



# FAMILY MEDICAL 2010

## February is Children's Dental Health Month

Dental care begins soon after birth. After each feeding, gently wipe the baby's gums with a soft, damp cloth. Teething is the next step. To help soothe the baby, a cool teething ring can be a big help. When the teeth first appear, they should be cleaned daily with a children's soft toothbrush. This prepares the child for their first dental visit. It's OK if the baby wants to chew the toothbrush to soothe the teething soreness. Some actually prefer it over the teething ring. Be sure to check the toothbrush for breakdown, and if so, replace it. One common problem is "baby bottle tooth decay." This occurs when the baby is given a bottle with milk, formula, juices, soda or a pacifier dipped in honey, juice or soda. Only a bottle with water should be given to the baby to fall asleep.

The eruption of baby teeth occurs between 6 months and 3 years of age. At 5, the first adult tooth, a molar, erupts. Up to the age of about 5 or 6, an adult should still brush the child's teeth. As the child's independence develops, try to "check the good brushing job" by going over it all once again. It is easiest if you stand behind the child and brush their teeth as if they were your own. It is important to maintain the baby teeth because they guide the per-

manent teeth into their proper position.

A child's first visit should be no later than 3 years of age and should be a happy experience. Merely tell the child the dentist is only going to count the teeth with a tooth counter (explorer and mirror), polish their teeth with a tooth tickler, and place a special flavored sauce on their teeth to make them really strong (fluoride). Do not say the "H" word "hurt," as in, "It won't hurt." Try to put the visit in a very positive perspective. Then maintain dental health with maintenance visits.

One way to prevent cavities in the future is to have sealants placed on the chewing surfaces of the back teeth. Sealants are a hard composite flowed and bonded into the grooves of the teeth. This blocks bacteria from getting into the grooves and starting decay. Most sealants last about two years and then may need to be reapplied.

To celebrate National Children's Dental Health Month, Dr. Graskemper is providing a "Kids Helping Kids Special"—an exam, X-rays, cleaning and fluoride treatment for ages 3-14 for \$100 (regularly \$198) and \$1 goes to Patchogue Kiwanis Children's Fund. Call Dr. Joseph P. Graskemper, The Bellport Village Dentist, for an appointment today at 286-4243. ■

## What are skin tags?

Rub your hand across your neck or chest. If you feel small balls protruding from the skin surface, you probably have skin tags.

Acrochordons, also known as skin tags, are a benign condition of the skin. They appear as flesh-colored pieces of tissue or small bits of skin protruding from the rest of the skin by a thin stalk. About half of the population will develop skin tags at one point in their lives.

Although they may appear troublesome and are actually a type of tumor, skin tags are relatively innocuous and quite common. They have not been found to become cancerous if left untreated.

Skin tags can be as small as a pinpoint or as large as a grape, and form just about anywhere on the body. But they are typically found where there is excessive friction of the skin, whether from rubbing up against other skin or contact from clothing. Therefore the neck, upper chest, underarms, groin folds, and under the breasts are common areas to find skin tags.

Acrochordons do not cause any physical problems. They may become itchy or irritated if friction is prolonged. If a tag is caught on clothing or snagged another way, there can be a small amount of pain and slight bleeding. The most common reason for skin tag removal is not due to a physical ailment, but for cosmetic reasons.

Removal of skin tags can take place in a number of ways. Dermatologists and primary care physicians are qualified to remove them. Keep in mind that skin tag removal is often considered a cosmetic procedure and may not be covered by all insurance plans. Removal may consist of cutting off (excision) or freezing the tag (cryosurgery). Depending upon the size, a mild topical anesthetic may be used.

Many skin tag sufferers tend to take



**Though they might appear troublesome, skin tags are relatively common and, in most cases, completely harmless.**

removal into their own hands. Stopping blood flow to the tag base (ligation) will cause the tag to fall off on its own. So a small piece of thread tied around the tag can achieve this. Some people just pull them off and face the mild bleeding.

