



Contract Health Service Update

by Judy Muschamp, Health Director

Fiscal Year 2006 has finally passed and the CHS program hit a new record – 25 catastrophic cases! These are high-cost cases for which the program is eligible to apply to the Indian Health Service for reimbursement after a certain dollar threshold is met.

Unfortunately, the majority of those cases occurred after the IHS chef funds had been depleted. Thanks to the Tribal Council, tribal program managers, and other health programs, unspent dollars were reprogrammed to cover highest priority care during the last 10 weeks of the year.

High hopes for a better year were quickly dashed when seven catastrophic cases hit the chef funding threshold before the end of the first quarter.

In an attempt to manage the CHS budget to the end of the year, the Gatekeeper Committee currently is considering approval of Priority I and II requests.

High level III care is considered on a case-by-case basis for elders and children. Priority III is defined as inpatient and outpatient care that involves the treatment of prevalent illness or conditions that have a significant impact on morbidity and mortality.

This involves treatment for condi-

tions that may be delayed without progressive loss of function or risk of life, limb, or senses.

Categories include ambulatory services for non-emergent conditions, specialty consultations in surgery, medicine, obstetrics, gynecology, pediatrics, ophthalmology, ENT, **orthopedics**, dermatology, elective routine surgeries, diagnostic evaluations for non-acute conditions, allergy testing, and specialized medications that are not available at the tribal facility.

How are you affected? Orthopedic requests are Priority III services – by far this is **the most requested elective care**. MRIs, CT scans, and bone scans of knees, backs, necks, shoulders, elbows, etc., are all currently being deferred.

If adequate funding becomes available through prudent management and shifting costs to alternate resources, Priority III care will be considered.

You can help by assuring safety in motor vehicles and while playing sports, and covering your family members if you have access to employer-sponsored insurance plans.

If you have any questions about CHS priorities, please call CHS at 541-444-1236 or 1-800-628-5720.

Out-of-Area Health Care

by Judy Muschamp, Health Director

Call-in dates for pre-authorization are July 2 and Oct. 1.

Calls are answered starting at 8 a.m. in the order received. Be sure to register for health care before these dates.

Only one authorization per year per tribal member is allowed. Members have a choice of selecting medical, dental, vision, or hearing services.

Numbers to call: 541-444-1236 or 1-800-628-5720.

Personnel Changes Coming to Clinic

by Judy Muschamp, Health Director

If you're a patient of the clinic, you may notice some changes soon.

In the Dental Department, Dr. Randall Teich is fazing out of his position as dental officer and building his private practice office in Newport, Ore. Dr. Matthew Winkle has been selected to take the lead as dental officer and is transitioning into his new position under Dr. Teich's guidance.

The clinic currently is recruiting a full-time permanent dentist to fill Dr. Teich's vacancy. In the meantime, he is available on a reduced schedule to see Siletz patients. To accommodate

this reduced schedule, only Siletz tribal members are being scheduled for new visits at this time.

Also, Dr. Beverley Phillipson had been our medical officer until June 2006, when she passed that responsibility to Lisa Taylor, family nurse practitioner. Dr. Phillipson is an internist who specializes in endocrinology. She recently announced her retirement effective May 20, 2007.

Until that time, her appointment time is reduced to half time. A full-time permanent medical doctor currently is being sought to fill this very important vacancy.



Tooth Talk

by Mary Ellen Volansky, RDH, MS

Oral Health Inventions of Old

Oral health inventions you wouldn't have thought of unless ... you were there.

Would you have thought to use animal hair as the bristles for a toothbrush?

Around 1780, a toothbrush with "natural bristles" was developed in England by William Addis. These natural bristles are actually the hairs from the neck and shoulders of swine, especially from pigs living in colder climates like Siberia and China.¹

Natural-bristled brushes of all kinds were made for grooming until nylon arrived about 1939.

If you were there in "3500 B.C." you and others, at least until the late 1700s, would have used "chewing sticks."²

"The earliest known reference to toothpaste is in a manuscript from Egypt in the 4th century A.D., which prescribes a mixture of powdered salt, pepper, mint leaves, and iris flowers."²

See if you believe this from Wikipedia. Toothpaste was homemade in the early 1800s from materials such as: chalk, pulverized brick and salt, and pulverized charcoal. These abrasive materials were placed in toothpaste in an attempt to remove hard deposits, calculus, from teeth.

Aren't you glad you're living now? Glad at least for the availability of safe and easy brushing and flossing to prevent the buildup of those hard deposits in the first place.

Pulverized brick as an oral health treatment isn't as hard to swallow as not brushing at all. "(It is) hard to believe, but most Americans didn't brush their teeth until soldiers brought the Army-enforced habit back home."⁴

In the 1940s and 1950s, toothpaste containers were made of lead. "Even with wax lining those lead tubes, the lead mixed with the paste and caused illnesses and death."²

Plastics have arrived since then to provide us with flexible containers.

Has anyone ever threatened to "wash your mouth out with soap?" I doubt that rude person had toothpaste in mind.

Dr. Peabody had toothpaste in mind when in 1824 he added soap to toothpaste as a bubbling agent. Today sodium laurel sulfate (SLS) is used for the same purpose.

If you have mouth sores (i.e., canker or cold sores), it's recommended that you stay away from products with SLS in them. Read the label, there are toothpastes without SLS.¹

An interesting patent for toothpaste came in 1934. That it contained fluo-

ride wasn't its surprise, that it contained "asbestos" was.³ Asbestos was meant as a polishing agent.

Do you recall, "Look Ma, no cavities!"? Proctor & Gamble was the first company to put fluoride in toothpaste in 1956 and advertised it with "kids running into the house brandishing notes from their dentists and screaming, 'Look Ma, no cavities!'"

Twenty years earlier, Grand Rapids, Mich., had been the first U.S. city to deliberately add fluoride to city water to reduce cavities. Other cities followed suit so now nearly 2/3 of the U.S. population has fluoridated water.⁴

The information about the next two inventions was provided by *The New York Times* (NYT) on April 1, 2007 – no fooling! These timely inventions have their origins with Homeland Security.

As travelers, we can have in our carry-on baggage only trial-size or sample size (less than 3 ounces) of liquids (i.e., shampoo, mouthwash, etc.). Also, they must be in clear plastic containers, and those containers must be placed in a quart-size zip-top bag. Toothpaste comes in sample size, but not in clear plastic. What's a traveler to do?



The NYT ran an article with this heading, "On Your Next Trip, Stock Up on Dental Mitts."

Reading this helpful article, I learned I could purchase Dental Mitts, finger mitts that are "pre-moistened and always ready to freshen your breath, cleaning your teeth, and massaging your gums."⁶

Without a brush and fluoride, I am skeptical about the cleaning comment; the other two seem easily manageable. For prices and options on dental mitts, visit at www.lafreshbeauty.com.⁵

Further on in the article, I learned of Travelon, a travel accessories maker. Travelon has come out with "instant tooth gel, mouthwash and shaving gel in the form of tablets that, like Alka-Seltzer tablets, transform when water is added. You can purchase your dental mitts at www.travelonbags.com.⁶

Whoever said, "Necessity was the mother of invention" – it would seem they were correct.

- 1 www.toothbrushexpress.com/html/toothbrush_history.html
- 2 <http://en.wikipedia.org/wiki/Toothpaste>
- 3 www.fluoride-history.de/p-dentifrice.htm
- 4 www.wholepop.com/features/oral/look_ma.html
- 5 <http://lafreshbeauty.com>
- 6 www.nytimes.com