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Testimony of Dr. Mark Peppard House Public Health March 6, 2013

Good morning Madam Chair Kolkhorst and members of the committee. I am Dr. Mark Peppard, a general dentist from Austin. I am here today representing the Texas Dental Association (TDA) and appreciate the opportunity to speak with you on behalf of the TDA in support of HB 502 amending the statutory definition of dentistry to include "tooth whitening."

The TDA thanks Representative Hernandez Luna for filing this important legislation and appreciates Madam Chair Kolkhorst and the members of the Public Health committee for considering it.

As the *Voice of Dentistry in Texas*, the more than 8,800 members of the TDA have long expressed concerns about patient health and safety when dental services delivered by untrained and unregulated personnel.

For example, the latest tooth whitening trend is the availability of whitening treatments in non-dental retail settings such as mall kiosks, salons, and spas. In most cases, the staff performing tooth-whitening in these retail settings has no health care training or license to provide health care services. However, they are dispensing chemicals that can permanently affect the patient's teeth and gums. HB 502 is not attempting to regulate properly approved over the counter tooth whitening products with lower strength bleaching agents.

Today I want to highlight three principal concerns in the delivery of tooth whitening treatments in retail settings. The concerns are:

- 1. Variations in the strength and efficacy of the chemical agents used for tooth whitening;
- 2. The lack of health care training and dentist supervision of employees providing tooth whitening services in retail settings; and
- 3. The lack of safety protocols, infection control standards, and emergency protocols when untrained and unregulated personnel perform tooth whitening treatments in retail settings.

First, there are vast differences in the chemical make-up and strength of bleaching agents. Certain tooth whitening chemicals include concentrations of bleaching agents higher than those used in over the counter tooth whitening products. Due to the inherently caustic nature of the agents, there is risk for soft tissue damage to the gums and tongue and areas of the face, and tooth sensitivity due to the bleaching process or undiagnosed decay.



Because of these factors, patients should consult with a dentist to determine the most appropriate whitening treatment and chemical strength of the bleaching agent used. This is particularly important for patients with tooth sensitivity, gum sensitivity, dental restorations such as crowns, and extremely dark stains. A patient's tooth discoloration may also be caused by a specific problem that either will not be affected by whitening agents and/or may be a sign of disease or pathology requiring dental therapy. Such diagnosis and treatment decisions can only be made by a dentist.

Second, the application of bleaching agents by untrained and unsupervised personnel may result in the patient experiencing dangerous outcomes.

Unlicensed whitening personnel in retail settings often lack the training, knowledge, resources, and experience necessary for infection control, recognizing problematic dental situations, and emergency situations, such as allergic reactions.

Third, in the dental office, federal and state regulations require that dental trays and other devices be sterilized and disinfected to protect the patient's health and safety. No apparent requirements appear to apply when tooth bleaching services are performed outside of the dental office. These unregulated personnel may inadvertently expose themselves, the existing patient, and future patients to cross-contamination of infectious materials thereby spreading infection and disease.

Although tooth bleaching is often an effective treatment to enhance a patient's smile, it is not without risks. Accordingly, tooth bleaching is best performed under a dentist's professional supervision and following a pre-treatment examination and diagnosis. The TDA and its more than 8,800 members urge your favorable consideration of HB 502 in order to protect the public from the real and potential harm that the delivery of tooth whitening treatments by untrained and unregulated personnel will cause to the public.

Madam Chair Kolkhorst and members, I appreciate the opportunity to speak with you today and will gladly attempt to answer any questions you or other members of the committee may have.