

1 **Salvador Gaytan:** Welcome to SmileTalk, an entertaining and informative dental  
2 talk-show featuring the latest news and developments in dentistry  
3 and other interesting topics. I'm Salvador Gaytan, and I'm here  
4 with...?  
5

6 **Dr. John Chao:** Dr. John Chao, hi everybody. Our show also will include whatever  
7 makes you smile, because this is SmileTalk.  
8

9 **Salvador Gaytan:** That is right, we've expanded, haven't we, Dr. John?  
10

11 **Dr. John Chao:** Yes, we're going to talk about interesting things in dentistry, as  
12 well as interesting things related to dentistry in some way or  
13 another.  
14

15 **Salvador Gaytan:** That's right. These people are entertained, and it puts a smile on  
16 their face, and there's a whole world out there, isn't there, Dr.  
17 John?  
18

19 **Dr. John Chao:** Yes, yes, it's a very exciting expansion of our show, and I'm  
20 looking forward to this program and the future programs.  
21

22 **Salvador Gaytan:** Now, Dr. John, we have, coming up, a very special interview that  
23 you have lined up, and I don't think someone from this  
24 organization has ever been interviewed on radio, have they?  
25

26 **Dr. John Chao:** Certainly there are not that many dental talk shows, so I wouldn't  
27 imagine there are very many representatives of the American  
28 Dental Association ever being on a dental talk show.  
29

30 **Salvador Gaytan:** So, coming up later in the show here, we have an interview  
31 with...?  
32

33 **Dr. John Chao:** The current president of the American Dental Association, Dr.  
34 Ronald Tankersley from Virginia. He's going to address some  
35 issues with us regarding dental care, and in fact we will include  
36 some conversation regarding health reform as it affects dental care.  
37

38 **Salvador Gaytan:** You have some questions that are going to pertain to oral health  
39 and the connection between the health of the body, and Dr.  
40 Tankersley has some very interesting things he's going to say about  
41 that.  
42

43 **Dr. John Chao:** Yes, and that dovetails with what we've been trying to do on this  
44 show, that is make the connection between oral health and general  
45 health. We have talked about how pre-term babies and pregnancy  
46 problems may be related to gum disease.

47  
48 We talked about the relationship between gum disease and cardiac  
49 vascular diseases. So, we've talked about, at different times, the  
50 oral body connection. But I think that Dr. Tankersley will address  
51 this question at length and more in detail and he has some new  
52 information for us that will be very interesting and fascinating to  
53 our audience.  
54  
55 **Salvador Gaytan:** Now, for anyone tuning in, you're listening to SmileTalk with Dr.  
56 John Chao, the friendly dentist. For anyone who wants to hear any  
57 of these programs in its entirety and you've missed it, you can  
58 logon to [AlhambraDental.com](http://AlhambraDental.com) or you can contact Dr. John at 626-  
59 308-9104.  
60  
61 Now, Dr. John, the first part of the interview is coming up in a few  
62 minutes here, but you have some interesting information, Dr. John,  
63 about dentistry way back when? And I mean way back. Tell the  
64 audience about this.  
65  
66 **Dr. John Chao:** I'm assuming you're not talking about the earlier part of my life.  
67  
68 **Salvador Gaytan:** I'm not talking about that. I'm talking way back John, I'm talking --  
69 to me what I'm looking at, it almost seems like the dinosaurs  
70 roamed here, but you have some interesting info when dentistry  
71 started.  
72  
73 **Dr. John Chao:** Yeah, you're talking about B.C. right, when I don't think I was  
74 around then, but in the Indus Valley civilization, there was  
75 evidence of dentistry practiced as far back as 7000 B.C.  
76  
77 **Salvador Gaytan:** Did you say 7000 B.C.?  
78  
79 **Dr. John Chao:** 7000 B.C., so I'm not that old.  
80  
81 **Salvador Gaytan:** You're not that old.  
82  
83 **Dr. John Chao:** So, I was not there.  
84  
85 **Salvador Gaytan:** You were practicing dentistry in what, 2000 B.C.?  
86  
87 **Dr. John Chao:** Let's go down the line a few centuries to at least 2000 A.D. okay?  
88  
89 **Salvador Gaytan:** Now, B.C. for anyone who -- B.C. is before Christ was born. So,  
90 that's 7000 years before Christ was born.  
91  
92 **Dr. John Chao:** You tag on another 2000 to that, to bring it to present day.

