## Neutral Sodium Fluorides

### AT-HOME FLUORIDE

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<td><strong>Colgate® PreviDent® 5000</strong>&lt;br&gt;<strong>SENSITIVE</strong>&lt;br&gt;(Rx Only)&lt;br&gt;Prescription Strength Toothpaste for Sensitive Teeth</td>
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<td>• Fluoride inhibits demineralization of dental enamel, stimulates remineralization and reduces acid production in plaque&lt;br&gt;  • Potassium nitrate desensitizes the pulpal nerve endings to provide clinically proven sensitivity relief&lt;sup&gt;3&lt;/sup&gt;&lt;br&gt;  • Liquid gel formula enables faster fluoride dispersion than paste-form Rx toothpaste&lt;sup&gt;1&lt;/sup&gt;</td>
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<sup>1</sup> See page 7 for brief summary of information.

<sup>2</sup> ProNamel<sup>™</sup>

<sup>3</sup> Sensodyne

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**To Order:** 1.800.372.4346
**Colgate® PreviDent® 5000**
**DRY MOUTH** *(Rx Only)*
**Prescription Strength Toothpaste**

- 1.1% sodium fluoride (5000 ppm F)
- Medium to high caries risk
- Patient requires gentle toothpaste formulation
- Fluoride inhibits demineralization of dental enamel, stimulates remineralization and reduces acid production in plaque
- Liquid gel formula enables faster fluoride dispersion than paste-form Rx toothpaste
- Strengthens teeth
- Reverses early caries
- Technology shown to significantly remineralize root caries
  a) by 38% in three months
  b) by 57% in six months
- SLS free formula
- Gentle cleaning system
- Soothing mint flavor formulated to appeal to dry mouth sufferers

**Colgate® PreviDent® 5000**
**ENAMEL PROTECT** *(Rx Only)*
**Prescription Strength Toothpaste for Sensitive Teeth**

- 1.1% sodium fluoride (5000 ppm F)
- 5% potassium nitrate
- Hypersensitivity resulting from enamel wear
- Medium to high caries risk
- Fluoride strengthens enamel and makes teeth more resistant to acid attacks
- Potassium nitrate desensitizes the pulpal nerve endings to provide clinically proven sensitivity relief
- Liquid gel formula enables faster fluoride dispersion than paste-form Rx toothpaste
- Strengthens teeth and helps protect against acid wear
- Clinically proven technology to increase resistance to enamel erosion by over 50% vs Sensodyne® ProNamel™
- Technology shown to significantly remineralize root caries
  a) by 38% in three months
  b) by 57% in six months
- Contains 5% potassium nitrate, clinically proven for sensitivity relief
- Mild cleaning system with low abrasion

* Formulated for dry mouth sufferers

Sensodyne® is a registered trademark of GlaxoSmithKline
## Active Ingredient

1.1% sodium fluoride (5,000 ppm F)

## Patient Condition

- Medium to high caries risk
- Root exposure

## Mode of Action

Fluoride inhibits demineralization of dental enamel, stimulates remineralization, and reduces acid production in plaque

## Dental Professional and patient Benefits

- Strengthens teeth\(^2\)
- Reverses early root caries\(^2\)
- Technology shown to significantly remineralize root caries\(^2\)
- a) by 38% in three months\(^2\)
- b) by 57% in six months\(^2\)
- Mild cleaning system with low abrasion
- Safe for restorations and ceramic crowns

### Colgate® PreviDent® 5000 PLUS
(Rx Only)

### Prescription Strength Toothpaste

### Colgate® PreviDent® GEL
(Rx Only)

### Prescription Strength Toothpaste

- Medium to high caries risk
- Root exposure

Fluoride inhibits demineralization of dental enamel, stimulates remineralization, and reduces acid production in plaque

- Provides an effective second fluoride treatment after brushing with a fluoride toothpaste
- Up to 91% arrestment of early root caries\(^4\)
- Can be delivered via custom mouth tray, for patients who have difficulty brushing
- Pleasant flavor improves patient compliance
- Safe for porcelain crowns & composite restorations

See page 7 for brief summary of information.

