

THE CHILD HEALTH CONNECTION, INC.

6642 NILE COURT
ARVADA, COLORADO 80007
(303) 431-2446

DENTAL HEALTH AND SAFETY

Tooth decay is the number one dental problem among preschoolers, but it can be prevented. Starting children with good dental habits from an early age will help them grow up with healthy smiles. The following is important information on how to care for your child's teeth.

AGE APPROPRIATE DENTAL VISITS

- Recommendations are the first visit by the first birthday.
- Take your child for a dental checkup at least once a year. Some children will require more frequent visits due to increased risk of tooth decay, unusual growth patterns, or poor oral hygiene.
- Regular dental visits may help children stay cavity free, and can catch cavities early so that less invasive care is required.
- Professional teeth cleanings remove plaque build up on teeth that irritate gums and lead to tooth decay.
- Fluoride treatments renew fluoride content in tooth enamel and strengthen teeth, which helps prevent cavities. Children should receive proper amounts of fluoride based on the content in their local drinking water. Recommendation for supplementation should be provided by their dentist.
- It is recommended that parents examine children's teeth at least once a month by simply lifting the lip to look for decay on the outside and inside surfaces of the four upper front teeth. This is the most common area for decay. It takes less than a minute to check, and can alert parents to the need for dental care.

BABY TEETH ARE IMPORTANT

Tooth decay can develop as soon as the first tooth appears. It is important to care for your child's baby teeth because they act as placeholders for adult teeth. If baby teeth are lost too early, the teeth that are left may move and not leave enough room for the adult teeth to come in. Tooth decay in baby teeth can be painful and cause health problems like infections.

Good dental habits should begin before the first tooth appears. After feedings gently brush your baby's gums with water on a baby toothbrush that has soft bristles or simply wipe them off with a clean washcloth.

TODDLERS AND YOUNG CHILDREN

Many experts recommend using a fluoride-free toothpaste before the age of two, but check with your child's doctor or dentist first.

Many preschool age children have not yet developed the eye-hand coordination, or fine motor skills needed to complete the complex task of tooth brushing. Generally speaking, the younger the child the more assistance will be required from parents or caregivers.

- Children's teeth should be brushed twice daily. The best times are after breakfast and before bedtime.
- Encourage brushing on their own, but young children should always be supervised during tooth brushing.
- Use an age appropriate toothbrush. There are brushes designed to address the different needs of children at all ages, which helps parents select a toothbrush that is appropriate for their child.
- When fluoride toothpaste is used, a pea-sized amount or less is all that is needed, and smear the paste into the bristles. Swallowing too much fluoride toothpaste can make white or brown spots on your child's adult teeth. If your child does not like the taste of the toothpaste, try another flavor or use plain water.
- Floss: You can begin flossing your child's teeth as soon as 2 teeth touch each other. However, not all children need their teeth flossed at this age, so check with your dentist first.
- Toothbrushes should be replaced every 4-6 months or sooner if bristles become splayed.

NUTRITION AND SNACKING

To achieve a balanced diet, children should eat a variety of foods from the major food groups. A well-balanced diet allows teeth to develop properly and gums to remain healthy, providing proper support for the teeth.

Snacking should be limited to no more than twice per day. In addition to providing healthy snacks it is important to alternate snack choices and incorporate variety, moderation and balance. Offering children water for rinsing their mouths after snacks when brushing is not possible may reduce the cavity causing effect of snacking. Rinsing with water helps to remove food particles from teeth, thus helping to prevent cavities.

Other factors to consider:

- The time food remains in the mouth: Hard candy and things such as breath mints stay in the mouth a long time. This leads to extended acid attacks on the teeth.
- Physical characteristics of food: Raisins, cookies, dried fruits and cereal tend to stick to teeth, prolonging the acid attack.
- Time of day: Carbohydrates or starches eaten as part of a meal are less dentally harmful than if eaten alone. High starch foods include breads, crackers, pasta, and such snacks as pretzels and potato chips. Foods eaten just before naptime may stay on the teeth throughout the nap.
- What is eaten along with foods: Research indicates that certain foods such as a cheese may help counter the effects of the acids produced by bacteria in plaque. Cheese stimulates the production of saliva, which helps to clear the carbohydrates and harmful acids from the mouth.
- Hidden sugars: Age-appropriate raw fruits and vegetables are always nutritional snack choices. Although foods such as milk, fruits and vegetables contribute to strong bones and healthy teeth and gums, even they can lead to tooth decay in the absence of good oral hygiene. Most fruits and many vegetables as well as milk have naturally occurring sugars.
- Do not put your child to bed with a bottle: This is of utmost importance when milk or juice is involved because these liquids contain natural sugars that remain in the mouth and encourage tooth decay.
- Avoid allowing children to sip drinks that have sugar and acid, like juices, sports drinks, flavored drinks, lemonade, soda pop, or flavored teas.
- Many municipalities require tap water to be fluoridated; however, other communities have no such regulations. If the water supply in your area is not fluoridated, or if your family uses purified water, ask your dentist for fluoride supplements. Even though most toothpaste contains fluoride, toothpaste alone will not fully protect a child's teeth.

Although dental research has resulted in increasingly sophisticated preventative techniques, including fillings and sealants that seep fluoride, a dentist's care is only part of the equation. Follow-up at home plays an equally important role. Parents must work with children to teach good oral health habits.

The following is taken from the third edition of "Caring For Our Children," and is considered best practice/policy for childcare centers that include daily tooth brushing in their facilities.

STANDARD 3.1.5.2: Toothbrushes and Toothpaste

In facilities where tooth brushing is an activity, each child should have a personally labeled, age-appropriate toothbrush. No sharing or borrowing should be allowed. After use, toothbrushes should be stored on a clean surface with the bristle end of the toothbrush up to air dry in such a way that the toothbrushes cannot contact or drip on each other and the bristles are not in contact with any surface (6). Racks and devices used to hold toothbrushes for storage should be labeled and disinfected as needed. The toothbrushes should be replaced at least every three to four months, or sooner if the bristles become frayed (2-4,6). When a toothbrush becomes contaminated through contact with another brush or use by more than one child, it should be discarded and replaced with a new one.

If toothpaste is used, each child should have his/her own labeled toothpaste tube. If toothpaste from a single tube is shared among the children, it should be dispensed onto a clean piece of paper or paper cup for each child rather than directly on the toothbrush (1,6). A pea-sized amount should be used for each brushing. Toothpaste should be stored out of children's reach.

When children require assistance with brushing, caregivers/teachers should wash their hands thoroughly between brushings for each child. If children have bleeding gums, caregivers/teachers should wear gloves when assisting such children with brushing their teeth.

RATIONALE: Toothbrushes and oral fluids that collect in the mouth during tooth brushing are contaminated with infectious agents and must not be allowed to serve as a conduit of infection from one individual to another (6). Individually labeling the toothbrushes will prevent different children from sharing the same toothbrush. As an alternative to racks, children can have individualized, labeled cups and their brush can be stored bristle-up in their cup. Some bleeding may occur during tooth brushing in children who have inflammation of the gums. In child care, saliva is considered an infectious vehicle if it contains blood, so caregivers/teachers should protect themselves from exposure to blood in such situations, as required by standard precautions. The Occupational Safety and Health Administration (OSHA) regulations apply where there is potential exposure to blood.

COMMENTS: Children can use an individually labeled or disposable cup of water to brush their teeth (6).

Dental Health - 5

Toothpaste is not necessary if removal of food and plaque is the primary objective of tooth brushing. However, no anti-caries benefit is achieved from brushing without fluoride toothpaste.

Some risk of infection is involved when numerous children brush their teeth into sinks that are not sanitized between uses.

Toothbrushing ability varies by age. Preschool children most likely will require assistance. Adults helping children brush their teeth not only help them learn how to brush, but also improve the removal of plaque and food debris from all teeth (5).

TYPE OF FACILITY: Center; Large Family Child Care Home; Small Family Child Care Home

Resources:

American Academy of Pediatrics. *A Guide To Children's Dental Health* (Updated November 30, 2012). www.healthychildren.org.

Centers for Disease Control and Prevention. Division of Oral Health (Updated August 30, 2012). *Children's Oral Health*. www.cdc.gov/oralhealth

The Child Health Connection, Inc., *Dental Health and Safety*. (October, 2009).

Caring For Our Children, Third Edition (August, 2011). *Standard 3.1.5.2: "Toothbrushing and Toothpaste."* www.nrckids.org/cfoc3