93  
94 **Salvador Gaytan:** So, that's 9000 years ago.  
95  
96 **Dr. John Chao:** 9000 years ago, let me tell you what they did. 9000 years ago, they  
97 had drills, but they had bow drills. So, you hold the bow, and the  
98 drill turns, and these were dentistry done by skilled bead  
99 craftsmen. Apparently they know how to use the bow drill, and  
100 they were doing dentistry at that time. Now, the next indication we  
101 have of dentistry, came in about 5000 B.C.  
102  
103 **Salvador Gaytan:** Those guys were young.  
104  
105 **Dr. John Chao:** Yeah, they were 2000 years younger, and it was a Samaritan text  
106 that described tooth worm as a cause of dental caries. Now, that  
107 theory has not changed very much.  
108  
109 **Salvador Gaytan:** Tooth worm was a cavity?  
110  
111 **Dr. John Chao:** Tooth worm that causes the cavity.  
112  
113 **Salvador Gaytan:** That causes the cavity.  
114  
115 **Dr. John Chao:** Now, we know that oral bacteria plays a role in the fermentation of  
116 acid, which in turn decalcifies the enamel, and then over time  
117 causes the cavities. So, the worm theory is not wrong, the way it  
118 was in 5000 B.C. Then of course, we have evidence that India,  
119 Egypt, Japan and China had references to cavities being caused by  
120 some kind of a worm.  
121  
122 **Salvador Gaytan:** Now, Dr. John, I just want to get to the -- if you were practicing  
123 dentistry in 7000 B.C., what would your office be like?  
124  
125 **Dr. John Chao:** It would be in the pyramid. I hope higher up.  
126  
127 **Salvador Gaytan:** Higher up, okay, alright.  
128  
129 **Dr. John Chao:** I hope I have a view looking out, because I don't like to be stuck in  
130 walled places, at walled edifices.  
131  
132 **Salvador Gaytan:** Would you guarantee painless dentistry back then?  
133  
134 **Dr. John Chao:** Oh yeah, well, in those days you can promise anything.  
135  
136 **Salvador Gaytan:** That's true. No laws to work with.  
137  
138 **Dr. John Chao:** Well, they're grateful for anything, right?

139  
140 **Salvador Gaytan:** That's true.  
141  
142 **Dr. John Chao:** So, yeah, I would imagine it would be a different form of practice.  
143 You would use the bow drill. I suppose I can hire somebody to run  
144 the bow drill as I'm drilling. So, as a dentist you think of those  
145 things.  
146  
147 **Salvador Gaytan:** Now, you mentioned the American Dental Association has been  
148 around how long?  
149  
150 **Dr. John Chao:** Almost 150 years.  
151  
152 **Salvador Gaytan:** 150 years compared to 9000 years, the first evidence of dentistry.  
153 So, it's a very young organization, really.  
154  
155 **Dr. John Chao:** Dentistry had a very slow start, even though it started so early, but  
156 it is not the oldest profession, even though it's pretty close.  
157  
158 **Salvador Gaytan:** So, can you even imagine that far back, that they could have done  
159 anything meaningful besides pull teeth?  
160  
161 **Dr. John Chao:** Yeah. There's historical evidence that the Chinese implanted  
162 bamboo sticks into the bone as implants.  
163  
164 **Salvador Gaytan:** Really? And that worked?  
165  
166 **Dr. John Chao:** It was found. It was found in the jaw.  
167  
168 **Salvador Gaytan:** What was the life guarantee of that bamboo?  
169  
170 **Dr. John Chao:** Well, it lasted until now. Implants were found in various  
171 civilizations.  
172  
173 **Salvador Gaytan:** Well, I guess people have to chew their food with something,  
174 because if you don't have something in your mouth, teeth, you die,  
175 right?  
176  
177 **Dr. John Chao:** Yeah, and the bamboo was found in a woman, it was around the  
178 front teeth, possibly could have been done for cosmetic purposes,  
179 as we're doing today. So, implants have been around for many,  
180 many years.  
181  
182 **Salvador Gaytan:** Dr. John, you're going to bring back bamboo cosmetic dentistry,  
183 how about that?  
184

