

## **Your Child's First Dental visit**

Your child should visit the dentist by his/her 1st birthday. You can make the first visit to the dentist enjoyable and positive. Your child should be informed of the visit and told that the dentist and their staff will explain all procedures and answer any questions. The fewer to-dos concerning the visit, the better.

It is best if you refrain from using words around your child that might cause unnecessary fear, such as needle, pull, drill or hurt. Our dental team uses words that convey the same message, but are pleasant and non-frightening to the child.

### **Why Are The Primary Teeth So Important?**

It is very important to maintain the health of the primary teeth. Neglected cavities can and frequently do lead to problems which affect developing permanent teeth. Primary teeth, or baby teeth are important for (1) proper chewing and eating, (2) providing space for the permanent teeth and guiding them into the correct position, and (3) permitting normal development of the jaw bones and muscles. Primary teeth also affect the development of speech and add to an attractive appearance. While the front 4 teeth last until 6-7 years of age, the back teeth (cuspids and molars) aren't replaced until age 10-13.

### **Care of Your Child's Teeth**

Begin daily brushing as soon as the child's first tooth erupts. A pea size amount of fluoride toothpaste can be used after the child is old enough not to swallow it. By age 4 or 5, children should be able to brush their own teeth twice a day with supervision until about age seven to make sure they are doing a thorough job. However, each child is different. Your dentist can help you determine whether the child has the skill level to brush properly.

Proper brushing removes plaque from the inner, outer and chewing surfaces. When teaching children to brush, place toothbrush at a 45 degree angle; start along gum line with a soft bristle brush in a gentle circular motion. Brush the outer surfaces of each tooth, upper and lower. Repeat the same method on the inside surfaces and chewing surfaces of all the teeth. Finish by brushing the tongue to help freshen breath and remove bacteria.

Flossing removes plaque between the teeth where a toothbrush can't reach. Flossing should begin when any two teeth touch. You should floss the child's teeth until he or she can do it alone. Use about 18 inches of floss, winding most of it around the middle fingers of both hands. Hold the floss lightly between the thumbs and forefingers. Use a gentle, back-and-forth motion to guide the floss procedure on each tooth. Don't forget the backs of the last four teeth. Alternatively you can always use a floss aid.

### **Good Diet = Healthy Teeth**

Healthy eating habits lead to healthy teeth. Like the rest of the body, the teeth, bones and the soft tissues of the mouth need a well-balanced diet. Children

should eat a variety of foods from the five major food groups. Most snacks that children eat can lead to cavity formation. The more frequently a child snacks, the greater the chance for tooth decay. How long food remains in the mouth also plays a role. For example, hard candy and breath mints stay in the mouth a long time, which cause longer acid attacks on tooth enamel. Your child needs snacks, choose nutritious foods such as vegetables, low-fat yogurt, and low-fat cheese which are healthier and better for children's teeth.

### **How Do I Prevent Cavities?**

Good oral hygiene removes bacteria and the left over food particles that combine to create cavities. For infants, use a wet gauze or clean washcloth to wipe the plaque from teeth and gums. Avoid putting your child to bed with a bottle filled with anything other than water. See "Baby Bottle Tooth Decay" for more information.

For older children, brush their teeth at least twice a day. Also, watch the number of snacks containing sugar that you give your children.

Six month visits are recommended beginning at your child's first birthday. Routine visits will start your child on a lifetime of good dental health.

Your dentist may also recommend protective sealants or home fluoride treatments for your child. Sealants can be applied to your child's molars to prevent decay on hard to clean surfaces.

### **Seal out Decay**

A sealant is a clear or shaded plastic material that is applied to the chewing surfaces (grooves) of the back teeth (premolars and molars), where four out of five cavities in children are found. This sealant acts as a barrier to food, plaque and acid, thus protecting the decay-prone areas of the teeth.

### **Baby Bottle Tooth Decay (Early Childhood Caries)**

One serious form of decay among young children is baby bottle tooth decay. This condition is caused by frequent and long exposures of an infant's teeth to liquids that contain sugar. Among these liquids are milk (including breast milk), formula, fruit juice and other sweetened drinks.

