

## 2018 Recipient of the C.V. Winter Advocacy Award



Dr. C.V. Winter served on the NC Caring Dental Professionals Board of Directors for an extended period, and held Emeritus status at the time of his death in 2012. Prior to his death the NCCDP established, in his honor, the C.V. Winter Advocacy Awards. Criteria was established for the award based on the qualities that Dr. Winter himself exhibited:

- Commitment to advocacy
- Exemplary leadership
- Assistance and support for others in need
- Inspires others to volunteer and be an advocate
- Represents NCCDP with pride and dignity
- Outstanding contributions to NCCDP as an advocate/volunteer

Dr. C.V. Winters was the 1st recipient of the Advocacy Award in 2011. Dr. Jake Thorpe, was also responsible for establishing the NCCDP program and was the 2nd recipient in 2012. Dr. Bill Claytor received the award as the 3rd recipient in 2013. Dr. John Ludlow as the 4th recipient of the reward in 2014. Dr. Randy Kixmiller, was the 5th to receive the award in 2015. Melissa Combs Zaczyk, RDH, the 6th recipient, was the first hygienist to receive the award in 2016. Dr. Joseph Newell was the 7th recipient last year.

I would like to share several comments made by those of you who nominated our 8th recipient.

- He meets all of the criteria for this reward
- Very committed, always available and willing
- Strong leadership in his region
- When the hand of CDP reaches out he always says yes
- Gives back to the NCCDP through volunteering and helping
- Treasures and values his recovery
- Willingly shares his strength and hope with others

The NCCDP is pleased and honored to present the 2018 C.V. Winter Advocacy Award to Dr. Macon Sapp. Thank you, Macon, for your never-ending commitment to the recovery community, your dedication to your profession and your service as Volunteer and Advocate for the NCCDP.

**Reminder!**

Representatives of the NCCDP are always available to share the history and mission of the NCCDP with various groups, including hygiene schools, dental schools and any other professional dental organization.

Please call us to schedule a presentation: 1-800-230-3934

VISIT THE UPDATED NCCDP WEBSITE  
[www.nccaringdental.com](http://www.nccaringdental.com)

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## When You Need Someone to Care



North Carolina  
Caring Dental Professionals

Published three times yearly in Southern Pines, North Carolina by the North Carolina Caring Dental Professionals, a nonprofit organization. Our goals are to disseminate information about the Caring Dental Professionals, and to provide helpful and informative materials about chemical dependence and mental health issues.

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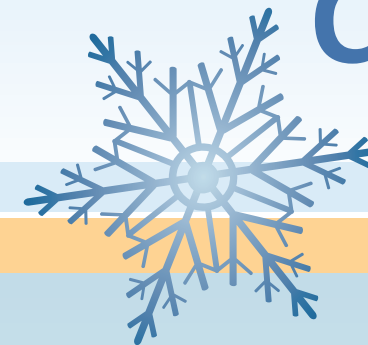
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### HELPING DENTISTS, DENTAL HYGIENISTS, AND THEIR FAMILIES

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# CARING Connections

JUST REACH OUT

Volume 18 , Issue 3

## NORTH CAROLINA CARING DENTAL PROFESSIONALS

### Food for Thought

By Nancy Davis, Executive Director



The holidays are upon us and it is time to set the scales back. While at a meeting with several dental professionals the subject came up of patients gifting the office with wonderful food items as a way of showing their appreciation and wishing everyone happy holidays.

There are many people who have health reasons for being on an alcohol-free diet. Pregnant women, children and teenagers under the age of 21, and the fortunate ones who are in recovery from the disease of addiction are to name a few.

You would be surprised at the number of packaged and home made foods that contain small amounts of alcohol, including many specialty foods found in delicatessen or gourmet shops. Pure vanilla and almond extract and some brands of Dijon mustard are examples. Marinara sauce with wine, alcohol infused whipped cream and even fruit cake can all pose problems. For many this is not an issue. Adding “a little something extra” can make any meal special, especially during the holidays. It is not an overstatement to say that even a splash can prove catastrophic for those who need to avoid alcohol, even if accidental. It is incumbent on all of us to be aware when we use it and substitute whenever required.

