LEVEL 1 · AWARENESS · ORAL, DENTAL & PERIODONTAL HEALTH EXPANDING

Looking After Your Teeth — and When to Get Help

The evidence here is unusually clear and unusually boring. Here is what actually works, what does not, and the signs that mean book an appointment rather than read another article.

By **Shaaf Hussain** · Author & Founder | Level 1 · Start here | Educational — not medical advice

https://longevitydecoded.net/dental-care-and-warning-signs-article.html

WHAT YOU'LL UNDERSTAND BY THE END

The short list of things with real evidence behind them, why the heavily marketed products add least, and the warning signs that need professional assessment.

This lesson covers what actually works day to day, what the evidence supports, and — importantly — the signs that mean stop reading and book an appointment.

WHAT WORKS

The short, unglamorous list

Brushing twice daily with a fluoride toothpaste. Fluoride is one of the best-evidenced preventive interventions in all of medicine — it makes enamel more resistant to acid and supports remineralization. The mechanical removal matters, and so does the fluoride left behind.

Cleaning between the teeth. A brush cannot reach the surfaces where teeth touch, and those surfaces are where decay and gum inflammation frequently begin. Floss or interdental brushes reach them; brushing alone does not.

Limiting how often you consume sugar, for the frequency reason from the plaque lesson.

Regular professional examination. Hardened deposits below the gum line cannot be removed at home, and early decay and gum changes are detectable long before you would notice them.

ONE HONEST NOTE ABOUT PRODUCTS

The evidence base here is unusually clear and unusually boring: **fluoride, mechanical cleaning, and reduced sugar frequency.** Whitening claims, charcoal preparations, oil pulling and “remineralizing” formulations vary from harmless to abrasive, and none replaces the list above. A more expensive toothbrush used the same way is not doing something fundamentally different.

SEE A DENTIST PROMPTLY — THESE ARE NOT FOR SELF-MANAGEMENT

- **Facial swelling**, particularly if spreading, or accompanied by fever or difficulty swallowing — this can be urgent.
- **Severe or persistent toothache**, especially if it wakes you at night.
- **Bleeding that does not settle**, or gums that bleed persistently.
- **A loose adult tooth**, or teeth that seem to be shifting position.
- **An ulcer, patch or lump in the mouth lasting more than about three weeks** — this warrants professional evaluation.
- **Trauma** to a tooth, whether or not it looks bad.

None of those should be managed by reading. They are examples of when the right move is a professional who can actually look.

WHAT THE EVIDENCE ACTUALLY SAYS	
HUMAN EVIDENCE	Fluoride toothpaste substantially reduces dental decay. One of the most robust findings in preventive medicine.
HUMAN EVIDENCE	Interdental cleaning reaches surfaces brushing cannot; those surfaces are common sites of decay and inflammation.
MODERATE	Professional examination detects early disease before symptoms appear; optimal interval varies by individual risk.
NOT SUPPORTED	Charcoal, oil pulling and most “remineralizing” or whitening claims as substitutes for the above.

CONNECTED SYSTEMS

Where this connects

DIAGNOSTICS, BIOMARKERS & TRACKING

The Study That Confirms Itself

LONGEVITY FOUNDATIONS & PREVENTION

Healthspan Is Not Lifespan

THE WHOLE LESSON IN ONE LINE

Fluoride toothpaste twice daily, cleaning between the teeth, limiting how often you eat sugar, and regular examination — that is nearly all of it, and the products marketed hardest are the ones adding least.

Educational content only — not medical advice, diagnosis, or treatment. This lesson explains general biology for a non-specialist audience. It does not diagnose any condition, and nothing here substitutes for examination by a qualified clinician. The warning signs listed here require assessment by a dentist, not self-management. Discuss any concern about your health with an appropriately qualified professional.

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