

## **Fear of the unknown drill: Dentists find new ways to help phobic patients**

*Ann Tatko-Peterson*  
**Contra Costa Times**  
**2005**

BROKEN TEETH filled her mouth. Infections plagued her each month. Then, doctors diagnosed Pamela Lerch, of Oakley, with diabetes.

“I reached a point where there was nothing I could eat,” Lerch, 55, said. “It had to be soft, which is bad for diabetics. I had to do something.

That was not an easy realization for Lerch, who suffers from panic disorder. At one point, she had not left her house in eight years.

An offshoot of her disorder, dental phobia was rooted in bad dental experiences as a child. She hadn’t seen a dentist for 20 years.

“I knew somewhere in the future I was going to end up in a hospital,” Lerch said. “My teeth were so bad, and my fear so great, that sleep dentistry was the only way to manage it.”

For the past decade, dentists have tried to coax anxious patients back into the chair with more compassionate chairside manners and multimedia diversions, such as music piped through headphones and DVDs shown through virtual reality video glasses.

But for truly phobic patients, what really works is the painless approach to dental care available through “sleep” dentistry.

Traditionally, dentists have offered sedation through nitrous oxide, also known as laughing gas.

Sleep sedation acts on a deeper level, often achieved through sedatives or analgesics, such as Valium, that are administered by pill or intravenously.

“Sleep sedation is actually a misnomer,” said Dr. Daniel Leung, a Pleasant Hill dentist whose office provides sedation options. “The patient is still conscious, just deeply relaxed.”

Dr. Scott Pope of Pope Dental in Walnut Creek works with trained anesthesiologists from Bay Area Anesthesia, who administer intravenous sedation in his office.

“With the sedation level I do, I can tap patients on the shoulder and stimulate them enough to ask how they’re doing,” Pope said. “Then, they go back to sleep. They don’t remember what happened with the procedure when it’s over. They feel like they have taken a 15-minute rest.”

The Blende Dental Group takes sedation to the highest level. Blende is one of the Bay Area’s only dentists who offers general anesthesia in a hospital setting.

His office specializes in treating phobic patients, as well as the disabled. About 40 million Americans cite fear or anxiety as the reason for not visiting a dentist regularly,

according to the Dental Phobia Treatment Center of New York. Most intensely phobic patients haven't seen a dentist in 10 years or more. As a result, they often would need multiple appointments and lengthy procedures if they had work done in a general dentist office.

"These people are afraid to make the phone call," said practice manager Amanda White, a registered nurse, with the Blende Dental Group. "They can't deal with that overwhelming amount of work. They need to have it all done in one day."

Dental phobias can stem from a fear of pain, injections, anesthetic side effects, loss of control or even embarrassment. Most often, it relates back to a frightful childhood experience.

Such was the case for Lerch, who as a child had gone to a cousin for dental work. With a sensitive gag reflex, she panicked every time she had impressions made of her teeth.

"I remember every other word being, 'Whoops, sorry,'" she recalled.

An Internet search led her to the Blende Dental Group. She joined its mailing list. Finally, in June 2005, she worked up the nerve to make an appointment. A month later, she had surgery.

Her extensive work required general anesthesia at Kaiser's San Rafael Medial Center. The nine-hour surgery ended with a deep cleaning, 12 extractions, seven crowns and eight fillings. Later, she also had five implants.

"It was a terrifying thing, but I'm so glad to have gone through it," she said. "I'm smiling more now. The first taste of salad and meat, I thought I would never have that in my life again. The first time I had them, I cried."

Sedation dentistry has become like a magic pill for phobics. But most dentists agree, the real trick to stamping out dental phobias is permanently changing the negative perception surrounding dentists.

"In the past, it was like you were thrown in the chair, jabbed with a needle, drilled and shuffled out," Leung said. "I graduated from dental school four years ago. Now, the big emphasis is on patient care and comfort."

That starts with the youngest patients.

Videogames, coloring books and designated play areas in waiting rooms offer an inviting atmosphere for children. Dentists, such as Leung, use a topical and small needles to eliminate pain with shots.

"Once they've been here a couple of times, they see we aren't the bad guys," Leung said. "And we give them prizes at the end. That's become common practice for most dentists these days."

It might have made all the difference for Tony Morrow.

Until last year, Morrow, 53, of Antioch, hadn't visited a dentist in 10 years. As a child, he had work done by dental school students.

"Once they drilled down right on my nerve," he said. "After that, I didn't want anything to do with a dentist."

He discovered Blende when seeking care for his 28-year-old autistic son. Then, Morrow, an Army reservist, was called up for duty. He knew the Army would insist he have dental work before deployment.

"I didn't feel comfortable with dentists, period," he said. "I definitely didn't want any Army dentist doing work in my mouth."

The availability of general anesthesia persuaded Morrow to have complex dental surgery in March 2005. He had 12 extractions, 17 crowns/bridges and four quadrants of scaling and root planing.

"It would have been too much without the general anesthesia," Morrow said. "There was nothing traumatic about this. I went to sleep and when I woke up, it was done. I never felt a thing."