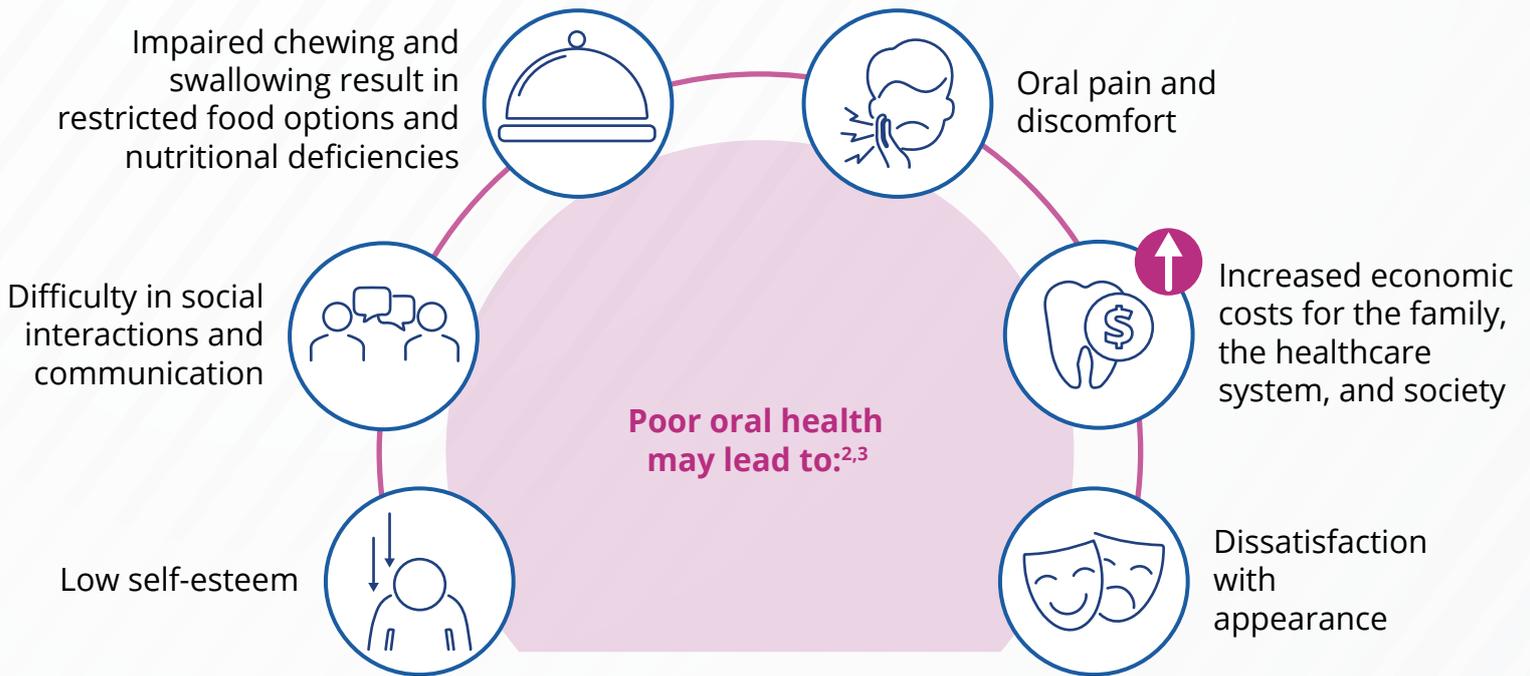


Laying the Foundation of Oral Health in Children

An overview of good oral hygienic practices in children from birth to 12 years of age