To Order: 1.800.372.4346
Colgate® PreviDent®
RINSE
(Rx Only)
Reduces caries up to 55%

0.2% sodium fluoride (900 ppm F)

- Medium to high caries risk
- Difficulty brushing

Fluoride inhibits demineralization of dental enamel, stimulates remineralization, and reduces acid production in plaque

- Provides 4 times the fluoride of an OTC rinse
- Up to 55% caries reduction with weekly use
- Once weekly regimen helps to improve patient compliance
- Pleasant cool mint flavor
- Once weekly regimen for ease of use
- Safe for all types of restorations

When should you recommend a Colgate®
PreviDent® 5000 Rx product?

- GINGIVAL RECESSION with exposure of root surfaces.
- ORTHODONTIC TREATMENT increases the number of sites where plaque can accumulate.
- RESTORATIONS might harbor bacteria at their margin, putting them at risk for recurrent decay.
- PERIODONTAL TREATMENT might leave dentin exposed with an increased risk of dentin hypersensitivity and root caries.
- DRY MOUTH significantly increases the risk of rampant caries.
- ACID EROSION might expose dentin, leading to hypersensitivity.

Liquid gel formula enables faster fluoride dispersion vs. paste form toothpaste

PreviDent® 5000
Liquid Gel Dentifrice

5,000 ppm Toothpaste

www.colgateprofessional.com
### Stannous Fluorides

**Colgate® Gel-Kam® GEL**

**Preventative Treatment Gel for Cavity Protection & Sensitive Teeth**

- **Active Ingredient**
  - 0.4% stannous fluoride (970 ppm F)

- **Patient Condition**
  - Medium to high caries risk
  - Hypersensitivity due to exposed dentin
  - Prevention of decay

- **Mode of Action**
  - The anti-bacterial effect of stannous ions helps prevent plaque formation and the fluoride helps to control caries
  - Stannous fluoride helps form a tin-rich surface deposit to occlude open dentin tubules

- **Dental Professional and patient Benefits**
  - 0.4% stannous fluoride strengthens and remineralizes the enamel
  - Provides an effective second fluoride treatment after brushing with a fluoride toothpaste
  - Enhanced protection against caries versus toothpaste alone

**Colgate® Phos-Flur® Rinse**

**Anticavity Dental Rinse**

- **Active Ingredient**
  - 0.044% sodium fluoride in an acidulated phosphate solution (200 ppm F)

- **Patient Condition**
  - Orthodontic decalcification
  - Caries risk

- **Mode of Action**
  - Acidulated phosphate fluoride solution creates microscopic calcium fluoride reservoirs; lowered pH allows for enhanced uptake and retention of fluoride in enamel

- **Dental Professional and patient Benefits**
  - Clinically proven to help prevent caries
  - Reduces white spots by up to 58%
  - Remineralizes teeth by forming microscopic reservoirs of fluoride on the tooth’s enamel
  - ADA Seal
  - Choice of pleasant flavors

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**See page 7 for brief summary of information.**

**To Order:** 1.800.372.4346
Colgate® PreviDent®
VARNISH
(Rx Only)

5% sodium fluoride (22,600 ppm F)

- Dentin hypersensitivity
- Post periodontal surgery
- Medium to high caries risk*
- Post scaling / root planing
- Root exposure

Deposition of significant amounts of calcium fluoride that inhibit dentin fluid flow and provide a reservoir of fluoride ions

- Ready-to-use unit dose treatment
- Highest fluoride concentration available (22,600 ppm F) as compared to non-varnish fluorides
- Provides high concentration of fluoride at the enamel and exposed dentin surface
- Dries transparent on teeth
- Contains xylitol, a natural sweetener

* Use of fluoride varnish for caries prevention has been endorsed by the ADA Council of Scientific Affairs. Although FDA has cleared fluoride varnishes to be used as cavity varnishes/liners and for the treatment of hypersensitive teeth, caries prevention is an "off-label" use because FDA has not cleared it for this purpose.

Colgate® Phos-Flur® Rinse provides a unique acidulated phosphate fluoride solution:

✔ Shown in a clinical study to provide greater fluoride uptake & deeper fluoride penetration

✔ Clinically proven to help prevent caries

✔ Contains phosphate to help build strong teeth

Braces may lead to white spots. Help to reduce the appearance of white spots with Colgate® Phos-Flur® Rinse.
Sodium fluoride cannot produce fluorosis. (See WARNINGS for exceptions.)

CONTRAINDICATIONS: Do not use in pediatric patients under age 12 years unless recommended by a dentist or physician.