There are common myths about cooking with alcohol. Contrary to popular belief, alcohol does not evaporate when heated. Studies have shown that as much as two-thirds of it still exists after 20 minutes of cooking. The amount of alcohol that burns off depends on the cooking method used and how long the alcohol is cooking. When added after cooking, 100% of the alcoholic content remains. Leaving alcohol completely out of a recipe will not change the flavor of the food. If it plays an integral part, try to experiment with substitutions. It is possible to come up with a flavorful, alcohol free meal or dessert.

You are your own best enforcer. You must take responsibility for your own well-being. It is extremely important to read all labels and ask for ingredients before eating anything you suspect may have been prepared with alcohol. It is never rude to ask.

When entertaining, please consider there may be someone who does not imbibe and always have some alcohol-free items and drinks available.

It is critical to read all labels, but as a general rule, it is good to avoid the following:

- Pure or artificial flavor extracts such as vanilla, rum, and almond
- Cooking wines
- Malt & wine vinegar
- Some brands of Dijon mustard
- Sauces such as bearnaise or bordelaise use wine in preparation
- Fondues
- Desserts such as liqueur filled chocolates, cherries jubilee, mousse, flambé desserts, some pastries or cakes; rum cake, fruit cake
- Wine flavored cheese or pates
- Non-alcoholic beers or wines
- Cooking spray

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North Carolina Caring  
Dental Professionals



# North Carolina Caring Dental Professionals

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When a recipe calls for an alcohol product you can substitute with the following:

• Sweet Sherry	Apple cider
• Sherry	Orange or Pineapple Juice
• Brandy	Apple cider or peach syrup
• Bourbon (Tbsp)	2 teaspoons non-alcohol vanilla extract
• Grand Marnier	Unsweetened orange juice concentrate
• Coffee liqueur	Coffee made 4-6 time stronger
• Other fruit liqueur	Syrup from canned fruit reduced by boiling
• Champagne	Ginger ale
• Cognac	Juice from peaches or pears
• Rum	Pineapple juice with non-alcohol almond extract



For those in recovery, staying sober during the holidays can be a challenge. This is only one way of protecting yourself. Don't forget the NCCDP is always available to everyone with any questions.

The NC Caring Dental Professionals wish each and everyone a most joyous holiday season.

**WE CARE!**  
**1 – 800-230-3934**  
Visit our website [www.nccaringdental.com](http://www.nccaringdental.com)

## The Power of Chocolate

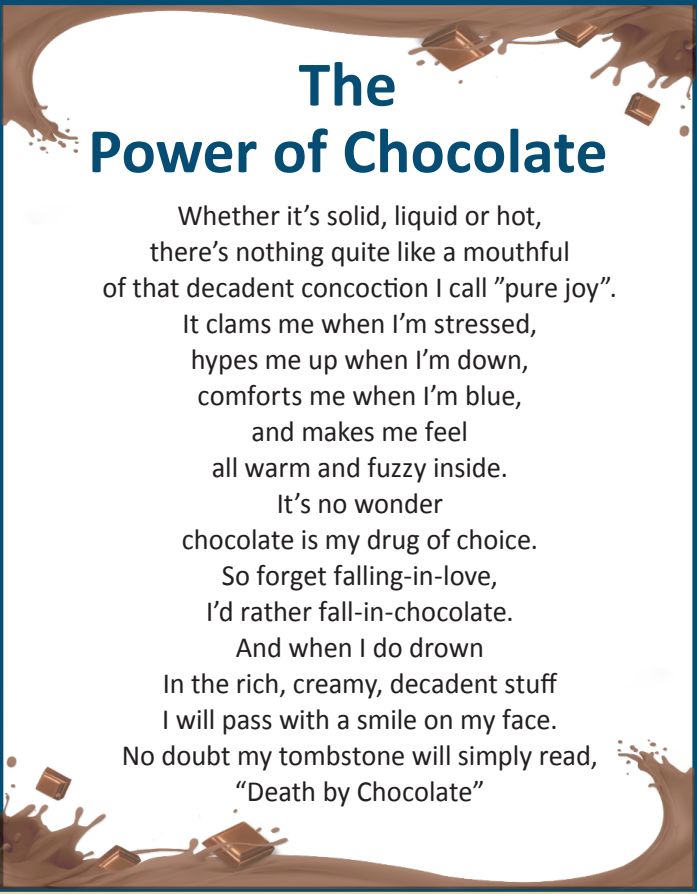
Whether it's solid, liquid or hot,  
there's nothing quite like a mouthful  
of that decadent concoction I call "pure joy".

