



SPECIAL CARE

An Oral Health Professional's Guide to Serving Young Children with Special Health Care Needs

Focus on the Basics

Oral Hygiene

Begin cleaning a baby's gums with a soft baby toothbrush and water after feedings, even before the baby has teeth. This can also help babies who are sensitive to touch.

Begin cleaning a baby's teeth as soon as you see the first tooth, usually around age 6 to 10 months.

Use a soft baby toothbrush that is easy to hold and small enough to fit in the baby's mouth. Lift the lips to brush the front and back of the teeth and at the gum line.

Brush a baby's or child's teeth two to three times a day. The best time to brush is after eating, particularly if the baby or child takes liquid medications high in sugar.

Brushing before bed is most important. Don't give the baby or child anything to eat or drink (except water) after brushing at night.

For babies and children under age 3, beginning as soon as the first tooth erupts, parents should brush the baby's or child's teeth twice daily using a soft toothbrush that is an appropriate size for the baby's or child's age. Parents should dispense a "smear" of fluoridated toothpaste on the bristles of the toothbrush. For children ages 3 through 6, parents should brush the child's teeth or supervise brushing twice daily using a soft toothbrush that is an appropriate size for the child's age. Parents should dispense a "pea-size amount" of fluoridated toothpaste on the bristles of the toothbrush.

Oral Health Care

All babies and children should be referred to a dentist 6 months after you see the first tooth or by age 12 months (whichever comes first). Your primary care provider (for example, pediatrician, family physician, nurse practitioner) may be able to help you find a dentist in your area who cares for children with special health care needs.

Children with special health care needs may need to visit a dentist every 2 to 3 months or more often.

Special Problems

Children with special health care needs may have the following problems. If your child has one or more of these problems, talk to your dentist.

Dry Mouth

Some diseases cause dry mouth. Some medications also cause dry mouth. If a child has dry mouth, he might not eat enough, and he might have a hard time swallowing. Or he might keep food in his mouth and not swallow it. Dry mouth can also lead to tooth decay, gum disease, and oral infections.

Medications

Many medications may cause dry mouth. Medications high in sugar may stick to the teeth, which can lead to tooth decay. Some seizure medications cause enlarged gums. Aspirin or other pills left to dissolve in the mouth can create acid that leads to tooth decay. Rinsing the mouth or brushing the teeth after taking medications can help.

Bad Breath

Poor oral hygiene, gum problems, and dry mouth can cause bad breath. Digestive problems and sinus problems can also cause bad breath, and so can certain medications.

Tooth Grinding

Grinding or gnashing of teeth usually happens at night but can happen any time. This can lead to wear on the teeth, flat tooth surfaces, headaches, pain, and gum disease. Sometimes no treatment is necessary or possible. If the habit is not outgrown, oral appliances made by a dentist may be helpful.