WARNING: Prolonged daily ingestion may result in various degrees of dental fluorosis in pediatric patients under age 6 years, especially if the water fluoride exceeds 0.6 ppm, since younger pediatric patients frequently cannot differentiate swallowing from spitting. Pediatric patients under age 6 years require special supervision to prevent repeated swallowing of toothpaste which could cause dental fluorosis. Pediatric patients under age 12 should be supervised in the use of this product. Read directions carefully before using. Keep out of reach of infants and children.

PRECAUTIONS: General: Not for systemic treatment. DO NOT SWALLOW.

Carcinogenesis, Mutagenesis, Impairment of Fertility: In a study conducted in rodents, no carcinogenesis was found in male and female mice and female rats treated with fluoride at dose levels ranging from 4.1 to 9.1 mg/kg of body weight. Equivocal evidence of carcinogenesis was reported in male rats treated with 2.5 and 4.1 mg of body weight. Epidemiological data provide no credible evidence for an association between fluoride and human cancer. Likewise, fluoride at the levels used in this product are known to induce chromosome aberrations in cultured human and rodent cells at doses much higher than those to which humans are exposed. In vivo data are conflicting. Some studies report chromosome damage in rodents, while other studies using similar protocols report negative results. Potential adverse reproductive effects of fluoride exposure in humans has not been adequately evaluated. Adverse effects on reproduction were reported for rats, mice, and cattle exposed to 100 ppm or greater concentrations of fluoride in their diet or drinking water. Other studies conducted in rats demonstrated that lower concentrations of fluoride (5 mg/kg of body weight) did not affect the litter size or fetal weight and did not increase the frequency of skeletal or visceral malformations. There are no adequate and well-controlled studies in pregnant women. However, epidemiological studies conducted in areas with high levels of naturally fluoridated water showed no increased risk of birth defects in humans. Heavy exposure to fluoride during in utero development may result in skeletal fluorosis which becomes evident in childhood.

Nursing Mothers: It is not known if fluoride is secreted in human milk. However, epidemiological studies conducted in areas with high levels of naturally fluoridated water showed no increased risk of birth defects in humans. Heavy exposure to fluoride during in utero development may result in skeletal fluorosis which becomes evident in childhood.

Pregnancy: Teratogenic Effects: Pregnancy Category B. It has been shown that fluoride crosses the placenta of rats, but only 0.01% of the amount administered is transferred to the fetus. Animal studies (rats, mice, rabbits) have shown that fluoride is not a teratogen. Maternal exposure to 12.2 mg fluoride/kg of body weight (rats) or 13.1 mg/kg of body weight (rabbits) did not affect the litter size or fetal weight and did not increase the frequency of skeletal or visceral malformations. There are no adequate and well-controlled studies in pregnant women. However, epidemiological studies conducted in areas with high levels of naturally fluoridated water showed no increased risk of birth defects in humans. Heavy exposure to fluoride during in utero development may result in skeletal fluorosis which becomes evident in childhood.

Nursing Mothers: It is not known if fluoride is secreted in human milk. However, many drugs are excreted in milk, and caution should be exercised when products containing fluoride are administered to a nursing woman. Reduced milk production was reported in farm-raised fox when the animals were fed a diet containing a high concentration of fluoride (5 mg/kg of body weight). No adverse effects on parturition, lactation, or offspring were seen in rats administered fluoride up to 5 mg/kg of body weight.

Pediatric Use: The safety and effectiveness of PreviDent® 5000 Booster in pediatric age groups 6 to 16 years as a caries preventive is supported by pioneering clinical studies with 1.1% sodium fluoride gels in mouth trays in students age 11 to 14 years conducted by Englander et al. Safety and effectiveness in pediatric patients below the age of 6 years have not been established. Please refer to the CONTRAINDICATIONS and WARNINGS sections.

Geriatric Use: Use in geriatric patients in clinical studies of 1.1% sodium fluoride, 15 percent were 65 and over, while 1 percent were 75 and over. No overall differences in safety and effectiveness were observed between these subjects and younger subjects, and other reported clinical experience has not identified differences in response to PreviDent® 5000 Booster that would be expected in other age groups.

ADVERSE REACTIONS: Allergic reactions and other idiosyncrasies have been rarely reported.