185 **Dr. John Chao:** Well, how about I can start that with you? [Laughter]  
186  
187 **Salvador Gaytan:** Let's not go too far, okay, let's not start with me, now, come on  
188 now. I don't want to be the guinea pig.  
189  
190 **Dr. John Chao:** Interestingly enough, they're using not only titanium, but also  
191 ceramics now as implants.  
192  
193 **Salvador Gaytan:** Wow. Okay, Dr. John, well, you know what, it's that time, and  
194 we've got a special guest lined up, and let's get to it, Dr. John.  
195  
196 **Dr. John Chao:** Alright, let's introduce Dr. Ronald Tankersley, the President of  
197 American Dental Association.  
198  
199 **Salvador Gaytan:** Dr. Tankersley, how are you?  
200  
201 **Dr. Tankersley:** I'm doing great, Sal.  
202  
203 **Dr. John Chao:** Good, thank you for coming to our show.  
204  
205 **Dr. Tankersley:** Well, thank you for having me.  
206  
207 **Dr. John Chao:** We've been looking forward to it, and I have done a little bit of  
208 research on this, and I'd like to tell our audience that you are the  
209 president of the American Dental Association this year. The  
210 American Dental Association is the oldest and the largest dental  
211 association in the world, representing more than 155,000 dentists.  
212  
213 The ADA, the American Dental Association provides information  
214 on oral health, promotes dental science and conducts research,  
215 development and testing on dental products and materials, which  
216 lead to the common concept that we don't hear about the ADA,  
217 except when somebody advertises on TV that they've got the seal  
218 of approval. Is that correct, Dr. Tankersley?  
219  
220 **Dr. Tankersley:** Well, that seems to be correct. I think that's what our -- our seal  
221 program is one of the things, it's most obvious to the public and I  
222 appreciate you actually bringing that up, because it's one of the  
223 things we're really proud of.  
224  
225 The ADA 'Seal of Acceptance' was designed to help consumers  
226 make informed decisions about oral health products. And as you  
227 indicated, it really is widely recognized as an important symbol of  
228 dental product safety and effectiveness.  
229

230 **Dr. John Chao:** Yes, and then I understand this has been going on since 1931 over  
231 almost 80 years ago.  
232

233 **Dr. Tankersley:** Yeah, actually the 'Seal of Acceptance' program was established in  
234 1930, and in 1931 they got their act together, they'd done the  
235 studies they need to do, and awarded the first seal.  
236

237 **Dr. John Chao:** Yeah, the first seal was for what product, Dr. Tankersley?  
238

239 **Dr. Tankersley:** It was cod-liver oil actually.  
240

241 **Dr. John Chao:** Yeah, and interestingly enough that was 80 years ago, and I  
242 actually grew up in China on cod-liver oil. We had to take a spoon  
243 full of it, all eight of us children, after every meal. Now, the taste  
244 of it does not bring a smile to my face.  
245

246 **Dr. Tankersley:** Right. There are plenty of people in my generation, who got their  
247 share of cod-liver oil on them.  
248

249 **Dr. John Chao:** Yeah, and the interesting thing is that all my brothers and sisters  
250 have great teeth.  
251

252 **Dr. Tankersley:** Maybe it works [crosstalk].  
253

254 **Dr. John Chao:** Yeah, maybe it worked, great teeth, and I don't have much of a  
255 family practice, because my family doesn't come around very  
256 much.  
257

258 **Dr. Tankersley:** Right.  
259

260 **Dr. John Chao:** But now it turns out that cod-liver oil is actually good for all kinds  
261 of things.  
262

263 **Dr. Tankersley:** That's correct.  
264

265 **Dr. John Chao:** For the heart, for the immune system and it's recognized now, I  
266 understand, as a very wonderful food supplement. So, the ADA  
267 was 80 years ahead of all the rest of the world as far as product  
268 recognition is concerned.  
269

