

1 **Salvador Gaytan:** Welcome to SmileTalk, an entertaining and informative dental talk  
2 show, featuring the latest news and developments in dentistry. I'm  
3 Salvador Gaytan, and I'm here with...  
4  
5 **Dr. John Chao:** Dr. John Chao, hi everybody.  
6  
7 **Salvador Gaytan:** The friendly dentist, I might add, isn't that right, Dr. John?  
8  
9 **Dr. John Chao:** Yes, we try to be as friendly and nice to our patients as we possibly  
10 can. We specialize in cowards.  
11  
12 **Salvador Gaytan:** Cowards, huh?  
13  
14 **Dr. John Chao:** We welcome cowards.  
15  
16 **Salvador Gaytan:** Now, why do you specialize in cowards?  
17  
18 **Dr. John Chao:** Because we have worked out a whole bunch of techniques using  
19 modern technology to keep the experience minimally  
20 uncomfortable, basically without pain for most procedures.  
21  
22 **Salvador Gaytan:** Now, that's interesting. Give us a sample of one technique that you  
23 use, that helps cowards feel good about the dentist.  
24  
25 **Dr. John Chao:** Well, one thing we have, it's called Air Abrasion. It's a micro type  
26 of dentistry, where we use a nozzle that shoots out some powder.  
27 This powder is abrasive, and when it's put on a certain part on the  
28 tooth, it removes decay without the patient feeling anything.  
29  
30 **Salvador Gaytan:** No shot required?  
31  
32 **Dr. John Chao:** We don't have to give shots, we don't have to drill the tooth. We  
33 can airbrush the decayed tooth away, and without any pain, and we  
34 can put the filling in it, and we're all done.  
35  
36 **Salvador Gaytan:** So, it just feels like a shot of air, really, to the patient, doesn't it?  
37  
38 **Dr. John Chao:** Yeah, it just feels like air blowing on your teeth, that's all. So,  
39 there are many other ways of doing things that are minimally  
40 invasive, and very comfortable for the patients. There's a whole lot  
41 of new devices that are available to make things so much more  
42 comfortable than what it was like years ago.  
43  
44 **Salvador Gaytan:** I bet a lot of cowards, patients, don't know about Air Abrasion. I  
45 bet they think that to do anything with a cavity involves a shot and  
46 a drill.

47  
48 **Dr. John Chao:** It's very nice to pleasantly surprise our patients with painless  
49 techniques such as that.  
50  
51 **Salvador Gaytan:** Now, how long have you had the Air Abrasion technology in your  
52 office?  
53  
54 **Dr. John Chao:** I've had it at least 10 years.  
55  
56 **Salvador Gaytan:** 10 years?  
57  
58 **Dr. John Chao:** Yeah. It's been around a long time, but it just doesn't seem like  
59 patients in general know about something like that. They know  
60 more about lasers and so on, that you could use lasers to take care  
61 of cavities, but I don't prefer lasers for that purpose, because the  
62 laser tip itself is quite large. It's larger than the smallest drill. So,  
63 you actually lose more tooth structure if you use laser.  
64  
65 But using laser is for treating gum disease, and be able to avoid  
66 gum surgery is another very advanced use of lasers and high  
67 technology in our office that we don't [inaudible].  
68  
69 **Salvador Gaytan:** Excellent. Well, we'll have to get a little bit more in detail on that,  
70 but we are going to proceed to our Rapid Fire Five, Dr. John. Are  
71 you ready?  
72  
73 **Dr. John Chao:** That's right, because -- yeah, we got sidetracked, so let's go back  
74 to our theme.  
75  
76 **Salvador Gaytan:** Absolutely, alright. Here we go, question number one: Children  
77 under the age of 10 cannot have orthodontics, true or false?  
78  
79 **Dr. John Chao:** That will be definitely false.  
80  
81 **Salvador Gaytan:** False, okay. Question number two: Tonsils can cause sleep apnea  
82 in children, true or false?  
83  
84 **Dr. John Chao:** Believe it or not, that's true. It's very important that the parents  
85 know that.  
86  
87 **Salvador Gaytan:** Okay, question number three: Tonsils should always be removed,  
88 true or false?  
89  
90 **Dr. John Chao:** That will be false, of course.  
91

