June 2006 Alameda Sun Newspaper Healthy Teeth Make Happy Smiles Part 2

Many parents are well aware of the fact that teaching children to properly care for their teeth can set the stage for a lifetime of good dental health. What most parents may be surprised to learn, however, is that their own state of mouth and dental well-being may impact on their children's dental health – even before they are born.

Every mouth, even one filled with sparkling white teeth and firm, pink gums, harbors millions of bacteria. Some good bacteria aid in digestion, some bad bacteria can lead to tooth decay and gingivitis – inflammation and infection of the gums. The first exposure a child gets to the bad bacteria that can impact their own dental future is in utero. That is because these bacteria like to travel and don't just hang out in mom's mouth. (In fact increasing evidence is pointing to the fact that the same bacteria that cause gingivitis may also be implicated in the inflammation process that can lead to preterm labor and low-birth weight.)

What happens in your mouth does not always stay in your mouth; and pregnant women may be unwittingly passing along a legacy of dental problems unless they adhere to the good dental practices of routine brushing, flossing and dental exams.

After the baby is born, there are more opportunities to pass on dental troubles. Maybe some us know family members who clean their baby's pacifier with a quick swipe through their own mouths – sounds yucky, but it does happen and it does spread germs.

What Karen Taniguichi, D.D.S, and Sharine Thenard, D.D.S., both dental practitioners in the offices of Alameda Pediatric Dentistry, want parents to know is that the focus should not be on "drill and fill" but rather on " prevent and maintain"– and that means from the very youngest ages. It is a whole family effort that protects dental health and saves money.

Traditionally, pediatricians have recommended that parents schedule first dental visits when children are preschoolers. However, Drs. Taniguichi and Thenard stress that, "age three may be too late," and that serious dental concerns may have already taken root several years before children are ready to enter school. There is good news, though. Dentists and pediatricians are joining forces to educate, and even provide preventative dental treatment to their youngest patients.

A new state sponsored initiative, *12345 first smiles*, part of the *First5Oralhealth Program*, is reaching out to health professionals – stressing the importance of early dental education for new parents and providing physicians with the tools to begin early dental care. Pediatricians, and other health care professionals, are encouraged to provide an oral health assessment for children as young as six months, or as soon as teething begins. Family doctors focus on referring children for dental care at the first signs of dental problems, educate parents on whole family dental health, and are even trained to apply dental varnish to their infant and toddler patients. Here in Alameda, the physicians of Bayside Medical Group have taken advantage of this support from the *12345 first smiles* program. According to Bud Shenkin, M.D., the pediatric practice provides new parents with the handout **Your Child's Teeth: Making That Smile Spectacular**, which details dental health facts and tips from birth through age two and up. In addition, doctors introduce families to the basics of good dental care at six months of age. Dr. Shenkin is glad that the Bayside Medical Group is "working hand in glove with pediatric dentists," to help assure an early start to good dental health habits.

Of course, teaching children good dental habits early on is one of the absolutely most effective strategies to assuring years of dental health. Here in Alameda, no one is more dedicated to that premise than Orthodontist, Dr. Barrett Parker is. For years, Dr. Parker has spearheaded the Alameda City Dental Group effort, which provides free dental education programs to all second graders in Alameda Public Schools. Dr. Parker and participating volunteer dentists demonstrate proper brushing technique, provide models of tooth development, and focus on healthy diet habits as the basis of sound dental health. Noting that, "Second graders are getting smarter," Dr. Parker's group emphasizes the importance of maintaining the health of baby teeth, which play a crucial role in preserving space for adult teeth. According to Dr. Parker, "Second graders can comprehend what causes decay, can make nutrition decisions, and can understand the cause and effect of the tooth brushing process."

Dr. Parker wants families to know, however, that waiting until the second grade to begin good dental habits is definitely not recommended. Ideally, all children should be 18-24 months old for their first dental exam. He echoes the emphasis that the oral health of a baby's mouth reflects that of the baby's parents and caregivers. "Families actually share common oral bacteria. The better the oral hygiene of the parents/caregivers, the better the oral hygiene of the children." And although it may mean less business for him, he emphasizes that focus on the health of baby teeth can help assure that good tooth alignment will reduce the need for his orthodontic services.

All these professionals involved in the various aspects of childhood dental health can agree on one indisputable premise: If you want kids to learn at school they need to be healthy - and if you want kids to be healthy they need to be educated. Good dental health is the cornerstone of physical wellbeing, positive behavior in school and good school attendance. Putting the spot light on early and whole family dental health education, evaluation and treatment in the pediatrician's office, in the dentist's chair and in the school environment can set the stage for a positive childhood learning experience, lower absentee rates, and better financial health for the entire school district, which benefits all students and their families – critical connections which should not be underestimated.

Additional Information

February is National Children's Dental Health Month but, as we have learned, maybe Whole Family Dental Health Month would be a better moniker. For more information on the *12345 first smiles* and *first5oralhealth* programs see <u>www.first5oralhealth.org</u>.

Definition of Terms

Dental Sealant – A plastic professionally-applied material that is put on the chewing surfaces of back teeth to prevent cavities. Sealants provide a physical barrier so that cavity-causing bacteria cannot invade the pits and fissures on the chewing surfaces of teeth. Sealants are typically applied to teeth following the eruption of permanent molars at the age of six years and again at about age twelve. About two-thirds of dental decay occurs on chewing surfaces with pits and fissures.

Fluoride Varnish – Is a liquid applied directly to a child's baby teeth with a brush or applicator from the time of first eruption (usually six months) until the age of three. The varnish dries and adheres to the tooth surface for several hours and in the process actually penetrates the enamel. The procedure takes 1-4 minutes, can be preformed by trained health professionals, and costs about one dollar per use.

For more information see <u>www.cdc.gov</u> and <u>www.sciencedaily.com</u>.