270 **Dr. Tankersley:** Well, that's true. One of the main things that the American Dental  
271 Association does, which people don't understand, is we establish  
272 standards for the dental profession. So, you're right, that's sort of  
273 one of our flagships, is standards for products.  
274

275 Today, when you see the ADA seal of acceptance on a package,  
276 you know that that product is then evaluated and meets a stringent  
277 ADA criteria for safety and effectiveness. And basically, what we  
278 want to say is if it's got an ADA seal, it says what it does, and it  
279 does what it says.  
280

281 **Dr. John Chao:** That's a great program. Can you give us an idea how rigorous this  
282 process might be in very short...?  
283

284 **Dr. Tankersley:** Well, it's actually a very rigorous process. There are several  
285 conditions that have to be met before a dental product can be  
286 awarded the ADA seal. For example, they have to supply all the  
287 laboratory clinical studies to the ADA concerning that product's  
288 safety and effectiveness.  
289

290 We look at all of the ingredients and pertinent information. We  
291 have to be assured that there's evidence that the manufacturing and  
292 laboratory facilities meet FDA standards. Sometimes, the ADA  
293 may even conduct or ask the company to conduct additional testing  
294 to make sure that the standards are met.  
295

296 So, basically at the end of the day, if a product is awarded the seal,  
297 it has to meet the ADA criteria for both safety and effectiveness.  
298 One thing I really want people to understand is that this award is  
299 based strictly on science. It's not a product endorsement.  
300

301 **Dr. John Chao:** I understand that, and I think the public recognizes that too, and  
302 with the evidence that ADA has done has worked well over the  
303 years is that dental cavities and gum diseases have been on the  
304 wane, and we have much better statistics regarding dental health  
305 today than compared to years and years ago.  
306

307 **Dr. Tankersley:** John, you're absolutely right. The people who actually access our  
308 private dental system in this country, have the best dental care in  
309 the history of the world, and very low caries and periodontal  
310 {risk}.  
311

312 Unfortunately, there is a segment of our population that -- I hate to  
313 tell you, but unfortunately dental caries is actually increasing in  
314 that segment of the population. Quite frankly, that is the oral health  
315 crisis we have today.  
316

317 **Dr. John Chao:** Yes. We have a segment of our population that does not have  
318 sufficient access to dental care, and that has been the concern of  
319 the dental profession. But I understand that dentists have already,

320 and continued to do charity dentistry in different ways and  
321 different forms, isn't that true?  
322  
323 **Dr. Tankersley:** Oh, that's absolutely true. As a matter of fact, one of the things I'm  
324 proud to [indiscernible] in our profession is many of our outreach  
325 programs, for example, our annual 'Give Kids a Smile' event. We  
326 also have what we call Mission Mercy Project, which actually  
327 started in my state of Virginia.  
328  
329 **Dr. John Chao:** Really?  
330  
331 **Dr. Tankersley:** Where dentists voluntarily go to areas that are underserved and  
332 provide free dental care. The impressive thing about it is, in  
333 Virginia, we actually can't use all of our voluntaries that want to  
334 come. We actually have to have a cut off, because we have so  
335 many dentist personnel that want to participate in this.  
336  
337 And then another extremely successful program that hits another  
338 patient population is our donated dental services project, where  
339 dentists actually take care of special needs patients in their private  
340 offices totally gratis.  
341  
342 **Dr. John Chao:** Yes, yes.  
343  
344 **Dr. Tankersley:** The important thing about all of this, so it's not just the patients  
345 that are treated, but these projects help the public and the policy  
346 makers understand what the dental need is, because if we didn't do  
347 these projects, quite frankly these people would be completely off  
348 the radar screen.  
349  
350 **Dr. John Chao:** Yes.  
351  
352 **Dr. Tankersley:** So, I'm very proud of what our profession is doing, both in terms  
353 of taking care of those people, and of trying to increase public  
354 awareness of the problem.  
355  
356 **Dr. John Chao:** Yeah, in terms of volunteer dentistry, I've seen some numbers that  
357 at the estimated amount of donated dentistry to the needy, amounts  
358 to a billion dollars or more. Is that correct?  
359  
360 **Dr. Tankersley:** I think that's absolutely correct. One of the great things about these  
361 programs is that it's a little easier to try to document the amount of  
362 dentistry that is being donated by the profession. Dentists have  
363 always given away an incredible amount of dental care, because  
364 dentists in the end are pretty compassionate.  
365

366 It's pretty hard not to take care of someone who is in pain or  
367 infected, and I've personally never turned a patient away, who had  
368 that kind of problem, and I think most of my colleagues will say  
369 the same thing.