OVERDOSAGE: Accidental ingestion of large amounts of fluoride may result in acute burning in the mouth and sore tongue. Nausea, vomiting, and diarrhea may occur. The symptoms usually occur within 2 to 4 hours after toothpaste is ingested and are accompanied by salivation, hematemesis, and epigastric cramping abdominal pain. These symptoms may persist for 24 hours. If less than 5 mg fluoride/kg body weight (i.e., less than 2.3 mg fluoridized body weight) have been ingested, give calcium (e.g., milk) orally to relieve gastrointestinal symptoms and observe for a few hours. If more than 5 mg fluoride/kg body weight (i.e., more than 2.3 mg fluoridized body weight) have been ingested, induce vomiting, give orally soluble calcium (e.g., milk, 5% calcium gluconate or calcium lactate solution) and immediately seek medical assistance. For accidental ingestion of more than 5 mg fluoride/kg body weight (i.e., more than 6.9 mg fluoridized body weight), induce vomiting and admit immediately to a hospital facility for observation.

A treatment dose (a thin ribbon) of PreviDent® 5000 Booster contains approximately 2.5 mg fluoride. A 3.4 FL. OZ (100 mL) bottle contains approximately 608 mg fluoride.

DOSAGE AND ADMINISTRATION: Follow these instructions unless otherwise instructed by your dental professional:

Pediatric Patients, ages 6-16 years of age, expectorate after use and rinse mouth thoroughly.

Adults and pediatric patients 6 years of age and older: Apply at least a 1 inch strip of PreviDent® 5000 Booster toothpaste to a toothbrush. Brush thoroughly once daily for two minutes, preferably at bedtime, on all tooth surfaces. For children under 12 years of age: Consult a dentist or physician.

This is a brief summary of the prescribing information, for full prescribing information please visit www.colgateprofessional.com.
PRECAUTIONS:

General: Not for systemic treatment. DO NOT SWALLOW.

Carcinogenesis, Mutagenesis, Impairment of Fertility: In a study conducted in rodents, no carcinogenesis was found in male and female mice and female rats treated with fluoride at dose levels ranging from 4.1 to 9.1 mg/kg of body weight. Equivocal evidence of carcinogenesis was reported in male rats treated with 2.5 and 4.1 mg/kg of body weight. In a second study, no carcinogenesis was observed in rats, males or females, treated with fluoride up to 11.3 mg/kg of body weight. Epidemiological data provide no credible evidence for an association between fluoride, either naturally occurring or added to drinking water, and risk of human cancer.

Fluoride ion is not mutagenic in standard bacterial systems. It has been shown that fluoride ion has potential to induce chromosome aberrations in cultured human and rodent cells at doses much higher than those to which humans are exposed. In vivo data are conflicting. Some studies report chromosome damage in rodents, while other studies using similar protocols report negative results. Potential adverse reproductive effects of fluoride exposure in humans has not been adequately evaluated. Adverse effects on reproduction were reported for rats, mice, fox, and cattle exposed to 100 ppm or greater concentrations of fluoride in their diet or drinking water. Other studies conducted in rats demonstrated that lower concentrations of fluoride (5 mg/kg of body weight) did not result in impaired fertility and reproductive capabilities.

Pregnancy: Teratogenic Effects: Fertility Category B. It has been shown that fluoridation of drinking water at levels up to 1.2 mg/l (or 0.011% of the amount administered is incorporated in fetal tissue. Animal studies (rats, mice, rabbits) have shown that fluoride is not a teratogen. Maternal exposure to 12.2 mg/kg of fluoride (5 mg/l) or 21.1 mg/kg of body weight in rabbits did not affect the litter size or fetal weight and did not affect the frequency of skeletal or visceral malformations. There are no adequate and well-controlled studies in pregnant women. However, epidemiological studies conducted in areas with high levels of naturally fluoridated water showed no increase in birth defects. Heavy exposure to fluoride during utero development may result in skeletal fluorosis which becomes evident in childhood.

Nursing Mothers: It is not known if fluoride is excreted in human milk. However, many drugs are excreted in human milk, and caution should be exercised when products containing fluoride are administered to a nursing woman. Reduced milk production was reported in farm-raised fox when the animals were fed a diet containing a high concentration of fluoride (98-137 mg/kg of body weight). No adverse effects on parturition, lactation, or offspring were seen in rats administered fluoride up to 5 mg/kg of body weight.

Pediatric Use: PreviDent® 5000 Dry Mouth in pediatric age groups 6 to 16 years as a caries preventive is supported by pioneering clinical studies with 1.1% sodium fluoride gel in mouth trays in students age 11 to 14 years conducted by Englander et al.4 5 Safety and effectiveness in pediatric patients under the age of 6 years have not been published. Please refer to the CONTRAINDICATIONS and WARNINGS sections.

