

# Bad breath clinic boasts the sweet smell of success

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Mary Debrusk isn't sure today she ever had a breath problem. But for 30 years she thought she did.

"I was forever brushing my teeth and tongue and gargling. I was going through all kinds of lozenges and gum," says the 52-year-old Cambridge homemaker.

She had a foul taste in her mouth that seldom went away. She avoided getting close to people. She assumed any conversation about bad breath was a hint directed at her.

"One little comment was enough to send me into a tailspin," she says.

So last December, she visit-

## Up Front

ed Toronto's Fresh Breath Clinic, one of two in North America specializing in treating stubborn mouth odors.

Clinic staff tested her, found little wrong, but treated her anyway. "I insisted on it," Debrusk says.

Within a month, the bad taste was gone and her confidence returned.

"It's like a load's been lifted off me. Now, I don't mind standing and talking to people," she says.

John (not his real name), a Toronto professional in his 40s, always knew he had a

problem. His wife complained. He'd notice people moving away from him when he spoke. "It was like a fox-trot. You'd move forward, they'd move back."

But after being treated by a previous incarnation of the Fresh Breath Clinic last fall, he's a new man.

"I did what they told me and I've never had a problem since. It was just unbelievable," he says.

The clinic, located on Yonge St. just north of St. Clair Ave., has treated some 100 people since its founding in October. Its forerunner at the University of Toronto treated 400.

Altogether, founders claim a

☛ Please see Patients, back page

# Patients breathe easier after visit to clinic

☛ Continued from A1

70 per cent success rate in dramatically reducing bad breath, mainly through thoroughly assessing clients and teaching them how to use a special prescription mouth rinse.

"We're not saying this is a treatment for everybody, but his treatment works for a lot of people who have unknown breath problems," says Anne Bosy, one of the clinic's two founders.

Some patients have breath so bad that you can smell it 1½ metres (5 feet) away, she says. "We had a 7-year-old who almost broke my machine."

Records show that bad breath, sometimes called halitosis, was discussed as far back as 1550 B.C., says Bosy, 56, whose 1993 masters thesis at U of T was on oral malodor.

Hippocrates, the Greek physician, suggested a rinse made from herbs and wine, she says.

Maccius Plautus, a prominent Roman citizen, in the third cen-

tury B.C., decided that his wife's foul breath was just cause for infidelity.

An early Roman manufacturer grew rich selling aromatic pastilles to enhance exhalations, Bosy says.

And today, despite scores of mints, toothpastes and rinses, and increased medical knowledge about bad breath, some people still can't get rid of it. It's mainly those the Fresh Breath Clinic treats.

"These are people who have run the gamut, who have tried other things and have been looking for answers," says Dr. Julian Geller, a pediatric dentist who is Bosy's partner in the clinic.

"We're filling a need, a social problem that doesn't get addressed by the medical or dental professions," he says.

The results of foul breath are psychologically devastating, Geller says.

Clinic clients complain of rocky marriages, continual re-

jection at job interviews, or lost promotion opportunities, Bosy says.

"We've had students who have had problems in seminars, who wouldn't speak because they were afraid of exuding odor," Bosy says.

Patients come from all over North America and all walks of life. "We see more women but the men are worse," Bosy says. "Men don't come unless they really feel they have a problem."

It's such an embarrassing subject that many spouses don't tell even their mates they're being treated, Bosy says.

"It's a taboo subject," she says. "People would rather talk about their sex lives."

Bad breath has many causes, many temporary. Spicy and garlicky foods are an obvious temporary source.

Another diet-related cause, hunger odor, occurs when people eat infrequently or diet improperly.

The clinic's dietitian, Gail

Butler, 40, helps clients pinpoint offending eating habits. Some common causes are irregular meals, lack of carbohydrates, and abnormally low zinc intake, a nutrient readily available only in red meat or through supplements.

Morning breath is a temporary condition caused by a nighttime decrease in saliva flow.

Saliva washes away food debris left on the teeth. These particles allow odor-causing bacteria to grow.

Drinking too much coffee and tea or even stress also dry the mouth.

Dry mouths also help the tongue become thickly coated, another frequent fetid felon.

Many diseases affect the breath. For instance, some diabetic conditions cause a fruity odor and kidney failure can create a fishy smell.

Dental diseases, especially inflamed gums, are particular offenders.

Hormonal changes, such as those caused by the menstrual cycle, can also be problematic.

But it's the bad breath for which a cause is not apparent, but which is often caused by bacteria in the mouth, nose, throat and sinuses, that is the clinic's speciality.

Bosy ran its precursor at U of T's faculty of dentistry from 1991 to 1993, where she treated some 400 people and developed her techniques.

She also conducted a study, the results of which were published this year in the Journal of Periodontology, showing that most of its 127 subjects decreased odor-causing bacteria by rinsing with a mouthwash made with a drug called chlorhexidine.

That's the product the Fresh Breath Clinic uses, the main weapon in its arsenal.

For \$400, a portion of which is covered by some dental insurance plans, the clinic thorough-

ly assesses and treats patients. The whole process takes roughly three hours over two visits.

In one key test the patient breathes into a machine measuring the amount of sulphides in the breath.

Two particular sulphides, or sulphur compounds, are the worst offenders, Bosy says.

They are hydrogen sulphide, responsible for a rotten egg smell, and methyl mercaptan — "That's the one that kills you," Bosy says.

The clinic shows clients how to test themselves. The best self-test is to lick your wrist and smell it as it dries, Bosy says.

The clinic conducts a thorough oral examination to see if patients have any obvious problems like broken fillings, gum disease or sores.

In one test, the practitioner flosses the client's teeth, sniffing the floss after each tooth to pinpoint the exact location of the pungent problem.