 80% less fluoride than 5,000 parts per million fluoride toothpastes. EPTG is formulated with stabilized stannous fluoride and optimized with amorphous calcium phosphate (ACP) technology. The gentle, nonabrasive formula contains only 970 ppm of fluoride, which means that it can be used daily by all members of the family according to the 2014 American Dental Association and American Academy of Pediatric Dentistry guidelines. All patients can benefit from EPTG. Because it contains stannous fluoride with known antimicrobial actions, the potential benefits to your patients include controlling caries, plaque, and gingivitis. EPTG can also be useful for orthodontic patients for whom oral hygiene can be challenging and for periodontal patients with exposed root surfaces. These patients may benefit from ACP technology and stannous fluoride working together to help reduce caries and relieve sensitivity through the occlusion of dentinal tubules, which is accomplished as the calcium and phosphate react to form a precipitate at the tooth surface. Calcium phosphate crystals effectively create a physical barrier that covers open dentinal tubules to prevent external stimuli from causing pain or discomfort. The nonabrasive gel (relative dentin abrasion, 8) safely protects teeth while minimizing enamel wear, which is especially helpful for patients with sensitivity, erosion, and thin enamel. Despite the benefits of stannous fluoride, tooth staining remains a concern for many oral health care providers and patients. EPTG is specifically designed with a low relative dental abrasion to be gentle for patients with dry mouth and sensitivity. For patients who experience minor tooth staining, more frequent professional cleanings may be needed. If tolerated by the patient, intermittent use of a more abrasive toothpaste or use of a more abrasive toothpaste before applying EPTG can further reduce the chances of experiencing tooth discoloration. Formulated with Ultramulsion, a patented saliva-soluble coating, EPTG moisturizes and soothes oral soft tissues. EPTG does not contain sodium lauryl sulfate, gluten, or dyes, and it has a mild mint flavor.

**Step-by-step description of how this product is used with a patient:**

After undergoing orthodontic treatment, a 16-year-old girl and her mother came to the office. The girl’s chief complaint was white discolorations and sensitivity, particularly in the maxillary anterior teeth. Because the patient had numerous demineralized areas, in addition to 2 other areas of radiographic lesions, we determined the patient was at a high caries risk. EPTG was prescribed not only to prevent caries but also to help mitigate the complaint of sensitivity.

The directions to the patient included regular mechanical oral hygiene with her usual toothpaste. After doing so, she was instructed to apply EPTG to her toothbrush and brush thoroughly, allowing the gel to remain on her teeth for at least 1 minute. Next, the patient should expectorate, trying not to swallow the gel and not rinse with water. For optimum results, she was instructed to refrain from eating or drinking for 30 minutes after using EPTG.

At a subsequent appointment, enamel microabrasion was performed to help improve the appearance of the discolored teeth. The patient was asked to continue using EPTG. Four weeks after undergoing enamel microabrasion, the patient returned for a postoperative visit and reported improved esthetics and decreased sensitivity.