92 **Salvador Gaytan:** False. Question number four: HMO and PPO dental plans are  
93 relatively the same, true or false?  
94

95 **Dr. John Chao:** No, it's false.  
96

97 **Salvador Gaytan:** False, okay. Question number five: A chipped tooth can lead to  
98 decay in that tooth, true or false?  
99

100 **Dr. John Chao:** Of course, it's true.  
101

102 **Salvador Gaytan:** True, okay. Let's go to question number one, Dr. John, for the  
103 details. Children under the age of 10 cannot have orthodontics.  
104 That is false.  
105

106 **Dr. John Chao:** That's definitely false, in fact sometimes they should have  
107 orthodontics. Now, the reason it's not commonly done, where you  
108 actually move teeth, is because at that age you still have some baby  
109 teeth, so we call that mixed dentition.  
110

111 So, we don't actually go in and put braces on all the teeth, because  
112 you're going to lose some of the baby teeth, and you can't move  
113 your permanent teeth when the baby teeth are in the way. But there  
114 are different conditions that can be treated without putting braces  
115 on.  
116

117 For instance, if the way the teeth are lined up in an arch, where the  
118 arch is narrow. In other words, the teeth are stuck out that make the  
119 face kind of long, a lot of times, the dentist or the orthodontist can  
120 put retainers there, that can actually expand the upper jaw, so that  
121 as the teeth come in, the jaw grows wider, and then there will be  
122 enough room then for the permanent teeth when they come out,  
123 when they all come out.  
124

125 They generally come out when the child is about 12 years old. So,  
126 if you can set it up early, and get things lined up better, and give  
127 the patient a better facial contour actually, you can make  
128 orthodontics a lot easier, and actually be able to affect the growth  
129 and development of the jaw to give a much, much better bite, and  
130 much better facial contour. You can make a very big difference in  
131 terms of the appearance.  
132

133 **Salvador Gaytan:** Now, how common is it for someone around 10, a child around 10  
134 to have any of these procedures, like widening the jaw that you just  
135 mentioned?  
136

137 **Dr. John Chao:** It's amazing. It's amazing how many children can use something  
138 like that.  
139

140 **Salvador Gaytan:** How many do, though, in your experience? It's very small, isn't it,  
141 percentage wise?  
142

143 **Dr. John Chao:** I see one or two every week.  
144

145 **Salvador Gaytan:** Really?  
146

147 **Dr. John Chao:** One or two every week, and I don't see that many children. I see  
148 some as part of the family that comes in to see me, but it's amazing  
149 how many there is.  
150

151 Those in the audience, if you have children around that age, be  
152 sure to ask your dentist whether your child can be helped by what's  
153 called Early Interceptive Orthodontics, going in there and do some  
154 intervention in terms of growth and development of the jaws.  
155

156 It's amazing how much more beautiful the girl becomes when you  
157 can expand the jaw and give the child a wonderful, bright, broad  
158 smile. I must give this caveat to our audience, and parents  
159 remember, don't let anyone extract your child's teeth in the  
160 process of doing orthodontics.  
161

162 **Salvador Gaytan:** Never?  
163

164 **Dr. John Chao:** I would not say, never, but it should be a special circumstance. I  
165 am really against -- and I think a lot of the consensus, in my  
166 opinion, in dentistry now is, 'Don't extract.' Because if you extract  
167 it for teeth, you're pushing the teeth together, you're making the  
168 smile smaller, and eclipsing the support for the lip, and for the  
169 cheek for the rest of that patient's life.  
170

171 So, how much nicer if the teeth are straight, but you have a broad  
172 smile compared to a smaller and more narrow smile. So, don't let  
173 that happen to your child. If it is suggested, talk to your own  
174 dentist or get a second opinion. Ask your own dentist whether  
175 that's absolutely necessary.  
176

177 **Salvador Gaytan:** There's more to talk about that, but let's go to question number  
178 two: Tonsils can cause sleep apnea in children, that is true.  
179

180 **Dr. John Chao:** That's true, and people don't know that sleep apnea can affect  
181 children. In fact, it's quite common, especially if there is nasal

