

Handouts & Anticipatory Guidance

Handouts for Parents/Caregivers



The information/handouts enclosed in this sleeve were developed as part of the **Help Me Smile Project**--an early childhood oral health risk assessment pilot project sponsored by the Ohio Department of Health (ODH) through funding provided by the U.S. Department of Health and Human Services, HSRA, MCH Bureau. Through this project, a curriculum, assessment and training module was developed to address the serious problem of Early Childhood Caries (ECC). The curriculum will be used by home visitors and WIC program staff throughout Ohio.

For more information, contact Ms. Shannon Cole, ODH, Bureau of Oral Health Services at 614-466-4180.

The Facts about Baby Bottle Tooth Decay

What does Baby Bottle
Tooth Decay look like?



You may
notice this



but
it could
look like this



Who gets Baby Bottle Tooth Decay?

- Babies around 12 – 18 months old



What causes Baby Bottle Tooth Decay?

- It is most often caused by letting babies fall asleep with a bottle filled with milk, formula, soda pop, juice, or anything other than plain water.
- These sweet liquids attack the baby's teeth, causing lots of decay.

Remember, habits are hard to break, so decide now never to use the sleeptime bottle.

This was developed through a grant from the Bureau of Maternal and Child Health, U.S. Department of Health and Human Services to the Ohio Department of Health.

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You can prevent
Baby Bottle Tooth Decay

and have a happy, smiling baby like this.



Don't put your
baby to sleep
with the bottle



Hold your baby
while feeding

Teach your baby healthier ways to settle down to sleep.



Rock baby



Use a mobile or music box



Use a clean pacifier



Use a soft toy

Los Hechos Acerca De Las Caries Dentales a Causa del Biberón o Tetero

¿A qué se parece las caries dentales
a causa del biberón o tetero?



Puede que note
esto



pero podría
parecerse
a esto.



¿Quién tiene caries dentales a causa del biberón o tetero?

- Bebé que tienen alrededor de 12 a 18 meses de edad.



¿Qué causa las caries dentales a causa del biberón o tetero?

- Muy frecuentemente es causada por dejar que los bebés duerman con el biberón o el tetero lleno de leche, fórmula, soda o gaseosa, jugo o cualquier otra cosa que no sea agua pura.
- Estos líquidos dulces atacan los dientes del bebé, causando muchas caries.

**Recuerde, los hábitos son difíciles de romper,
así es que decida ahora, nunca usar un biberón
o un tetero para hacer dormir al bebé.**

**PARA PREVENIR
LAS CARIES DENTALES
A CAUSA DEL BIBERÓN O TETERO**

y tener un bebé feliz y sonriente como este.



No haga dormir
a su bebé con el
biberón o tetero.



Sostenga a su
bebé mientras
lo está alimentando.

Usted le puede enseñar a su bebé formas más saludables de prepararse para dormir.



Arrulle al bebé



Use un juguete suave o animal de pelusa



Use un juego mobil o música



Use un chupón limpio

FLUORIDE

- Makes teeth stronger and protects them from tooth decay.
- Is found naturally in water and some foods.
- Is added to many community water systems (tap water) when there isn't enough natural fluoride.
- Is also available through drops, tablets, gels, toothpastes, mouth rinses, and varnishes.
- Ask your doctor or dentist which type of fluoride is right for you and your family.



BRUSHING AND FLOSSING TEETH

- Brush teeth two times a day to remove plaque.
- Brush for two-three minutes reaching all teeth.
- Brushing should be supervised by an adult until the child is 6-8 years old.
- Floss once a day – starting at age 8 with adult assistance.
- Replace toothbrush when bristles are frayed.
- Wipe the gums of infants with a wet cloth after each feeding.



SPOTS ON TEETH

WHAT DOES TOOTH DECAY LOOK LIKE?

- **White spots** on teeth are the first sign of tooth decay. They look chalky and white and are found near the gums where plaque forms. These spots can be reversed if they are brushed and kept clean. Early cavities are not the only white spots that can be found. A dentist can tell the difference between early decay and white spots that are not health problems such as those that are from too much fluoride.
- If the teeth are not brushed and taken care of then the **white spots** will turn in to **brown spots** on the teeth. This is more advanced tooth decay. Any brown spot is not normal and should be checked by a dentist. Just because the brown spot doesn't hurt, doesn't mean it's not a cavity.



NUTRITIOUS SNACKS

Meal and snack choices can play a big part in the health of your teeth.

Between meals, help control plaque, bacteria and acids by:

- Eating healthy, low-sugar snacks
- Limiting how often snacks are eaten
- Avoiding sweets that stick to the teeth



DENTAL HOME

A dental home is an office or clinic where you and your family feel

welcome and have formed a relationship with the dentist and feel

comfortable receiving dental care on a regular basis.

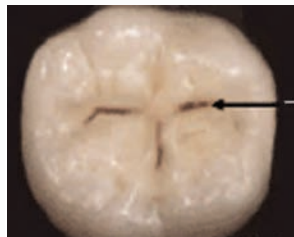
The staff at your dental home . . .

- Checks your teeth
- Keeps teeth healthy and attractive
- Gives advice on oral health issues
- Provides current information on the condition of your family's gums, teeth, and bite



TOOTH DECAY OR CAVITIES

- The most common type of cavity starts in the grooves of the back teeth which cannot be completely cleaned by brushing, but where food usually sticks. Cavities also start on smooth surfaces that can easily be brushed and flossed.
- When it comes to cavities, how often sugary foods are eaten is more important than the amount eaten. Changing the diet to decrease how often sugar is eaten is very important.
- Plaque + food + teeth = cavity or decay.