370  
371 But as you were alluding to, one thing about these programs is that  
372 it's making us able to actually document the amount of care that  
373 we're giving away, which actually is also documentation of what  
374 the need is.

375  
376 **Dr. John Chao:** Yes, but the accessibility to dental care cannot just depend on  
377 voluntarism. It has to be some kind of a program.

378  
379 **Dr. Tankersley:** No, as a matter of fact in the American Dental Association, we  
380 have a statement that is, "Charity is not a healthcare system." So,  
381 we are under no delusion that charity alone will take care of the  
382 problem, but what the charity does do is it takes care of some  
383 people that are really in need. And as I said earlier, it also makes  
384 the magnitude of the problem apparent to the public.

385  
386 **Dr. John Chao:** Yes, that's true. Now, moving onto another aspect of dentistry, in  
387 the past few years, the public has been informed in different ways,  
388 especially on health talk shows, such as ours, how oral health is  
389 intricately intertwined with general health, cardiovascular,  
390 respiratory, gastrointestinal and pregnancy problems and even  
391 sleep apnea problems have been linked to infections or  
392 abnormalities in the oral cavity.

393  
394 Now, would you comment, Dr. Tankersley, on the present and  
395 future role the dentists might play in assisting the physician in the  
396 diagnosis and treatment of medical diseases?

397  
398 **Dr. Tankersley:** Yeah, John, you're right, that's actually a very exciting area in the  
399 dental profession right now. And as you indicated, there really is  
400 lots of press about this relationship between oral disease and  
401 systemic disease.

402  
403 And there is a growing body of knowledge suggesting possible  
404 associations between, let's say, gum disease or periodontal disease  
405 and some of the medical conditions. But it's really important for  
406 everyone to understand that at this time, the cause and effect  
407 relationship are not really scientific {improvement}.

408  
409 But nevertheless, there's really some interesting findings. For  
410 example, researchers have found that gum disease is associated

411 with health problems such as cardiovascular diseases that you  
412 mentioned, strokes, bacterial pneumonia.  
413  
414 **Dr. John Chao:** Yes, yes.  
415  
416 **Dr. Tankersley:** Some studies even suggest that pregnant women, who have  
417 inflamed gums, maybe at risk for delivering pre-term or low birth  
418 weight babies. So, it's very interesting material to look into, but as  
419 I said, the fact that there is an association between the systemic  
420 conditions and periodontal disease, does not necessarily mean that  
421 one condition causes the other.  
422  
423 **Dr. John Chao:** No, no.  
424  
425 **Dr. Tankersley:** But we do know that people with diabetes and people who smoke,  
426 have an increased risk for development of periodontal disease. And  
427 to kind of get into a little more to your point, since dentists see  
428 their patients on a regular basis, they are in a great position to  
429 monitor things like blood pressure, cholesterol levels and smoking  
430 cessation programs. And as I mentioned earlier, there is a potential  
431 for salivary diagnostics.  
432  
433 **Dr. John Chao:** Yes, yes, that's very exciting.  
434  
435 **Dr. Tankersley:** And one day, it may be routine for health assessments to occur  
436 with salivary diagnostics in dental office. And the reason that we  
437 can do that is there's a whole lot of proteins, nuclear gases,  
438 hormones, pharmaceuticals and bacteria in the saliva.  
439  
440 So, it just makes it an excellent candidate for screening for  
441 conditions like dental decay and periodontal disease, osteoporosis,  
442 infectious diseases, cancers and things like that.  
443  
444 **Dr. John Chao:** Yeah, I understand saliva is like blood.  
445  
446 **Dr. Tankersley:** Yeah, that's exactly right. It has much of the same proteins and so  
447 forth as blood does. So, we have discovered that it has some real  
448 diagnostic potential.  
449  
450 **Dr. John Chao:** Yeah, it's easier for me to spit than have somebody poke me with a  
451 needle.  
452  
453 **Dr. Tankersley:** As an oral surgeon, I am very aware of needle phobia. And I think  
454 I can attest to the fact that people would rather spit than have their  
455 blood drawn.  
456