Putting a baby to bed for a nap or at night with a bottle other than water can cause serious and rapid tooth decay. Sweet liquid pools around the child's teeth giving plaque bacteria an opportunity to produce acids that attack tooth enamel. If you must give the baby a bottle as a comforter at bedtime, it should contain only water. If your child won't fall asleep without the bottle and its usual beverage, gradually dilute the bottle's contents with water over a period of two to three weeks.

After each feeding, wipe the baby's gums and teeth with a damp washcloth or gauze pad to remove plaque. The easiest way to do this is to sit down, place the

child's head in your lap or lay the child on a dressing table or the floor. Whatever position you use, be sure you can see into the child's mouth easily.

### **When Will My Baby Start Getting Teeth?**

Teething, the process of baby (primary) teeth coming through the gums into the mouth, is variable among individual babies. Some babies get their teeth early and some get them late. In general the first baby teeth are usually the lower front (anterior) teeth and usually begin erupting between the age of 6-8 months.

### **Eruption of Your Child's Teeth**

Children's teeth begin forming before birth. As early as 4 months, the first primary (or baby) teeth to erupt through the gums are the lower central incisors, followed closely by the upper central incisors. Although all 20 primary teeth usually appear by age 3, the pace and order of their eruption varies.

Permanent teeth begin appearing around age 6, starting with the first molars and lower central incisors. This process continues until approximately age 21. Adults have 32 permanent teeth, including the third molars (or wisdom teeth).

### **Dental Emergencies**

*Toothache:* Clean the area of the affected tooth thoroughly. Rinse the mouth vigorously with warm water or use dental floss to dislodge impacted food or debris. If the pain still exists, contact your child's dentist. DO NOT place aspirin on the gum or on the aching tooth. If the face is swollen apply cold compresses and contact your dentist immediately.

*Cut or Bitten Tongue, Lip or Cheek:* Apply ice to bruised areas. If there is bleeding apply firm but gentle pressure with a gauze or cloth. If bleeding does not stop after 15 minutes or it cannot be controlled by simple pressure, take the child to hospital emergency room.

*Knocked Out Permanent Tooth:* Find the tooth. Handle the tooth by the crown, not the root portion. You may rinse the tooth but DO NOT clean or handle the tooth unnecessarily. Inspect the tooth for fractures. If it is sound, try to reinsert it in the socket. Have the child hold the tooth in place by biting on a gauze. If you cannot reinsert the tooth, transport the tooth in a cup containing the child's saliva or milk. If the child is old enough, the tooth may also be carried in the child's mouth. The child must see a dentist IMMEDIATELY! Time is a critical factor in saving the tooth.

### **Fluoride**

Fluoride is an element, which has been shown to be beneficial to teeth. However, too little or too much fluoride can be detrimental to the teeth. Little or no fluoride will not strengthen the teeth to help them resist cavities. Excessive fluoride ingestion by preschool-aged children can lead to dental fluorosis, which is a chalky white to even brown discoloration of the permanent teeth. Many children often get more fluoride than their parents realize. Being aware of a child's

potential sources of fluoride can help parents prevent the possibility of dental fluorosis.

Some of these sources are:

- Too much fluoridated toothpaste at an early age.
- The inappropriate use of fluoride supplements.
- Hidden sources of fluoride in the child's diet.

Two and three year olds may not be able to expectorate (spit out) fluoride-containing toothpaste when brushing. As a result, these youngsters may ingest an excessive amount of fluoride during tooth brushing. Toothpaste ingestion during this critical period of permanent tooth development is the greatest risk factor in the development of fluorosis.

Excessive and inappropriate intake of fluoride supplements may also contribute to fluorosis. Fluoride drops and tablets, as well as fluoride fortified vitamins should not be given to infants younger than six months of age. After that time, fluoride supplements should only be given to children after all of the sources of ingested fluoride have been accounted for and upon the recommendation of your pediatrician or dentist.

Certain foods contain high levels of fluoride, especially powdered concentrate infant formula, soy-based infant formula, infant dry cereals, creamed spinach, and infant chicken products. Please read the label or contact the manufacturer. Some beverages also contain high levels of fluoride, especially decaffeinated teas, white grape juices, and juice drinks manufactured in fluoridated cities.