182 obstruction, allergies that can close up the nasal airway, or there  
183 are big tonsils that can crowd the airway.  
184  
185 If the airway is crowded, and the muscles relaxed during non-REM  
186 sleep or real deep sleep, then the airway is actually blocked. If it  
187 happens frequently, then the child can be deprived of oxygen when  
188 he or she wakes up in the morning.  
189  
190 This child can have all the symptoms of adult apnea. One of the  
191 telltale signs of children suffering from sleep apnea is actually dark  
192 circles underneath the eyes. Now, sometimes that comes from  
193 allergies and so on, but very often it could be from sleep apnea,  
194 and they can have major problems of course.  
195  
196 If they are having tonsil problems, they tend to be overactive  
197 during their waking hours, because if they don't attempt to fall  
198 asleep, they get tired, so they get more active and move around a  
199 little bit, so they can feel better.  
200  
201 Sadly speaking, when they're so called hyperactive like that, just  
202 trying to stay awake and stay comfortable, they are put on  
203 medication that's meant to calm them down. So, the sleep apnea  
204 child is being tranquilized when he needs to have his problem  
205 resolved on the deeper level. So, it's really sad to see that  
206 sometimes.  
207  
208 So, if your child is snoring, and grinding his teeth, have the tonsils  
209 checked, especially if you feel like he is actually choking, if you  
210 can see that he is actually choking during his sleep, take him to the  
211 doctor, and there are tests that can help diagnose their problem.  
212 One of the tests is just take the child to a sleep lab, and have the  
213 child sleep over there, and they can actually measure him.  
214  
215 **Salvador Gaytan:** Now, for also another indication of sleep apnea in children is they  
216 don't want to do their homework, is that true?  
217  
218 **Dr. John Chao:** Yeah, they get sleepy, yeah. It's like the dog ate my homework,  
219 right, it could be another excuse.  
220  
221 **Salvador Gaytan:** Well, isn't it kind of true, people get sleepy when they don't want  
222 to do something?  
223  
224 **Dr. John Chao:** That's true, but you want to do it even less when you didn't get  
225 enough sleep every single night, it's through no fault of your own.  
226 So, we do have to be a little bit more compassionate and more  
227 understanding of children and watch them closer when they sleep,

228 not just watch them when they are not asleep, but watch them just  
229 as much when they're sleeping to detect abnormal patterns.  
230  
231 Sleepwalking, wetting your bed, are also symptoms of sleep apnea.  
232 Having nightmares are symptoms of sleep apnea, because you are  
233 choking the air away from the brain. So, watch for these things,  
234 and don't take them for granted. Your children will be much better  
235 off if you ask questions of your doctor or your dentist concerning  
236 night time symptoms.  
237  
238 **Salvador Gaytan:** Excellent. For anyone just tuning in, you're listening to SmileTalk,  
239 with Dr. John Chao, the friendly dentist from Alhambra Dental,  
240 and you can reach Dr. John at [AlhambraDental.com](http://AlhambraDental.com) or 626-308-  
241 9104, and you always like questions from the audience, isn't that  
242 true, Dr. John?  
243  
244 **Dr. John Chao:** Yes. Email or phone calls, we enjoy them.  
245  
246 **Salvador Gaytan:** Fantastic. Okay, question number three, Dr. John. Tonsils should  
247 always be removed, that is false?  
248  
249 **Dr. John Chao:** Well, you can have normal tonsils, you could have large tonsils,  
250 you can have tonsillitis, you can have tonsils that fill up only  
251 temporarily. You can have tonsils which remain enlarged or  
252 hypertrophied for long periods of time.  
253  
254 **Salvador Gaytan:** Can you spell that, hypertrophied, what you just said?  
255  
256 **Dr. John Chao:** Hypertrophy, forget that term, they're enlarged, they get large and  
257 stay large. That can affect not only what we just talked about, sleep  
258 apnea, it can bring about sleep apnea, it can also bring about  
259 crooked teeth. If you can't swallow right, because the tonsils are in  
260 the back of your throat, you're going to develop a tongue thrust  
261 when you swallow.  
262  
263 Since we swallow thousands of times per day, that movement plus  
264 other things will tend to make the jaws narrow, because the  
265 muscles are pushing against the jaws all the time. So, you're  
266 bucked teeth, narrow jaw, and that can produce orthodontic  
267 problems in the end.  
268  
269 **Salvador Gaytan:** So, tonsils have a big effect on children in many ways.  
270  
271 **Dr. John Chao:** Yes, definitely from the way their teeth develop, to the way they  
272 behave, to having problems at school.  
273