457 **Dr. John Chao:** Yeah, that's true.  
458  
459 **Salvador Gaytan:** So, Dr. John, he likes to poke people with needles, but he doesn't  
460 like to get them.  
461  
462 **Dr. Tankersley:** Well, I think all of us dish it out a little better than we take it.  
463  
464 **Dr. John Chao:** I have soldiers, veterans, who tell me that they don't mind being  
465 shot at as much as they do getting shot.  
466  
467 **Dr. Tankersley:** Well, in my area, I'm in the military area, and I treat lots of  
468 marines, and believe me they are tough guys, but sometimes even  
469 the marines don't like being stuck with a needle.  
470  
471 **Dr. John Chao:** Yeah, and they say that, "Well, you know, doctor, getting shot at, I  
472 have a recourse, and we shoot back, but when you give me a shot, I  
473 can't turn around and give you a shot."  
474  
475 **Dr. Tankersley:** Well, I have actually found that some of the toughest guys like  
476 NFL football players and the marines that we just mentioned, are  
477 sometimes the most skittish of dental patients. My theory is that it's  
478 not that they're not tough. They just don't like being passive. It  
479 really bothers them to have to sit there and let a little guy like me  
480 do something like that to them.  
481  
482 **Dr. John Chao:** Yeah, there's no recourse, if somebody shoots at them...  
483  
484 **Dr. Tankersley:** That's right, they can't respond, that's right.  
485  
486 **Dr. John Chao:** Yeah, if somebody shoots at them, they shoot back at least, right?  
487  
488 **Dr. Tankersley:** Exactly.  
489  
490 **Dr. John Chao:** But they have to sit there and do nothing, there is no fight or flight.  
491  
492 **Dr. Tankersley:** That's right, but we try to lay their apprehensions, and they  
493 [crosstalk] wind up doing just fine.  
494  
495 **Dr. John Chao:** Yeah, we're making a joke out of it, but dentistry in these days is  
496 pretty much painless, and people can expect to have pleasant  
497 experiences when they come to dentists.  
498  
499 **Dr. Tankersley:** As a matter of fact, if you compare the 1950s to now, that's one of  
500 the big differences. In the 1950s, most patients actually only went  
501 to the dentist when they were in kind of acute distress, they had a  
502 problem, if they had a hole in their tooth or if they had something

503 broke off or they had pain. Today, most dentists have a  
504 relationship with their patient in such a way that the apprehensions  
505 are about the same as going to a hairdresser.  
506

507 **Dr. John Chao:** Yeah, and coming back to the ADA, again, this is to be attributed,  
508 at least in part to the efforts of the dentists who practice dentistry,  
509 and the ADA as an organization, in that it promotes oral health all  
510 these years.  
511

512 **Dr. Tankersley:** And actually, if you look at the history of anesthesia and pain  
513 control, the dental profession are the leaders in pain control. I  
514 mean quite frankly we gave medicine many of the modalities that  
515 they're currently using for pain control. It's just as you said, the  
516 dental profession recognizes that we need to make our procedures  
517 as comfortable and easy as possible.  
518

519 **Dr. John Chao:** Yeah. Isn't it true that the dentists were the first one to use general  
520 anesthesia?  
521

522 **Dr. Tankersley:** That's true. Like I say, we gave general anesthesia to medicine, and  
523 dentistry also was the leader in ambulatory anesthesia, which is  
524 anesthesia where you just go, and you're not admitted to the  
525 hospital and you go home. And the dental profession was doing  
526 that long before medicine, and they picked up lots of their  
527 techniques from us.  
528

529 **Dr. John Chao:** Yes, that's true. Now, moving onto another subject, it appears, Dr.  
530 Tankersley, that healthcare reform in some form or another will be  
531 passed in 2010. Can you tell us how this law can affect the delivery  
532 of dental care, if at all?  
533