It clams me when I'm stressed,  
hypes me up when I'm down,  
comforts me when I'm blue,  
and makes me feel  
all warm and fuzzy inside.


It's no wonder  
chocolate is my drug of choice.  
So forget falling-in-love,  
I'd rather fall-in-chocolate.

And when I do drown  
In the rich, creamy, decadent stuff  
I will pass with a smile on my face.


No doubt my tombstone will simply read,  
"Death by Chocolate"



## The NCCDP Thanks Dr. Bill Claytor



The NCCDP maintains a fund to offer assistance to dental professionals who need financial help on their path to recovery. Interest free loans are available to those in need. The Jake Thorpe Assistance Fund is totally maintained by donations and fundraising. At this year's annual conference the NCCDP was able to recognize Dr. Bill Claytor for his outstanding contribution to this fund.



## Looking For “Highs” in All the Wrong Places

*Dr. Bill Claytor, DDS, MAGD, PA, NCCDP Volunteer Coordinator*

Beginning in the 1980's, the concept of pain as the “5th Vital Sign” instigated America's love affair with opioids as doctors wrote more opioids contributing to the Opioid Epidemic we are experiencing today. If a patient had any pain using the Pain Scale from 1-10, he got a pain pill, typically a narcotic (opioid). As America deals with the challenges and obstacles involved in reversing today's opioid crisis, another wave of drugs has arrived on the scene. These drugs are often more seductive and appealing with claims they are safe, effective and not addictive. But nothing could be further from the truth. One popular drug today is Kratom. Signs and billboards line the highways of America with Kratom signs advertising the drug for sale with phone numbers to purchase. Kratom can be found in herbal stores and online. The drug even has a lobby group (American Kratom Association) in Washington, DC fighting for its survival on the free market. The DEA almost scheduled Kratom in February, 2016 as a Class I drug (no known medical use in humans) but delayed this action to allow further investigation.



However, **Kratom is addictive**. It has opioid-like effects with 22 of 25 of the most prevalent compounds in Kratom attaching to mu receptors resulting in pain relief and euphoria. It is many times more potent than morphine and has been used for centuries in Southeast Asia but is now outlawed due to its addictive potential. It has traditionally been used to treat muscle pain relief, diarrhea, to prevent withdrawals from opioids (Rx opioids & heroin) and mild stimulation. However, the FDA states clinical effectiveness and safety have not been established for any medical condition while issues such as toxicity and death are possible. In fact, as of February 2018, the FDA reports 44 deaths related to Kratom use (often in combination with other drugs). Other uses include treating anxiety and chronic pain. Kratom can be found in certain coffee shops and recreational use has been reported. Opioid-like side effects include sedation at high doses with stimulation, increased energy, stamina and minimized fatigue at low doses. Kratom is associated with addiction, withdrawal symptoms, hypothyroidism, liver injury, aching of muscles and bones and jerky limb movements, psychosis with hallucinations, delusion, confusion, tachycardia, hypotension, tremor, anorexia, weight loss, and seizures with Modafinil (Provigil).

In closing, one big misconception or myth about drugs or supplements like Kratom today is that they aren't addictive because they are labeled as OTC (Over-the-Counter), cheap, organic, unscheduled by the DEA, no prescription needed to buy from pharmacies/internet, safe, “all natural” or a herbal (plant) dietary supplement. It is important to realize that these terms don't mean that they are safe, don't have side effects or aren't addictive. Remember that OxyContin, Valium and Darvon when they first came to market were labeled as non-addictive and safe.