There is no evidence that removing skin tags will enable a greater number to grow in their place. However, skin tags seem to proliferate as a person ages, in obese people, and in people with type 2 diabetes mellitus. Pregnant women may also be more apt to get skin tags thanks to hormonal changes in the body.

For more information on skin conditions, contact doctors Peter A. Klein and Adam J. Korzenko at 928-7922. ■

## Where to go for care after a stroke

A stroke is when brain cells die due to a blood clot in the brain that blocks an artery or when a blood vessel in the brain breaks. As per the National Stroke Association, two-thirds of people who have a stroke will suffer some type of disability. They may lose the ability to speak, movement or memory, or experience weakness in an arm or leg. After a person who experiences a stroke is treated in a hospital to stabilize their medical condition they may need to attend inpatient rehabilitation to regain lost functions.

"The time frame for recovery and the type of rehabilitation provided to stroke patients depends on the severity of the stroke, how motivated the patient is, and how they feel physically," noted Karim Nensey, director of rehab at Medford Multicare Center for Living. "At Medford, we look at a person as a whole and take into consideration their emotional and physical state. We balance their treatment so they can achieve as much recovery as possible." Rehab for stroke patients may include retraining in feeding, dressing, walking, transferring from a chair or a bed, movement (mobility), speaking, recognition, attention span and time management, among other things.

"One goal at Medford when treating stroke patients is to provide the patient and family information about the physical and emotional effects suffered with the stroke and the ability of the patient to function in the community," said David Fielding, administrator at Medford. Mr. Fielding noted that loss of independence and ability to do things on their own is hard for people who had a stroke to deal with. "Family involvement is a key to our success. Our interdisciplinary team includes nurses, dietitians, social workers, recreation specialists, as well as our therapists, who work together closely with each patient and family to maximize the patient's independence to return home as quickly as possible." Mr. Fielding added that, if the patient's medical condition or care needs do not allow them to go home, Medford Multicare Center for Living also offers long-term care services.



**Medford Multicare Center for Living resident Lilavati Parekh works with a physical therapist.**

Medford Multicare Center, a skilled rehab and nursing facility, offers patients admitted for stroke recovery nursing and medical care 24 hours a day and therapy five to six days a week. Their inpatient rehabilitation department includes physical therapy, occupational therapy and speech therapy. The therapists and interdisciplinary team set goals with the hopes to help them return to the community. "We monitor and review goals weekly to maximize independence," noted Karim.

Medford Multicare Center for Living provides short-term restorative rehab, skilled nursing, long term geriatric services, respiratory care services tracheostomy care, oxygen therapy, IV therapy, wound care and has a dedicated and secure Alzheimer's/dementia unit. For further information, or to tour the facility, please call 631-730-3000 or visit [www.medfordmulticare.org](http://www.medfordmulticare.org). Medford Multicare Center for Living is conveniently located at 3115 Horseblock Road in Medford, right off LIE exit 64. ■

**Ask Dr. Sigismondi Q.** What's better? White fillings or silver?



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**A.** Today, the strongest, longest lasting and most natural fillings are porcelain fillings such as those made with a CAD CAM technique like the CEREC machine does. A tooth restored with a porcelain filling appears as if it had never had a cavity or a pre-existing filling in it. The CEREC technique makes fillings that have a fit that is greater than any other material except gold. Unlike silver fillings which tarnish and distort through use over time, porcelain fillings are much more stable through the same period of time.

What does this mean to the patient? The teeth restored with CEREC fillings are easier to clean and maintain and more resistant to future decay because of this. The fact that porcelain won't distort over time makes them a better choice as well. Silver amalgam is a metal which through chewing eventually deforms, slumps and dents. This will ultimately leave a space between the tooth and the filling which bacteria invade and cause sensitivity, decay and failure of the restoration.

For the most natural, longest lasting fillings ask for CEREC porcelain fillings.