PLAQUE

- Cavity-causing bacteria live in plaque.
- Plaque is a soft, yellow-white, sticky material found on teeth and gums.
- Plaque irritates the gums and causes tooth decay.
- Daily brushing and flossing removes the plaque and helps keep teeth and gums healthy.
- If plaque is not removed from the teeth daily, the gums become red, soft and swollen and bleed easily during tooth brushing.



EARLY CHILDHOOD CARIES

- Tooth decay on the top front teeth of an infant or small child is called Early Childhood Caries. This decay may look like white spots, dark pits, holes or broken teeth and may be painful making it hard for your child to eat.
- Protect your child's teeth by following a few important steps -

Your Child SHOULD:

- Go to bed without a bottle. If they must have a bottle, then only fill with water.
 - Start using a cup at six to nine months and be weaned from the bottle at age one.
 - Suck a clean, non-sugary pacifier, if this is the child's habit.
- Console your child:
 - Rock before laying him/her down to sleep.
 - Give a soft toy or blanket for snuggling.
 - Use a mobile or music box to soothe.



TEETHING

When baby teeth are about to come in, the child may:

- Drool constantly
- Put fingers and hands in the mouth
- Be very restless while sleeping
- Be irritable and fussy
- Have a runny nose and slight fever

Gums will be sore, tender and swollen near the area of the tooth coming in.

To comfort, allow child to chew on:

- Cold, wet washcloth
- Teething ring – cold
- Frozen bagel

IF YOUR BABY HAS A HIGH FEVER, DIARRHEA AND/OR VOMITING THEN THEY HAVE SOME TYPE OF ILLNESS.



TOOTH INJURIES AND PREVENTION

If a dental injury occurs:

- Find tooth- Do not try to put a baby tooth back in the child's mouth.
- Control bleeding by applying firm but gentle pressure to the area.
- Comfort the child.
- Take the child and the tooth to dentist.
- If a permanent tooth is knocked out, gently replant the tooth into its socket. Have the child hold it in place with a tissue. If it's not possible to replant the tooth, place it in a glass of cool skim or low-fat milk and see your dentist immediately. To prevent mouth injuries, follow all safety precautions for children's toys and equipment.

To prevent mouth injuries to your child:

- Do not leave him/her unattended.
- Do not purchase or let him/her use a walker.
- Install safety gates on stairs.
- Encourage use of bicycle helmet when riding toys and bikes.
- Have emergency number of doctor/dentist easily available.



SHARING GERMS

If the caregiver has much dental decay, he/she usually has high levels of *Streptococcus mutans* which cause tooth decay. This germ passed from caregiver or family members to the child can cause tooth decay.

Family Members SHOULD NOT . . .

- Clean child's pacifier with their mouth
- Share spoons or forks
- Pre-chew child's food
- Share toothbrushes
- Share cups or bottles

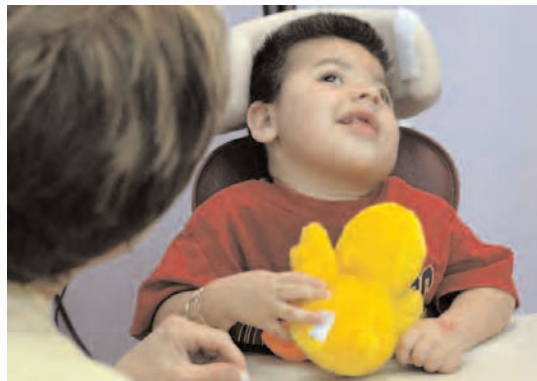
Take these steps to help stop the spread of tooth decay.



MEDICATIONS

SUGARY MEDICINE AND CHILDREN WITH SPECIAL HEALTH CARE NEEDS

- Children who must take sugary medicine often have more tooth decay.
- Children with special needs have more oral health problems and it may be more difficult to clean their teeth.
- It is important to provide good oral health care every day and consult a dentist who is trained and willing to see your child with special health care needs.





Smiles for Ohio Fluoride Varnish Program

Well Child Care Prompts for the Primary Care Provider

Year One:

4 MONTHS

- No bottle propping
- Determine water fluoride level
- Don't share germs
- Clean gums with a clean damp cloth after each feeding

6 - 9 MONTHS

- Oral Development: first tooth; teething; look for white spots, caries or defects
- Oral Hygiene: Good/Poor? Brush beginning with first tooth by parent with starter brush (2 x day)
- Fluoride: systemic beginning at 6 months; no need for fluoride toothpaste
- Diet: discuss weaning from bottle by 12 months; never sleep with bottle
- Oral habits (thumb sucking, use of pacifier) are all acceptable
- Dental visit by age 1 or within 6 months of first erupted tooth

Year 2

12-24 MONTHS

- Oral Development: discuss occlusion and spacing; look for white spots, caries or defects
- Oral Hygiene: Good/Poor? Parent still brushes teeth
- Fluoride: re-evaluate water fluoride level/need for supplements; at age 2 introduce use of fluoridated toothpaste; use pea-sized amount or less
- Diet: discard bottle; encourage healthy snacks; sugar control; sippy cup
- Oral habits (thumb sucking, use of pacifier) are all acceptable
- Dental visit in last 6 months?

Year 3

24-36 MONTHS

- Oral Development: look for white spots, caries or defects
- Oral Hygiene: Good/Poor? Child can try brushing with supervision but parent still brushes teeth
- Fluoride: re-evaluate sources and need; monitor use of F toothpaste; pea-sized amount
- Diet: encourage healthy snacks; sugar control; sippy cup
- Oral habits: begin to wean from thumb and pacifier
- Dental visit in last 6 months?

From: Casamassimo P. Caring for children from birth to three years of age. Presentation to safety net dental clinics in Ohio.
Douglass et al. Infant oral health education for physicians. *Pediatr Dent* 2005; 27(4): 284-91.