274 **Salvador Gaytan:** Do you still have your tonsils?  
275  
276 **Dr. John Chao:** Yes, I do.  
277  
278 **Salvador Gaytan:** You do?  
279  
280 **Dr. John Chao:** I had problems with tonsils, but I outgrew them. That can be a  
281 major problem. Oh, and learning problems. If you're sleepy, if  
282 your brain isn't working right, you're not getting enough oxygen  
283 when you're sleeping, or if you cannot get enough rest, because as  
284 soon as you get into deeper stages of sleep, the muscles relax and  
285 you're choked.  
286  
287 So, you cannot get into deeper stages of sleep. It could prevent you  
288 from feeling rested. In the long term, it could even affect the  
289 growth and development of your body.  
290  
291 **Salvador Gaytan:** So, tonsils -- I think people kind of know what tonsils are, but what  
292 exactly are the tonsils?  
293  
294 **Dr. John Chao:** Tonsils are lymph nodes in the back of your palate, on the sides of  
295 your wind pipe. When they enlarge, if you look at it, if you open  
296 your mouth and say ah, you can actually see it. That's one of the  
297 things your doctor looks for, when he puts a tongue blade on your  
298 tongue and pushes it down, and have you say ah.  
299  
300 **Salvador Gaytan:** So, that's what he's looking for, the tonsils, one of them.  
301  
302 **Dr. John Chao:** Partly, yeah partly. Well, you look for cancer and other things in  
303 older people, but that's one of the main reasons.  
304  
305 **Salvador Gaytan:** Interesting, okay. Question number four, Dr. John, HMO and PPO  
306 plans are relatively the same, that is not true.  
307  
308 **Dr. John Chao:** That is not true, of course, I think most people know that, but in  
309 dentistry, it actually has a big difference, and this is the time you  
310 need to decide whether you want a HMO or whether you want a  
311 PPO. HMO is a plan where generally you don't pay anything for  
312 certain procedures in dentistry, such as cleaning, fillings or x-rays.  
313  
314 In a PPO plan, or in a, what's called indemnity plan, where you  
315 can have your own choice of doctors, then you generally have a  
316 co-payment, and generally the doctor that treats you, can charge  
317 his regular fees.  
318

319 In the HMO plan, the doctor has agreed to charge a lower fee for  
320 the reason that he's getting paid or the dental corporation is getting  
321 paid a fixed amount for treating so many patients. So, because of  
322 this particular contract he has with the plan administrators...

323  
324 **Salvador Gaytan:** You get more volume.

325  
326 **Dr. John Chao:** Yeah, more volume, then he can lower his fees and be able to  
327 perform dentistry at a lower cost to his patients.

328  
329 **Salvador Gaytan:** Now, do you take HMO plans?

330  
331 **Dr. John Chao:** No, I'm not part of any network by choice, and by my philosophy  
332 of practice. I like to spend more time with my patients. For one  
333 thing, I don't belong to any plans at all, PPO or any other, because  
334 I feel that the doctor-patient relationship is sacrosanct, and should  
335 not be interfered with in any way.

336  
337 So, I have no contracts that can come between my patient and I as  
338 far as our discussion and recommendation as to what should be  
339 done for the best interest of my patients, but that's just my  
340 philosophy. Many wonderful doctors, they work with different  
341 plans.

342  
343 So, now go back to that, so HMO, in the month of November, is  
344 the time when each patient needs to decide what plan they want to  
345 belong to, for the following year.

346  
347 **Salvador Gaytan:** November is the initiation day to every year?

348  
349 **Dr. John Chao:** That's the time you can renew your present plan, or you can  
350 change it. The employers will give you a choice sometimes, and  
351 November is the only time when you can make a choice. So, if you  
352 think that you want to change from an HMO to a PPO or a free  
353 choice plan, well, you can see the doctor of your choice, and then  
354 you need to do it in the month of November.