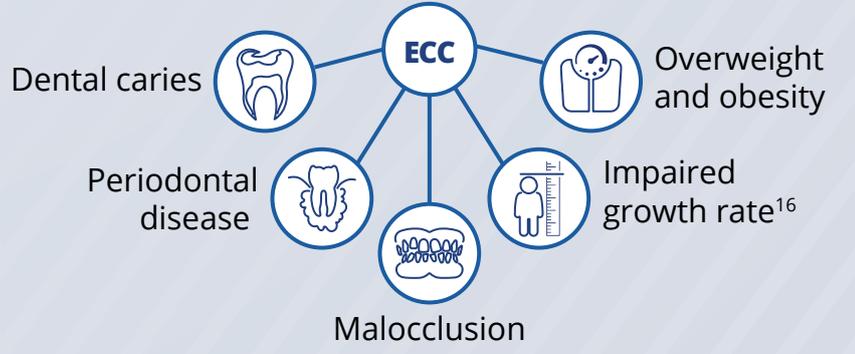
Oral health has a profound impact on overall health, well-being, and quality of life¹



Dental problems in early childhood significantly affect:⁴

-  Oral health of children
-  Health of permanent teeth that erupt later
-  Quality of life for both children and their families

Early childhood caries (ECC) severely impact the oral health and overall well-being of young children⁴ and is a common health concern worldwide⁵



Maintaining good oral health in childhood is a key factor in improving lifetime oral health⁴

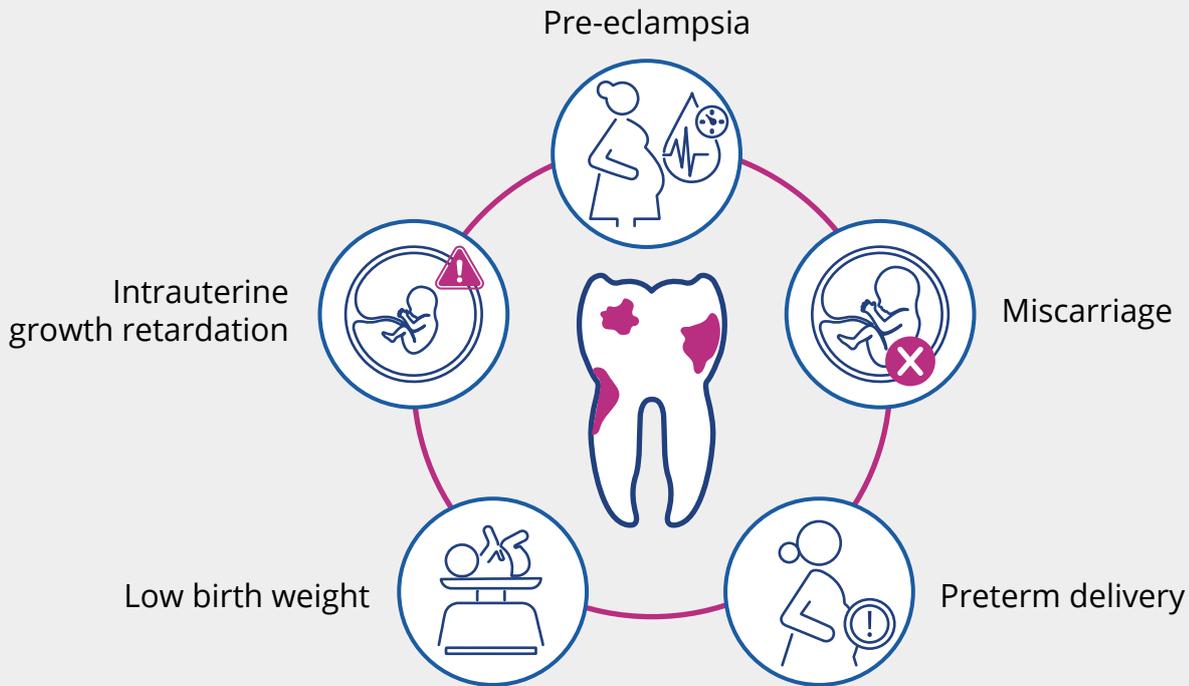
Maintaining prenatal oral health

Why it's important



The incidence of gingivitis increases during pregnancy due to accompanying hormonal changes; gingivitis may eventually progress to periodontitis⁶