Geriatric Use: Of the total number of subjects in clinical studies of 1.1% (w/w) sodium fluoride, 15 percent were 65 and over, while one percent were 75 and over. No overall differences in safety or effectiveness were observed between these subjects and younger subjects, and other reported clinical experience has not identified differences in responses between the elderly and younger patients, but greater sensitivity of some older individuals cannot be ruled out. This drug is known to be substantially excreted by the kidney, and the risk of toxic reactions to this drug may be greater in patients with impaired renal function. Because elderly patients are more likely to have decreased renal function, care should be taken in dose selection, and it may be useful to monitor renal function.5

ADVERSE REACTIONS: Allergic reactions and other idiosyncrasies have been rarely reported.

OVERDOSAGE: Accidental ingestion of large amounts of fluoride may result in acute burning in the mouth and sore tongue. Nausea, vomiting, and diarrhea may occur soon after ingestion (within 30 minutes) and are accompanied by salivation, hematemesis, and epigastric cramping abdominal pain. These symptoms may persist for 24 hours. If less than 5 mg fluoride/kg body weight (i.e., less than 2.3 mg fluoride/kg body weight) have been ingested, give calcium (e.g., milk) orally to relieve gastrointestinal symptoms and observe for a few hours. If more than 5 mg fluoride/kg body weight (i.e., more than 2.3 mg fluoride/kg body weight) have been ingested, induce vomiting, give orally soluble calcium (e.g., milk, 5% calcium carbonate or calcium lactate), and observe for a few hours. For accidental ingestion of more than 5 mg fluoride/kg body weight (i.e., more than 6.9 mg fluoride/kg body weight), induce vomiting and administer immediately to a hospital facility. A treatment dose (a thin ribbon) of PreviDent® 5000 Enamel Protect contains approximately 2.5 mg fluoride. A 3.4 FL OZ (100 mL) bottle contains approximately 591 mg fluoride.

Dosage and Administration: Follow these instructions unless otherwise instructed by your dental professional.

Adults: 1. Adults and children 12 years of age and older: Apply a thin ribbon of PreviDent® 5000 Enamel Protect to a toothbrush. Brush thoroughly once daily for two minutes, preferably at bedtime, in place of your regular toothpaste.

Pediatric patients, ages 6-16 years of age, expectorate after use and rinse mouth thoroughly.

Submitted for at least 1 minute, expectorate, and rinse mouth thoroughly.

Use twice a day (morning and evening) as recommended by a dentist or physician. Make sure to brush all sensitive areas of the teeth.

Follow these instructions unless otherwise instructed by your dental professional.

Adults: 1. Adults and children 12 years of age and older: Apply a thin ribbon of PreviDent® 5000 Dry Mouth to a toothbrush. Brush thoroughly once daily for two minutes, preferably at bedtime, in place of your regular toothpaste.

Pediatric patients, ages 6-16 years of age, expectorate after use and rinse mouth thoroughly.

2. Use twice a day (morning and evening) as recommended by a dentist or physician. Make sure to brush all sensitive areas of the teeth.

Follow these instructions unless otherwise instructed by your dental professional.

Adults: 1. Adults and children 12 years of age and older: Apply a thin ribbon of PreviDent® 5000 Dry Mouth to a toothbrush. Brush thoroughly once daily for two minutes, preferably at bedtime, in place of your regular toothpaste.

Pediatric patients, ages 6-16 years of age, expectorate after use and rinse mouth thoroughly.

2. Use twice a day (morning and evening) as recommended by a dentist or physician. Make sure to brush all sensitive areas of the teeth.

Follow these instructions unless otherwise instructed by your dental professional.

Adults: 1. Adults and children 12 years of age and older: Apply a thin ribbon of PreviDent® 5000 Dry Mouth to a toothbrush. Brush thoroughly once daily for two minutes, preferably at bedtime, in place of your regular toothpaste.

Pediatric patients, ages 6-16 years of age, expectorate after use and rinse mouth thoroughly.
PRESCRIPTION STRENGTH TOOTHPASTE
TOOTHPASTE FOR SENSITIVE TEETH
SENSITIVE

5% Potassium Nitrate
5% Sodium Fluoride

2. After use, adults expectorate. For best results, do not eat, drink, or rinse for 30 minutes.

CONTRAINDICATIONS: Do not use in pediatric patients under age 6 years unless recommended by a dentist or physician.