355  
356 Or if you have a PPO plan, if you're like you want to try a HMO  
357 plan, and then that's the time when you can elect then to switch to  
358 an HMO plan. But you've got to do it in the month of November,  
359 generally speaking. There are exceptions, so please do check with  
360 your employer, with their personnel department, as to what that  
361 time window is.

362  
363 **Salvador Gaytan:** Interesting, interesting, okay. Question number five: A chipped  
364 tooth can lead to tooth decay, that is true, Dr. John.

365  
366 **Dr. John Chao:** Yeah, any chipped tooth, if it's deep enough, and it chipped and  
367 broke enough to wear the dentin, the inner, softer tooth structure is  
368 exposed to oral fluids, then there is a higher chance of decay.  
369  
370 Now, generally speaking, if it's a chip between teeth in the back,  
371 such as between molars, that chip then becomes an area where  
372 food can get trapped. If you're unable to clean it out regularly, then  
373 that will become an area where decay will start. So, that could  
374 definitely lead to some adverse events.  
375  
376 **Salvador Gaytan:** So, you can have a chipped tooth fixed with different means, right?  
377  
378 **Dr. John Chao:** Yeah, you can -- on the front teeth, if it's really, really small, you  
379 don't want it there, you can actually polish it off, have your dentist  
380 polish it off, or you can actually add a little {bend} and bond it in,  
381 which I prefer [inaudible] shorten the teeth. Or you can just -- if  
382 it's in the back tooth, you might as well just fill it.  
383  
384 **Salvador Gaytan:** Now, the first option you gave, just basically filing the tooth down  
385 a little bit, that requires no shots, right?  
386  
387 **Dr. John Chao:** No, that is totally painless. The dentist has to judiciously polish it.  
388 The problem is, if we polish one tooth, one tooth is shorter, its  
389 mirror image on the opposite side then will appear a little longer.  
390 So, you've got to be a little careful.  
391  
392 If one tooth is a little long to begin with, and is chipping, then the  
393 problem is easy to solve. You can just basically even both teeth  
394 out. But I generally like to build up the short tooth, than cut the  
395 long tooth off, because I think the more teeth you show, the better  
396 you smile, the younger you look. So, it's just better to preserve  
397 teeth.  
398  
399 **Salvador Gaytan:** Now, using a -- what did you call it, a bond or...?  
400  
401 **Dr. John Chao:** A bonding. Actually without drilling a hole, you can actually add  
402 this glass composite material to teeth, and this material can blend  
403 into your tooth.  
404  
405 **Salvador Gaytan:** Does it require a shot?  
406  
407 **Dr. John Chao:** No, you just etch it and bond it, there are all kinds of different  
408 ways.  
409  
410 **Salvador Gaytan:** It's a very common procedure by the way?

411  
412 **Dr. John Chao:** Very common, yeah, it's very common, it could be done for  
413 chipped teeth or any other problems with your teeth, or gaps  
414 between teeth can be filled in that way.  
415  
416 **Salvador Gaytan:** Interesting, okay. Anyone just tuning in, you're listening to  
417 SmileTalk with Dr. John Chao from Alhambra Dental. You can  
418 reach Dr. John at [AlhambraDental.com](http://AlhambraDental.com) or 626-308-9104.  
419  
420 Okay, Dr. John, we're actually coming to the last few minutes of  
421 our show, but let's talk about one thing that you wanted to get into,  
422 and maybe we'll stretch it into the next show. In fact, let's get into  
423 a funny story that you were sharing with me.  
424  
425 An excuse not to go to the dentist, this beats them all. This  
426 gentleman, he's actually from Colombia, Juan Carlos Guzman-  
427 Betancourt, 33. I guess he's classified as a super conman, and he's  
428 been in and out of jail, and I guess he would vandalize people in  
429 very ritzy hotels and things like that.  
430  
431 But this was a new one. He was in a low security prison in 2005,  
432 and he was able to persuade the warden to release him to go to a  
433 dental appointment. What do you think happened, Dr. John? Well,  
434 you know actually.  
435  
436 **Dr. John Chao:** Well, actually he escaped. That was his excuse to escape.  
437  
438 **Salvador Gaytan:** He escaped. He never came back.  
439  
440 **Dr. John Chao:** Yeah, he was a no-show at the dental office.  
441  
442 **Salvador Gaytan:** Now, was he your patient? No, I'm just kidding.  
443  
444 **Dr. John Chao:** No, but what's interesting is, if he's really a wanted -- a really,  
445 really highly wanted criminal...  
446  
447 **Salvador Gaytan:** He's still wanted actually right now. He's been in and out of jail,  
448 and as of right now, they are searching for him.  
449  
450 **Dr. John Chao:** Okay, now I don't think it's worthwhile if he just stole things. He's  
451 kind of a petty thief. If he stole millions and millions, or he is a...  
452  
453 **Salvador Gaytan:** Well, he is a pretty good thief. He targeted high-end people.  
454

