



Aesthetic & Restorative Dentistry – Health, Comfort & Beauty

Dr. Sorin's practice offers a comprehensive approach to aesthetic and restorative dentistry, one that fully integrates health, comfort, and beauty. He believes patients can have it all: a beautiful smile, healthy gums and teeth, and the ability to chew comfortably. What good is a nice smile if the underlying structure–teeth, gums, bones—makes everyday life uncomfortable or in some instances, painful?

With a strong emphasis on education, Dr. Sorin openly communicates with patients about the value of good dental health. His goal is to provide outstanding, highly personalized care and service in an atmosphere of competence, compassion, and trust. Dr. Sorin takes pride in offering a comprehensive, integrated approach to dental care that changes people's lives and makes them feel better about themselves.

Health

Many of our patients express an interest in achieving and maintaining healthy teeth and gums for a lifetime. This is an admirable goal, and one that we strongly support.

In our practice, we perform a full evaluation of a patient's oral health beginning with an assessment of tooth decay and gum condition, followed by an examination of the soft tissue structures inside the mouth, including an oral cancer screening.

Consistent with the latest science, we are aware of how conditions like periodontal disease and a compromised airway can impact our patient's general health. We test for

bacterial pathogens where indicated and conduct a comprehensive airway screening, cognizant of the affect dental health may have on your overall health.

At times, in order to achieve the desired goals, we suggest a comprehensive multidisciplinary care plan.

Comfort

Patients visit our practice for a variety of issues. Some patients seek our care because of an imbalanced bite, others because of muscle pain or TMJ issues

Our practice offers an integrated approach to restorative dental care that begins with a comprehensive medical and dental history review. We evaluate the muscles, ligaments, and joints that control the opening and the closing of your mouth to determine how the oral structures work together.

During the examination we pay close attention to what the body is telling us. Are the patient's jaw muscles sore? Are they experiencing pain in the neck, are jaw muscles tender to the touch? Does the TMJ (Temporomandibular Joint) make noise when it opens or closes? Have they recently broken a tooth, or are any teeth loose or excessively worn?

These are all signs and symptoms of a functional imbalance; evidence that the parts of the oral system are not working together in a healthy and harmonious fashion.

Beauty

Frequently, cosmetic dental patients visiting us for the first time express an interest in changing their smile. Some individuals want a smile that is whiter or brighter. Others desire to make changes in the size, shape or alignment of their teeth. Using multiple diagnostic tools including x-rays, photographs, and diagnostic models, we can create the smile our patient used to have or create the smile they have always wanted! Many come to realize that a healthy, attractive, beautiful smile is an important asset in their personal and professional lives.

For over 30 years, Dr. Sorin has enhanced patients' smiles in a way that is natural and compatible with their self-image. Our approach to dental aesthetics differs significantly from other practitioners that provide cosmetic dentistry in NYC. Our practice is focused on the entirety of your mouth, we believe that your teeth and gums, and your chewing system should be as healthy as your smile. We strive to provide you with the best dental care; reducing the risk of failure and maximizing the long-term durability of your smile.

Get the Smile of Your Dreams

Robert Sorin, DMD PC is a patient-centered, relationship-based dental practice dedicated to delivering optimum health, comfort, and beauty. We welcome patients to our midtown Manhattan cosmetic/restorative dental office from 8:30 am to 5:30 PM Monday and Wednesday, and from 7:30 AM to 5:30 PM on Tuesday and Thursday.

Make an Appointment

425 Madison Ave. #405 (49th St) New York, NY 10017 • 1-212-355-3533











An Honest Second Opinion

On a recent trip to the dentist, your practitioner shares information about the health of your mouth and teeth. During your visit, they recommend treatment options. You're not entirely sure you understood what was said, or why the treatment is necessary. That's when doubt about competence and trust sneaks into your mind. You're unsure about what to do next.

"You're never wrong in seeking a second opinion."

— Richard Price, DMD, ADA spokesperson

Every dentist is unique in their approach to treating dental health problems. If for any reason you're questioning a treatment or procedure, I would recommend getting a fresh, honest, unbiased second opinion.

What You Need to Know Before Seeking a Second Opinion

When seeking a second opinion, consider consulting a dentist with expertise in the recommended treatment area. You'll want to select a dentist that openly communicates and is capable of clearly explaining the diagnosis and the risks and benefits of available treatment options. With access to this additional information, you will be able to make an informed decision about the treatment that works best for you.

First, you need to find another dentist to assess your problem:

Ask friends or family for a recommendation. If you don't feel comfortable talking
with your current dentist about your concerns, ask friends, family or coworkers for a
recommendation. Be sure to ask them what they like (or don't like) about their
dentist.

- Consult the local dental society. The <u>NYS Dental Society</u> offers a directory of dentists in the local area, many of whom are available to provide a consultation.
- **Reach out to a local dental school**. Consult the <u>dental college directory</u> in your city or state to see if they can suggest a practitioner.
- **Ask someone within your health network.** For instance, you can ask another dental or medical specialist you may already be seeing for a referral.
- **Consult your health insurance provider.** When all else fails, reference your health insurance website for in-network options.

Once you find a dentist for your consult, the next step is making a list of questions to ask during the consultation. Here are some examples:

- Do you agree with the diagnosis my dentist has made?
- What other treatment options are available?
- How much will each option cost?
- How will each treatment option improve my dental health?
- What are the risks and benefits of treatment?
- What is the timeline for the treatment?
- What is the potential outcome if treatment is done?
- What, if any, self-maintenance is required?
- What should I expect in the future?