Periodontal disease during pregnancy is associated with adverse outcomes such as:^{6,17}



Improved maternal oral hygiene during pregnancy⁵



Improved oral health in children



Reduced rates of ECC

How can it be done?⁶



Prenatal counselling



Brushing twice daily with fluoride toothpaste



Daily rinsing and flossing



Dental consultation before delivery

Maintaining a child's dental health

How it can be done⁷



Frequent dental appointments



Healthy dietary habits



Brushing behaviour



Use of stannous fluoride¹⁹

Recommendations for oral health care

0 to 2 years^{8,9}



- ✔ Clean the infant's gums with a moist cloth after feeding
- ✔ Do not put the infant to bed with a bottle
- ✔ Wean the infant from the bottle if it is bottle-fed
- ✔ Check the infant's gums regularly
- ✔ Schedule the first dental appointment as soon as the first tooth appears
- ✔ Brush the infant's teeth twice a day with a small amount of toothpaste (equivalent to a grain of rice) containing 1,000 ppm fluoride¹³

2 to 6 years^{8,10}



- ✔ Brush the child's teeth twice a day with a pea-sized amount of toothpaste¹³
- ✔ Supervise brushing until at least the age of 7 years¹³
- ✔ Use a toothpaste containing 1,000 ppm fluoride. Higher fluoride concentrations may be considered for children with a higher caries risk¹³
- ✔ Check the child's gums and teeth regularly
- ✔ Take the child for regular dental check-ups every 6 months
- ✔ There is scientific evidence to recommend oscillating-rotating electric toothbrushes to paediatric dental patients^{14,18}

7 to 12 years^{11,12}



- ✔ Supervise brushing until at least the age of 7 years¹³
- ✔ The child can start flossing or using an interdental toothbrush once a day
- ✔ Rinse the child's mouth with water, between snacks and meals
- ✔ Avoid giving sugary foods and drinks
- ✔ Continue dental check-ups every 6 months
- ✔ There is scientific evidence to recommend oscillating-rotating electric toothbrushes to paediatric dental patients^{14,18}
- ✔ Use a toothpaste with a fluoride concentration of 1,450 ppm of fluoride¹³

Role of electric toothbrushes in paediatric dentistry

Use of electric toothbrush¹⁵

- ✔ Improvement in plaque index score among children aged 2 years
- ✔ Improvement in score remains consistent (from 2 to 17 years of age)
- ✔ Reduced plaque index score among non-orthodontic patients
- ✔ Reduction in plaque from day one

Effective communication between dental professionals and parents¹⁶

- Parents strongly influence the interaction between dental professionals and the child
- Hence, their communication with the dental professional and a working alliance is pivotal for the child's participation in dental care
- Child's age and level of cooperation impact how dental professionals communicate with both the child and their parents

Advantages

- Improved parental and child satisfaction
- Increased adherence to treatment
- Improved health outcomes

Role of teledentistry¹⁷

- Initial or emergency check-ups are accessible to all, although in-person visits are necessary for treatments or prescriptions
- Dental professionals can convey preventive advice to the parents before the assessment
- Parents of children suffering from soft tissue conditions can be quickly reassured
- Upon receiving a referral, clinicians can immediately arrange further investigations
- Clinicians can build a rapport with patients, thereby reducing pre-appointment anxiety
- Housebound patients can easily seek consultation
- Prioritisation of patients can be done without in-person consultation

Advantages

- Enables face-to-face appointments
- Improves patient experience
- Reduces waiting time
- Economical
- Decreases travel and time off work and/or school
- Bridges rural-urban gap
- Maximises patient safety (amidst situations like the COVID-19 pandemic)



Introducing and following dental care practices from birth can improve the overall well-being of young children and lay the foundation for good dental health

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