OPINION

Dental sleep and nanodentistry

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ABSTRACT

Dental sleep medicine is concerned with the physiological and craniofacial aspects of sleep apnea. Dental authorities are concerned about snoring, bruxism, Upper Airway Resistance Syndrome (UARS), and OSA, which are weighed at the chairside

to swiftly detect risk factors for these specific disorders. The essentials of dental sleep medicine course are a logical way to incorporate OAT into your practice. The course includes a review of sleep related breathing disorders, such as snoring and OSA, and the impact of sleep disorders on society.

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ental sleep is the study of sleep-related respiratory abnormalities such as snoring and OSA, as well as the social consequences of these illne-es. A thorough examination, including an upper airway examination and imaging, is provided, with a focus on areas of pathophysiology in OSA. A reasonable method to include OAT into your practice is to take the Essentials of Dental Sleep Medicine course. A review of sleep-related respiratory disorders, such as snoring and OSA, as well as the impact of sleep disorders on society, are included in the course. A case-based section of the treatment concludes with practical examples of how to evaluate and treat sleep disturbances in a dentistry practise.

Craniofacial surgery is a surgical subspecialty of plastic surgery, oral and maxillofacial surgery, and otolaryngology-head and neck surgery that deals with malformations of the head, skull, face, neck, jaws, and associated tissues, both congenital and acquired. Although bone manipulation is common in craniofacial treatment, craniofacial surgery is not tissue-specific, meaning that craniofacial surgeons deal with bone, skin, nerve, muscle, teeth, and so on. Craniosynostosis (both solitary and syndromic), rarecraniofacial clefts, and acute and chronic sequellae of facial fractures are all common defects treated by craniofacial surgeons.

The study, diagnosis, and integrated management of illnesses of the oral cavity, teeth, and supporting structures is known as restorative dentistry. It entails restoring the teeth and oral cavity to meet the functional, psychological, and cosmetic needs of the individual patient, as well as coordinating multi-professional efforts to attain these goals. Endodontics, Periodontics, and Prosthodontics (fixed and removable) are the dental specialities that make up restorative dentistry, and its foundation is built on the interplay of these professions in patients needing complicated, multi-faceted care. Due to the increasing complexity of dental health problems as people live longer, Restorative Dentistry is often aptly referred to as 'Oral rehabilitation. This is due to the increasing need for multidisciplinary and integrated care within and outside the speciality, which includes Orthodontics, Oral and Maxillofacial Surgery, Paediatric Dentistry, and Dental and Maxillofacial Radiology.

Restorative Dentistry focuses on collaborating with other dental, medical, and surgical professionals, as well as other clinical colleagues, to give and support integrated management and oral rehabilitation of patients undergoing complex treatment.

NANODENTISTRY

Nanodentistry the name and maybe the field of nanodentistry was coined in the year 2000. Dentistry began to evolve in the field of nanotechnology as nanomedicine progressed. Nanotechnology is expected to have an impact on diagnosis, materials, restorative dentistry, and surgery. Nanorobotics, nanodiagnosis, nanomaterials, nanosurgery, and nanodrugs, to mention a few fascinating emerging areas, will have a significant impact on clinical dentistry in the nottoo-distant future. For the restoration of decaying, carious, missing, and cracked teeth, a variety of nanomaterials can be employed. Nanocomposites, nanoimpression, and nanoceramics have all been introduced into clinical dentistry as a result of recent breakthroughs in nanomaterials. Artificial teeth made of nanocomposite are also a novel discovery in this industry. Nanoinorganic fillers are dispersed throughout the composite matrix. These are more durable and abrasion resistant, as well as having a better colour. Dental Robotics Nanorobots, which are regarded the most helpful gift of nanotechnology to medical sciences, are made by a modern technology called nanorobotics and have a size of a few nanometers. These micron-sized devices allow for precise interaction and manipulation of nanoscale objects with high power resolution. Nanorobots have been used in different facets of dentistry since the introduction of nanotechnology, such as continuous dental health care employing mechanical dentifrobots. Dental Nanorobots might be built to remove caries-causing germs or heal tooth defects, according to the researchers. Despite the fact that Nanorobot research and clinical trials are still in their early stages, researchers are enthusiastic about the usage of these microrobots in dentistry. Orthodontics is a specialty of dentistry that focuses on repositioning teeth and jaws that are out of place. Crooked teeth and teeth that do not fit together properly are more difficult to

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clean, are more likely to be lost early due to tooth decay and periodontal disease, and put additional strain on the chewing muscles, which can cause migraines, TMJ syndrome, and neck, shoulder, and back pain. Crooked or misaligned teeth can also detract from a person's overall appearance. Orthodontic therapy has several advantages, including a healthier mouth, a more attractive appearance, and teeth that are more likely to endure a lifetime. Oral implantology is the study of surgical components that connect with the jaw or skull one to support a dental prosthesis such as a crown, b bridge, denture, facial prosthesis, or act as an orthodontic anchor. The physiological process of osseointegration, in which materials such as titanium develop an intimate contact with bone, is the foundation for modern dental implants.

The implant fixture is inserted first to ensure that it will osseointegrate, and then a dental prosthetic is attached. Before a dental prosthetic (a tooth, bridge, or denture) is linked to the implant or an abutment that will hold a dental prosthetic is implanted, osseointegration takes a certain length of time. The health of the person receiving the implant, medicines that impact Osseo integration, and the health of the tissues in the mouth all play a role in its success or failure. The implant and fixture will be subjected to a certain level of stress during normal function.