534 **Dr. Tankersley:** Well, a few minutes ago when I was mentioning the fact that there  
535 are segments of the population that dental care is actually  
536 increasing instead of decreasing, that's a major problem. And  
537 tragically, the crisis in oral health in this country was not really  
538 addressed in a meaningful way by either the house or the senate.  
539

540 And in spite of spending almost a trillion dollars in healthcare  
541 spending, dental care for the underserved was by and large  
542 completely neglected. Just to give you an example, in spite of all  
543 this spending and all we've been hearing on the news, there are no  
544 provisions to enhance the infrastructure necessary to provide dental  
545 care to the underserved through the public health system.  
546

547 There are no really meaningful provisions to increase dental  
548 medicated reimbursements to make it easier for low income

549 children to receive dental care in private offices. And tragically,  
550 there are no provisions for dental care for low income adults and  
551 the poor elderly, who don't have the ability to actually go to the  
552 dentist.  
553  
554 **Dr. John Chao:** Yes. I don't think anybody is going to argue that children should  
555 not go to bed with a toothache night after night, no matter who  
556 they are.  
557  
558 **Dr. Tankersley:** No. Dental disease in children is five times as prevalent as asthma.  
559 They take care of the asthma, but they're not taking care of dental  
560 caries, which is five times more prevalent.  
561  
562 **Dr. John Chao:** Yeah. I don't care what spectrum of politics one comes from, in  
563 America I think that children should be prevented from having  
564 toothaches and suffering from infections.  
565  
566 **Dr. Tankersley:** Yeah, absolutely. The sad thing about it, and I know that you guys  
567 know this, none of it even has to exist. If we had proper outreach  
568 programs for prevention and oral literacy, dental caries and  
569 periodontal disease are absolutely preventable.  
570  
571 It's just a matter of the policy makers stepping up to the plate and  
572 providing the resources necessary for us to get out to those people  
573 and prevent the disease.  
574  
575 **Dr. John Chao:** Yeah. And I don't think it's a matter of the American public  
576 unwilling to come up with some funding for programs that would  
577 alleviate suffering on the part of children, don't you agree with  
578 that?  
579  
580 **Dr. Tankersley:** No. I think there's nothing malevolent about it. I think it's a lack of  
581 understanding, and I think people truly don't understand the  
582 magnitude of the problem. I think if they did, that they absolutely  
583 would support programs to prevent dental disease, so these kids  
584 would be able to sleep at night. They wouldn't be having a  
585 toothache when they're trying to stay in school and so forth.  
586  
587 **Dr. John Chao:** Yeah, I'd personally be in favor of some kind of a program where  
588 we bring this to the consciousness of the public.  
589  
590 **Dr. Tankersley:** Exactly.  
591  
592 **Dr. John Chao:** I remember when I was a child, I read about the little match girl  
593 who was hungry and so on, and her story then changed the scene in

594 England where people began to pay attention to how the children  
595 were suffering and being taken advantage of.

596  
597 **Dr. Tankersley:** Well, that's precisely what we're trying to do in the American  
598 Dental Association. We've got a great story to tell.

599  
600 **Dr. John Chao:** Yes we do.

601  
602 **Dr. Tankersley:** We are the ones who have the knowledge of what's occurring in  
603 this country in terms of oral health, and quite frankly our job is to  
604 try to get that story out to the public so they will understand.

605  
606 **Dr. John Chao:** Well, thank you very much, Dr. Tankersley for taking the time. I  
607 think we made a very good start with this message that we gave  
608 out today.

609  
610 **Dr. Tankersley:** Well, thank you John, I appreciate the opportunity.

611  
612 **Salvador Gaytan:** Thank you, Dr. Tankersley. And next week, we'll have more with  
613 Dr. Tankersley of the American Dental Association, with some  
614 fascinating information. You're listening to SmileTalk with Dr.  
615 John Chao, spelled C-H-A-O of Alhambra Dental. You can go to  
616 [AlhambraDental.com](http://AlhambraDental.com) or 626-308-9104.

617  
618 **Dr. John Chao:** Goodbye everybody.

619  
620 [END OF AUDIO]