Pregnancy: Teratogenic Effects: Pregnancy Category B. It has been shown that fluoride crosses the placenta of rats, but only 0.01% of the amount administered is incorporated in fetal tissue. Animal studies (rats, mice, rabbits) have shown that fluoride is not a teratogen. Maternal exposure to 12.2 mg fluorde/kg of body weight (rats) or 13.1 mg of body weight (rabbits) did not affect the litter size or fetal weight and did not increase the frequency of skeletal or visceral malformations. There are no adequate and well-controlled studies in pregnant women. However, epidemiological studies conducted in areas with high levels of naturally fluoridated water showed no increase in birth defects. Healthy exposure to fluoride during in utero development may result in skeletal fluorosis which becomes evident in childhood.

Nursing Mothers: It is not known if fluoride is excreted in human milk. However, many drugs are excreted in milk, and caution should be exercised when products containing fluoride are administered to a nursing woman. Reduced milk production was reported in farm-raised fox when the animals were fed a diet containing a high concentration of fluoride (88-137 mg/kg of body weight). No adverse effects on parturition, lactation, or offspring were seen in rats administered fluoride up to 5 mg/kg of body weight.

Pediatric Use: The use of PreviDent 5000® in pediatric age groups 6 to 16 years as a caries preventive is supported by pioneering clinical studies which showed that applying 1.1% sodium fluoride gels in mouth trays in students age 11-14 years conducted by Englander, et al. Safety and effectiveness in pediatric patients below the age of 6 years have not been established. Please refer to the Contraindications and Warnings sections.

Geriatric Use: Of the total number of subjects in clinical studies of 1.1% (w/w) sodium fluoride, 15 percent were 65 and over, while 1 percent were 75 and over. No overall differences in safety or effectiveness were observed between these subjects and younger subjects, and other reported clinical laboratory data have not identified differences in responses between the elderly and younger patients, but greater sensitivity of some older individuals cannot be ruled out. This drug is known to be substantially excreted by the kidney, and the risk of toxic reactions to this drug may be greater in patients with impaired renal function. Because elderly patients are more likely to have decreased renal function, care should be taken in dose selection, and it may be useful to monitor renal function.

OVERDOSAGE: Accidental ingestion of large amounts of fluoride may result in acute burning in the mouth and sore tongue. Nausea, vomiting, and diarrhea may occur soon after ingestion (within 30 minutes) and are accompanied by salivation, hematemesis, and epigastric cramping abdominal pain. These symptoms may persist for 4 to 6 hours after ingestion. With less than 5 mg fluoride/kg body weight, vomiting, nausea, diarrhea, and emesis may occur, and these symptoms may persist for 4 to 6 hours. With 5 mg fluoride/kg body weight or more, vomiting, nausea, diarrhea, emesis, and severe electrolyte loss may occur. Severe vomiting and diarrhea may lead to dehydration and electrolyte imbalance, including decreased serum calcium, magnesium, and potassium levels. In severe cases, dehydration may lead to renal failure, cardiac arrest, and death.

WARNINGS:

1. Pediatric patients, age 6-16, expectorate gel after use and rinse mouth thoroughly.

DOSAGE AND ADMINISTRATION: Follow these instructions unless otherwise instructed by your dental professional.

1. Adults and pediatric patients 6 years of age or older, apply a thin ribbon of PreviDent 5000® Plus® to a toothbrush. Brush thoroughly once for two minutes, preferably at bedtime.

2. After use, adults expectorate gel. For best results, do not eat, drink, or rinse for 30 minutes. Pediatric patients, age 6-16, expectorate after use and rinse mouth thoroughly.

INDICATIONS AND USAGE: A dental caries preventive, for once daily self-applied topical use. It is well established that 1.1% sodium fluoride is safe and extradionarily effective as a caries preventive when applied frequently with mouthpiece applicators. PreviDent 5000® Plus® brand of 1.1% sodium fluoride in a squeeze-tube is easily applied onto a toothbrush. This prescription dental cream should be used once daily in place of your regular toothpaste unless otherwise instructed by your dental professional. May be used in areas where drinking water is fluoridated since topical fluoride cannot produce fluorosis. (See WARNINGS)

INDICATIONS AND USAGE: A dental caries preventive, for once daily self-applied topical use. It is well established that 1.1% sodium fluoride is safe and extraordinarily effective as a caries preventive when applied frequently with mouthpiece applicators. PreviDent® Gel in a squeezable tube is easily applied onto a toothbrush as a mouthwash. This prescription dental gel should be used once daily following use of a regular toothpaste unless otherwise instructed by your dental professional.