The real question we should be asking ourselves is, “Why are people taking drugs like Kratom in the first place if they are so potentially dangerous and addictive?” A glimpse of the answer can be found within the Opioid Epidemic. Americans today are hurting mostly spiritually and to a lesser degree physically. **From 1999 to the present, the number of opioid overdose deaths and the number of opioid prescriptions written have increased by > 400% while the level of physical pain Americans report has remained basically the same.** {CDC; The New York Times (Feb. 2008) National Survey on Drug Use and Health}

Americans are hurting so much spiritually that we are seeking anything to reduce our stress and anxiety. Unfortunately, we are being deceived by products that are labeled as “safe and non-addictive” that are really very dangerous resulting in health issues, addiction and/or death. Is Kratom a healthy alternative to reduce pain and suffering? I think not!

If you would like to evaluate for yourself the safety of a drug, product or supplement currently available today, please don't hesitate to call the NCCDP at 800-230-3934 or go to: <https://talbottcampus.com/wp-content/uploads/talbott-medication-guide-and-legal-drug-information-2014-06.pdf> for a detailed list of drugs and supplements and their safety rating.

## A Culture of Acceptance

Learning about myself and how I interact with other people has been the most important part of my recovery. As a dentist, interaction with other people is everything. I have relationships with team members, patients, colleagues, vendors and even the media. I did drugs, in part, because of fear of loss, fear of abandonment and a bloated ego. That stuff was my baggage and bringing it to work, especially as an impaired professional, sullied the culture of the office. Work culture is defined as “the set of shared attitudes, values, goals, and practices that characterizes an institution or organization.” My active addiction, fear, and lack of focus meant I couldn't be a good leader. It was impossible. The culture of my office was bad. It suffered. And as a result, my practice suffered. The practice was sick just like me.

Before recovery you could find me trying to divert narcotics when it was delivered by the UPS truck, avoiding work as much as possible, and barely giving a nod to my team. My focus was gone. I used to care about my quality of dental work but, during active addiction, I just wanted to get by, to make money, to not get caught. My expectations of my team members were non-existent. Leave early? Sure. Get paid even when you're not there? Why not? You could find me, on any given day, napping in my office, playing on social media and looking at my watch. I was not respected by my staff. The staff ran the office. They ran the back end, the front end and everything in between. They did an incredible job with what they had but it was not their responsibility and the culture suffered. It was a culture of neglect.

I “voluntarily” (an ultimatum from my wife) entered the Caring Dental Professional Program in 2003 because I had transformed into this kind of “drug zombie”. A liar. A thief. An addict. I don't even know how I did as well as I did sometimes. I had quit this wonderful office in a rural community to go to Charlotte but, two weeks later, I came back with my tail between my legs. My employer/ partner was a recovering alcoholic and he recommended that I go into treatment. He also let me come back to work for which I will be forever grateful. I was able to enter an outpatient treatment program that allowed me to stay with my family. We have five kids and, at the time, our twins were only a year old. I also went to after care for a year and a half and, of course, Alcoholics Anonymous. I learned so much about myself. I began to wake up. To care. To become sensitive but also strong. To fail. And I learned to succeed.

Today, I have three practices, along with a partner, in the central part of the state. We nurture each other. We consciously reinforce our positive culture. Our office culture centers on creating a world-class experience for our patients and for each other. There is so much respect between us. We care about each other, our patients, and our business outcomes. I have taken classes at MIT to become a better business owner. We have enlisted coaches and therapists to make us better at what we do. My staff and I can tell each other that we are grateful to be together. We express the gratitude openly and it is encouraged. We deal with challenges head on and try to repair conflicts quickly and for the betterment of our relationships. A healthy culture is something I focus on now. My intentions are directed at that goal because it is critical to a foundation of appreciation for each other, excellent dental outcomes, and an attitude of gratitude at work. This was a gift that was given to me by the CDP, AA, and recovery in general. I have never cared more about my career and the people I work with. Today, we have a culture of acceptance and a focus on excellent patient care.

- by a grateful recovering dentist

## PLEASE CONSIDER

Please consider making a tax-deductible donation to the NC Caring Dental Professional's Jake Thorpe assistance fund. This money is used to provide interest free loans to assist impaired dental professionals on their path to recovery. The NCCDP was created for the dental team and their families with the intention of promoting a healthy recovery and lifestyle. You can be a part of this health and wellness effort by making a tax-deductible donation TODAY!

Dr. Henry Duncan, DDS – Chairman, Fundraising Committee