Weighing Your Dental Treatment Options

As you consider your options, keep in mind the experience of all prospective practitioners. Although your current dentist has the advantage of familiarity with your dental health history, a new dentist may have access to new technologies and advanced approaches to dental medicine. The most important thing is to avoid making any major decisions about your dental health until all your concerns have been addressed and you feel comfortable with the care and information received.

We Can Provide an Honest Second Opinion

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Sleep-Related Breathing Disorders

Integrative Dental Medicine and the American Dental Association

In October 2017, the American Dental Association (ADA) released a policy statement addressing dentistry's role in sleep-related breathing disorders. The policy encourages dental professionals to screen their patients for Obstructive Sleep Apnea (OSA), Upper Airway Resistance Syndrome (UARS), and other breathing disorders. The ADA advocates working in collaboration with trained medical colleagues to address these issues. With the endorsement of the ADA, screening and treating sleep-related breathing disorders has become the newest focus of integrative dental medicine.

"Other than emergency care, the first procedure performed by every dentist, for every patient, of any age should be a proper airway examination and evaluation of breathing function."

— Dr. Tom Colquitt, President Emeritus, American Academy of Restorative Dentistry

Sleep Apnea

Sleep apnea, otherwise known as central sleep apnea, refers to a disorder where a patient's breathing repeatedly stops and starts throughout the sleep cycle. If you experience lethargy after a full night's sleep there's a possibility you may have sleep apnea or other airway related disturbances.

There are several related breathing disorders that fall within the disturbed breathing category including:

The signs and symptoms for OSA and UARS include:

- Observed episodes of stopped or abnormal breathing patterns during sleep
- Abrupt awakenings accompanied by shortness of breath
- Shortness of breath that's relieved by sitting up
- Difficulty staying asleep (insomnia)
- Excessive daytime sleepiness (hypersomnia)
- Chest pains at night
- Difficulty concentrating
- Mood changes
- Morning headaches
- Snoring
- Lower tolerance for exercise

For an in-depth medical description of sleep-related breathing disorders, Glossary of Medical Terms.

Have you been experiencing Sleep-Related Breathing Disorder Symptoms? Call us for an appointment to evaluate your concerns.

Glossary of Medical Terms Central Sleep Apnea (CSA)

Central Sleep Apnea (CSA) is a *central nervous system* disorder in which the respiratory center in the brain fails to transmit a signal to the body to inhale. CSA frequently occurs among people who are seriously ill from other causes: chronic heart failure, diseases of and injuries to the breathing control centers in the brainstem, Parkinson's disease, stroke, kidney failure, and even severe arthritis with degenerative changes to the cervical spine and base of the skull. It is also seen among users of opiates. Idiopathic CSA is a description used when the cause is unknown. *Mixed Apnea* describes the simultaneous occurrence of both OSA and CSA.

Snoring

Snoring is a sign of airway blockage as the tissues of the soft palate vibrate against the posterior wall of the *pharynx* (located behind the mouth and nasal cavity, and above the esophagus and larynx). This can be accompanied by the tongue dropping back as well. Approximately one in three snorers also suffer from obstructive sleep apnea.

Obstructive Sleep Apnea (OSA)

Obstructive Sleep Apnea (OSA) is a very serious breathing disorder that has significant

systemic effects due to the mechanical collapse of the posterior throat airway. An *apneic breathing* (absence of breath) event occurs when breathing ceases for 10 seconds or longer accompanied by drops in oxygen saturation in the bloodstream. During sleep, multiple events in intervals of several minutes or longer can mimic the experience of choking and stimulate activation of the *sympathetic nervous system* (Fight or Flight response). Stress hormones, including cortisol, are released into the bloodstream, producing an acute excitation of the heart rate. The increase in blood flow attempts to deliver needed oxygen throughout the body. Chronic elevated cortisol levels in the blood can produce several damaging effects including increased blood pressure, cardiac arrhythmia, insulin resistance, and *energy imbalance* (leptin/ghrelin). For instance, an increased hunger drive can be stimulated by imbalances between leptin and ghrelin.

Upper Airway Resistance Syndrome (UARS)

Upper airway resistance syndrome is a common sleep disorder where a narrowing of the airway results in disruption to sleep. The most common symptoms include excessive fatigue and chronic insomnia.

Deviated Septum

A deviated septum, a condition in which the bone and cartilage of the nasal cavity are off-center, making it difficult to breathe. A deviated septum can be present from birth, a direct result of Maxillary hypoplasia or can occur as a result of a nose injury. It can contribute to difficulty breathing through the nose, and its most noticeable symptoms include nasal congestion, recurrent sinus infections, nosebleeds, difficulty sleeping, snoring, sleep apnea, headaches and post-nasal drip.

Mouth Breathing Syndrome

Mouth Breathing Syndrome is considered a breathing dysfunction that bypasses the critical physiologic benefits of nasal breathing. In this case, the air is humidified through the nose with a sterilized/anti-microbial effect of nitric oxide produced in the paranasal sinuses, where the breathing rate is controlled to help maintain an optimum carbon dioxide-oxygen ratio in the bloodstream (Bohr Effect). Mouth breathing eliminates the possibility of ideal physiologic breathing, allowing "dirty air" containing microbes, pollutants, pesticides, smog, allergens, pollen, and spores, to pass through the mouth straight to the lymphoid tissues of the adenoids and tonsils. This can result in both inflammation and infection in the posterior throat.

Are You Experiencing Symptoms of a Sleep-Related Breathing Disorder?

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