CONTRAINDICATIONS: Do not use in pediatric patients under age 6 years unless recommended by a dentist or physician.

INDICATIONS AND USAGE: A dental caries preventive, for once daily self-applied topical use. It is well established that 1.1% sodium fluoride is safe and extraordinarily effective as a caries preventive when applied frequently with mouthpiece applicators. PreviDent® Gel in a squeezable tube is easily applied onto a toothbrush as a mouthwash. This prescription dental gel should be used once daily following use of a regular toothpaste unless otherwise instructed by your dental professional.

INDICATIONS AND USAGE: A dental caries preventive, for once daily self-applied topical use. It is well established that 1.1% sodium fluoride is safe and extraordinarily effective as a caries preventive when applied frequently with mouthpiece applicators. PreviDent® Gel in a squeezable tube is easily applied onto a toothbrush as a mouthwash. This prescription dental gel should be used once daily following use of a regular toothpaste unless otherwise instructed by your dental professional.

CONTRAINDICATIONS: Do not use in pediatric patients under age 6 years unless recommended by a dentist or physician.

INDICATIONS AND USAGE: A dental caries preventive, for once daily self-applied topical use. It is well established that 1.1% sodium fluoride is safe and extraordinarily effective as a caries preventive when applied frequently with mouthpiece applicators. PreviDent® Gel in a squeezable tube is easily applied onto a toothbrush as a mouthwash. This prescription dental gel should be used once daily following use of a regular toothpaste unless otherwise instructed by your dental professional.

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CONTRAINDICATIONS: Do not use in pediatric patients under age 6 years unless recommended by a dentist or physician.

INDICATIONS AND USAGE: A dental caries preventive, for once daily self-applied topical use. It is well established that 1.1% sodium fluoride is safe and extraordinarily effective as a caries preventive when applied frequently with mouthpiece applicators. PreviDent® Gel in a squeezable tube is easily applied onto a toothbrush as a mouthwash. This prescription dental gel should be used once daily following use of a regular toothpaste unless otherwise instructed by your dental professional.
DESCRIPTION: PreviDent® 5% Sodium Fluoride Varnish contains 22,600 ppm fluoride. It has a strong desensitizing action when applied to dental surfaces, treating hypersensitivity quickly and easily. This product sets rapidly on contact with saliva, resulting in patient comfort and acceptance. PreviDent® Varnish will leave a thin film on the teeth after application.

COMPOSITION: 1 mL of this suspension contains 50 mg sodium fluoride, equivalent to 22.6 mg fluoride ion, in an alcoholic solution of natural resins.

INDICATIONS: PreviDent® Varnish is a topical fluoride for the treatment of dentinal and post operative sensitivity.

Dosage: To be administered by the dental professional for the treatment of dentin hypersensitivity. The fluoride content in this product is dosed in such a way that neither acute nor chronic side effects are to be expected if applied according to the instructions.

DIRECTIONS FOR USE: Please observe when treating hypersensitive teeth

1. Wash and dry tooth surface.
2. Mix well prior to application.
3. Apply product with supplied brush in the conventional manner.
4. Thin excess varnish on the tooth’s surface until the varnish surface is dry.
5. Covers even moist teeth with a coating of varnish film for several hours which occludes the openings of the dental tubules.
6. Hardens on contact with saliva so the patient may leave immediately after application of the product.
7. It is recommended that the patient be instructed to eat only soft foods for 2 hours after treatment.

CONTRAINDICATIONS: Ulcerative gingivitis and stomatitis.

INTERACTIONS: When PreviDent® Varnish is applied, other fluoride preparations such as fluoride gels should not be administered during the same day.

ADVERSE REACTIONS: Edematous swellings have been reported only in rare instances in some fluoride varnish products, especially after application to extensive surfaces. Dyspnea, although extremely rare, has occurred in asthmatic children. Nausea has been reported when extensive applications have been made. If required, varnish film can be removed with a thorough brushing.

Store in a cool, dry place.

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