455 **Dr. John Chao:** Well, if there is enough funds behind it, and this guy needs to be  
456 caught, there is something that -- there is a resource that can be  
457 tapped.  
458

459 **Salvador Gaytan:** What is that?  
460

461 **Dr. John Chao:** That is, send his x-rays to all the dentists all around, where you  
462 think he might be.  
463

464 **Salvador Gaytan:** He's international though. He's been in the states, he's been in  
465 other countries.  
466

467 **Dr. John Chao:** Yeah, that's hard, but if it's local, and you think he's going to be  
468 around here somewhere, around some place, then you can actually,  
469 as part of your manhunt, send his x-rays around to all the dentists.  
470 When he shows up at somebody's office, they could compare his  
471 teeth with the x-rays, and they will be able to catch him.  
472

473 **Salvador Gaytan:** That would be a good -- but you know what, it would be kind of  
474 like fingerprints, but dentists don't have an x-ray database, do they,  
475 where they can look at, and bring in someone's x-rays and put it on  
476 a computer database, and go, "Yep, it's a match."  
477

478 **Dr. John Chao:** Eventually they may be able to do that. You can send x-rays of this  
479 perpetrator or this alleged criminal by email to dental offices. More  
480 and more offices are now on the internet. So, there it is, and you  
481 see somebody, you give a general description of who this person  
482 is.  
483

484 **Salvador Gaytan:** Yeah, because we have photos here, we see photos.  
485

486 **Dr. John Chao:** You see photos, you see -- or he could disguise himself and so on,  
487 but if the dentist has his x-rays sitting somewhere around, you'll be  
488 surprised sooner or later this guy is going to show up at the dentist.  
489

490 **Salvador Gaytan:** Now, would you ever think that having dental records on a  
491 computer, like they have fingerprints on a computer, do you ever  
492 see a day when that will happen?  
493

494 **Dr. John Chao:** What do you mean?  
495

496 **Salvador Gaytan:** Well, where you could take someone's dental records, how they...  
497

498 **Dr. John Chao:** Yeah, it's all computerized anyway right now. All the x-rays we  
499 take in our office are all digital. We don't use film anymore, so it's  
500 all there.

501

502 *Salvador Gaytan:* So, do you ever see though a national database that they would  
503 compare?

504

505 *Dr. John Chao:* You can't do that, because there are privacy laws, you cannot  
506 disclose that. But if it's criminal, law enforcement can certainly  
507 have the right to disseminate the important, relevant information to  
508 all dentists. Sooner or later, this guy is going to have a toothache,  
509 so he's going to need help somewhere. So, there is a chance that he  
510 could be caught that way.

511

512 *Salvador Gaytan:* We're coming to the end of our show, Dr. John, we're going to get  
513 into that on the next show, some very fascinating stories. But it's  
514 been a great show, Dr. John.

515

516 *Dr. John Chao:* Yes, I enjoyed it, and let's continue next time into more forensic  
517 dentistry.

518

519 *Salvador Gaytan:* Yes, absolutely. You've been listening to SmileTalk with Dr. John.  
520 You can logon to [AlhambraDental.com](http://AlhambraDental.com) for more information, and  
521 also to view past shows. That's a wrap, Dr. John.

522

523 *Dr. John Chao:* Bye everybody.

524

525 [END OF AUDIO]