

Museum of Childhood

By Anna Redman

Peter Pan is renowned for being the boy who never grew up. Unfortunately, no one else has Peter’s luxury, and all too quickly our childhoods are gone and we are overcome by adult responsibilities. But Edinburgh has a secret, a hidden gem that allows everyone, for just one day, to step back in time and join Peter Pan in the miracle of an everlasting childhood.

The museum is located at 42 High Street on the Royal Mile, and is open

from 10-5 Monday to Saturday and 12-5 on Sunday. The museum was the first of its kind and founded by former Edinburgh Town Councilor, Patrick Murray in 1955. Edinburgh’s Town Council still funds the museum, allowing admission to be offered free of charge.

It is the Museum of Childhood that offers the opportunity to once again play with childish things. The 5-floor museum features an array of games, toys, clothes, crockery, dolls and teddy bears. The collection spans from the 18th to the 21st century and

includes items from a variety of countries. All visitors will undoubtedly relate to, remember or recognize something from their own childhood.

The delight of recognition sparks a positive and joyous attitude amongst visitors as they move from display case to display case admiring the toys and games they remember so well from their pasts. It is as though the spirit of childish play and imagination has been captured in the toys and is sprinkled on the visitors like pixie dust.

The museum also offers a hand-

ful of toys, games and clothes for children to play with, offering a more interactive alternative for those visitors whose childhoods are not yet in their past. Whether you are young, or simply young at heart, the museum of childhood is certainly worth a visit. In the words of British Playwright, Tim Stoppard, “If you carry your childhood with you, you never become older.” The Museum of Childhood is the perfect way to enjoy a day, refresh your memories, and retain your youth.

By Dr. Nasrin Saba DDS

Cracked Tooth Syndrome is a common tooth problem that is often quite difficult to diagnose.

There are three different types:

Craze lines are very fine cracks in the outer layer of the tooth, i.e. the enamel. In general, vertical craze lines are nothing to worry about. Although teeth are slightly weaker in these areas, unless you experience some form of trauma or repeated movements such as teeth clenching, grinding, or excessive nail biting, there should be little concern. Craze lines are often caused by the rapid and alternate exposure to hot and cold extremes such as ice cream or very icy smoothie, followed by a sip of hot chocolate, coffee or tea.

A crack is an incomplete fracture of a vital posterior tooth that involves the dentin - the second layer of the tooth between the outer enamel and inner pulp - and occasionally extends into the pulp.

Fractured or broken tooth is a true fracture to the root or crown of the tooth.

The difference between a broken and a cracked tooth is actually rather small. While damage to a broken tooth is obvious, cracked teeth have cracks that may or may not be visible and are rarely seen on an x-ray. If a crack is visible, it is usually seen as a vertical hairline. Many of these fractures are below the gum line, making them particularly difficult to find.

Studies have shown that fractured teeth are the third leading cause of tooth loss, and that the recent increase in tooth fractures is related to several factors, particularly longer life spans. The older the teeth, the more brittle they are, and the more likely to crack. Higher stress levels may also lead to increased teeth clenching or grinding, which in turn makes them more prone to cracks and fractures.

Cracked Tooth Syndrome is present mainly in patients between 30 years and 50 years of age. Men and women are equally affected. Mandibular second molars, followed by mandibular first molars and maxillary premolars, are the most commonly affected teeth.

- What causes the tooth to become cracked?
- Bad habits, such as chewing on ice, pens, pencils, rib bone, etc.
- Chronic tooth grinding or clenching
- Weakening of the teeth due to overly large fillings
- Brittleness of the teeth following root canal treatment
- Trauma to the mouth
- Misaligned teeth that receive excessive stress during chewing.

Signs and Symptoms:

Cracked Tooth Syndrome is best described as a sharp pain while biting down. The pain usually disappears quickly when chewing stops.

The pain occurs because the crack is opened while biting, and the soft pulp tissue that contains the tooth’s nerve endings is irritated. The tooth may also have sweet and temperature sensitivity; this happens when the crack is wide enough to allow sweets and temperature to reach the pulp. Chewing, teeth grinding and extreme temperatures are just a few of reasons cracks will expand and contract. Left untreated, a cracked tooth will eventually damage the pulp to the point that root canal treatment will be necessary to save the tooth.

Diagnosis:

You may think that diagnosing Cracked Tooth Syndrome would be relatively easy for a dentist. In fact, it can be surprisingly challenging. Successful diagnosis of Cracked Tooth Syndrome requires awareness of its existence and of the appropriate diagnostic tests. The patient dental history can give certain clues. Pain on biting that stops after the pressure has been withdrawn is a classic sign. The patient may, however, have difficulty in identifying the affected tooth.

As mentioned before, it is hard to see a crack line on the x-ray. Dentists use a combination of other methods and advanced technology to locate a cracked tooth. If a thorough visual examination of mouth and teeth does not reveal the crack, a dentist will use a special instrument called an explorer to feel for cracks. If these procedures fail to locate a cracked tooth, the

dentist will perform a bite test. The patient is instructed to bite on various items such as a toothpick, cotton roll, wooden stick, or the commercially available Tooth Sleuth. This requires the patient to bite down on an instrument that fits over one part of a tooth at a time. The test is continued tooth-by-tooth and cusp-by-cusp until the patient feels pain and the cracked tooth is identified.

Dentists will likely introduce more high-tech search methods if a crack remains elusive after a bite test. These can include shining a fiber-optic light on the tooth or staining it with a special crack-revealing dye.

Treatment of a cracked tooth:

The treatment of a cracked tooth depends on the location, direction, size or extent of the crack. The earlier a crack is detected, and the more superficial, the simpler will be the treatment.

Minor cracks are often repaired by a filling or a crown. Typically the placement of a crown will keep the crack from opening and will alleviate the pain.

Any crack deep enough to damage a tooth’s nerve will need a root canal treatment and placing a crown to protect the tooth. In worst-case scenarios, a cracked tooth cannot be repaired. This typically occurs when the crack extends into the root of the tooth under the bone. In these instances, it is best to have the tooth extracted and replaced with a dental implant or a dental bridge.

Prevention:

Awareness of the existence and etiology of a cracked tooth is an essential component of its prevention. Dentists usually give the following advice to their patients:

Avoid extreme temperature changes in your mouth.

Be aware if you grind or clench your teeth. If you do, you will need to wear occlusal guard or night guard to protect your teeth.

Do not bite on anything hard such as a pen, pencil, rib bone etc.

Protect your big fillings or root canal treated teeth with a crown.

Remember, you cannot fix Cracked Tooth Syndrome without professional help. Only dentists have the tools and technology to repair cracked teeth.

The most important thing to remember is that most dental expenses are caused by putting off dental visits. Visit your dental professional regularly to catch problems early on and keep expense down.

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