Parents can take the following steps to decrease the risk of fluorosis in their children's teeth:

- Use baby tooth cleanser on the toothbrush of the very young child.
- Place only a pea sized drop of children's toothpaste on the brush when brushing.
- Account for all of the sources of ingested fluoride before requesting fluoride supplements from your child's physician or dentist.
- Avoid giving any fluoride-containing supplements to infants until they are at least 6 months old.
- Obtain fluoride level test results for your drinking water before giving fluoride supplements to your child (check with local water utilities).

### **What's the Best Toothpaste for my Child?**

Tooth brushing is one of the most important tasks for good oral health. Many toothpastes, and/or tooth polishes, however, can damage young smiles. They contain harsh abrasives which can wear away young tooth enamel. When looking for a toothpaste for your child make sure to pick one that is

recommended by the Canadian Dental Association. These toothpastes have undergone testing to insure they are safe to use.

Remember, children should spit out toothpaste after brushing to avoid getting too much fluoride. If too much fluoride is ingested, a condition known as fluorosis can occur. If your child is too young or unable to spit out toothpaste, consider providing them with a fluoride free toothpaste, using no toothpaste, or using only a "pea size" amount of toothpaste.

When it comes to proper oral hygiene practices, everyone knows it's important to floss and brush teeth regularly. But like many things in life, there are right ways and wrong ways to go about taking care of your teeth to ensure they will last a lifetime.

### **When Should I Begin Routine Oral Care for My Child?**

It's never too early to instill good oral care habits. In fact, the best time to start is even before a baby's first teeth arrive.

When the first teeth appear, parents can use a soft silicone finger toothbrush. And once the child has a full set of teeth, it's time to graduate to a toothbrush -- although a parent's help is a must for longer than most might realize.

Some parents may think a two-year-old can brush their own teeth simply because they say they want to. But at that age, all they're really good at is chewing the toothbrush or licking the toothpaste off.

Children need some form of assistance until they're about the age of eight. Kids need their teeth brushed and flossed for them until they're at least three. Then parents should use the 'hand over hand' technique just to make sure the child is using the right motions in the brushing process.

Flossing can start as early as two, a process that can be made much easier with helpful tools such as floss aids.

Avoiding mouth rinses until the age of six is recommended, because children don't have the capacity to rinse and spit.

Toothpaste also should be dispensed in moderation. A small smear of toothpaste, the size of a kernel or two of rice is enough for a child under three. Then you can graduate to an amount the size of a small green pea. Otherwise they may swallow excessive amounts of fluoride.

Good brushing and flossing habits should be applied at any age. That means not being too aggressive in your brushing techniques, which can lead to gum damage over the long term.

If you use a scrubbing back-and-forth action you can cause wear of the gum area and tooth. Keep the brush at a 45-degree angle and work from the gum line to the tooth inside and out.

Flossing is considered even more important than brushing, because a toothbrush doesn't get between the teeth. Flossing not only removes food that is present between teeth, it also disturbs the potential for bacterial colonization, which can lead to decay.

If you disturb bacteria it can't colonize, so plaque doesn't form as rapidly. Just like a car: if you don't get all the salt out, it will cause rust. If you don't get all the food out, it will start to cause problems.

The best technique is to take about two feet of floss, wrap it around the middle fingers, and guide it with your index fingers.

### **What is Pulp Therapy?**

The pulp of a tooth is the inner central core of the tooth. The pulp contains nerves, blood vessels, connective tissue and reparative cells. The purpose of pulp therapy is to maintain the vitality of the affected tooth (so the tooth is not lost).

Dental caries (cavities) and traumatic injury are the main reasons for a tooth to require pulp therapy. Pulp therapy is often referred to as a "nerve treatment", "children's root canal", "pulpectomy" or "pulpotomy". The two common forms of pulp therapy in children's teeth are the pulpotomy and pulpectomy.

A pulpotomy removes the diseased pulp tissue within the crown portion of the tooth. Next, an agent is placed to prevent bacterial growth and to calm the remaining nerve tissue. This is followed by a final restoration (usually a stainless steel crown).

A pulpectomy is required when the entire pulp is involved (into the root canal(s) of the tooth). During this treatment, the diseased pulp tissue is completely removed from both the crown and root. The canals are cleansed, disinfected and in the case of primary teeth, filled with a resorbable material. Then a final restoration is placed. A permanent tooth would be filled with a non-resorbing material.