Prevention First: Oral Health Care for Your Kids Big and Small

Oral Health Advice From Your Dental Hygienist
For Kids Ages 0 to 9
Oral health is about much more than a beautiful smile and should start from birth!

Maintaining your child’s oral hygiene means he or she can enjoy:
- Normal facial development and a natural face shape
- A varied diet, as recommended, with the ability to chew properly
- Optimum language development
- Healthy growth patterns
- High self-esteem

Your dental hygienist and this brochure can help you give your child much more than a beautiful smile!

It contains invaluable advice and tips on:
- Teething and tooth development
- Nutrition
- Oral hygiene
- Visits to the dental hygienist
- Prevention
- Your concerns as a parent

Inside, you will also find The Top 20 tips from your dental hygienist for your child's oral health!
Oral Health is Vital to Overall Health at Any Age!
Tooth Development and Teething: A Fascinating Process!

A baby’s 20 primary teeth (baby teeth, milk teeth) are largely formed during pregnancy. At birth, they are already partially formed and calcified beneath the gums. They begin to erupt at around six months of age, and occasionally earlier or a few months later. While this process may be trouble-free in some children, for others, teething can lead to:

- Discomfort
- Refusal of food
- Pain
- Occasional fever

During this stage, babies tend to drool excessively and put their fists in their mouth. Symptoms may include:

- Crying
- Flushed cheeks
- Diarrhea
- Diaper rash
- Runny nose

Depending on the severity of the fever and/or diarrhea, it may be advisable to speak to your doctor or call Info-Santé, since these may be signs of unrelated health problems.
Teething Tips

Does your baby need soothing?

• Give your child a teething ring, chilled but never frozen, manufactured by a reputable company, or a clean, moist and cool washcloth.
• Gently massage the gums in a circular motion using a small, soft-bristle toothbrush.
• Gently rub or massage the gums with your finger (wash thoroughly first).
• Call Info-Santé if the symptoms are severe.

You must avoid:

• Teething syrups and cookies: they do not have the desired calming effect and contain sugar.
• Gels that numb the gums. These can be swallowed, causing numbness in the throat and affecting your child’s swallowing reflexes and digestion.
• Raw carrots or celery, since they present a choking hazard.
• “Teething” necklaces. A few years ago, Health Canada issued an advisory against these to prevent the risk of choking or strangulation.

Is it normal for a cyst to form when a tooth is coming in?
Right before a tooth erupts, a cyst or a blue blister may form on the gums. Generally, no treatment is needed. However, you should see a dentist if the tooth is taking longer than usual to break the surface, and the cyst grows larger and more painful.

What should I do if an adult tooth is coming in but the baby tooth it is replacing hasn't fallen out yet?
The primary tooth falls out when its root is dissolved with the eruption of the permanent tooth growing in its place. Wait and see. After a few days, ask your child to wiggle the tooth with his or her tongue, gauze or a tissue. Once the primary tooth has fallen out, the permanent tooth will grow in its place. You should see the dentist if the primary tooth has not fallen out, and the permanent tooth has grown in two thirds of the way.
The following is the typical order in which primary teeth erupt and fall out. This can vary from one child to the next, however.

Upper teeth
- Central incisor
- Lateral incisor
- Canine
- First molar
- Second molar

Lower teeth
- Second molar
- First molar
- Canine
- Lateral incisor
- Central incisor

<table>
<thead>
<tr>
<th>Primary teeth</th>
<th>Come in (age in months)</th>
<th>Fall out (age in years)</th>
</tr>
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<tbody>
<tr>
<td><strong>Upper</strong></td>
<td></td>
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</tr>
<tr>
<td>Central incisors</td>
<td>7 to 12</td>
<td>6 to 8</td>
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<tr>
<td>Lateral incisors</td>
<td>9 to 13</td>
<td>7 to 8</td>
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<tr>
<td>Canines</td>
<td>16 to 22</td>
<td>10 to 12</td>
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<tr>
<td>Primary molars</td>
<td>13 to 19</td>
<td>9 to 11</td>
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<tr>
<td>Secondary molars</td>
<td>25 to 33</td>
<td>10 to 12</td>
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<td><strong>Lower</strong></td>
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<tr>
<td>Secondary molars</td>
<td>20 to 31</td>
<td>10 to 12</td>
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<tr>
<td>Primary molars</td>
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<td>6 to 8</td>
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# Nutrition Tips

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<tr>
<th>From birth</th>
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<tr>
<td>• Breastfeeding is the feeding method <em>par excellence</em>. A mother’s milk contains all the nutrients needed for a child’s growth, and it has recognized beneficial properties for the immune system and for healthy facial structure development (bone and muscle). For more information on breastfeeding, or on choosing an appropriate pacifier or nipple if necessary, refer to the publication of the <em>Institut national de santé publique du Québec</em> (INSPQ): From Tiny Tot to Toddler: Practical guide for parents from pregnancy to age two.</td>
<td><strong>Avoid putting your baby to bed with a bottle, to prevent cavities and ear infections.</strong></td>
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<thead>
<tr>
<th>At six months</th>
<th>• Start introducing a trainer cup for drinking water or milk.</th>
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<tr>
<td></td>
<td>• To quench thirst, give your infant water regularly.</td>
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<td></td>
<td>• Avoid sugary drinks and juices, because they create an acidic environment that promotes cavities and enamel erosion.</td>
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<tr>
<th>At one year</th>
<th>• Between 12 and 14 months, gradually wean your child off the bottle.</th>
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<tr>
<td></td>
<td>• Since a trainer cup is merely a transitional cup, it should only be used for a few months at most. Try to get your child to drink liquids from an ordinary cup progressively.</td>
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<tr>
<th>After the age of one and for all other age groups</th>
<th>• Fresh fruits and vegetables and some cheeses make great snacks.</th>
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<tr>
<td></td>
<td>• Avoid sticky, sugary snacks between meals. If you do offer this kind of snack, it is preferable to do so after a meal, since the mouth produces more saliva then, which neutralizes cavity-causing bacteria.</td>
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</table>
Parents should be sure to maintain their own oral health. Among other things, studies have shown that toxins present when suffering from periodontal disease (disease of the gums or bones supporting the teeth) are linked to premature births or low birth weight. These infants have less resistance to infections and are more likely to be born with developmental or birth defects.

### Oral Hygiene Tips

#### During pregnancy

Parents should be sure to maintain their own oral health. Among other things, studies have shown that toxins present when suffering from periodontal disease (disease of the gums or bones supporting the teeth) are linked to premature births or low birth weight. These infants have less resistance to infections and are more likely to be born with developmental or birth defects.

#### From birth to six months of age

- Clean your baby's gums twice daily with a small, clean and moist washcloth.
- Prevent the transfer of cavity-causing bacteria by avoiding to share objects such as a spoon, your baby's bottle nipple, pacifier or a toy.

#### At six months

As soon as the first tooth appears, you can begin using a soft-bristle toothbrush for babies, with a small amount of toothpaste. Brush at least once per day, ideally before bedtime. Here are some suggestions for how to position yourself:

- Place your baby's back against your body;
- Lay your child on a flat surface;
- Rest your baby's head on your knees.

#### From one to three years of age

- Brush your child's teeth at least twice a day using a small, soft-bristle toothbrush.
- Use a leading-brand flavoured fluoride toothpaste for kids.
- Encourage children to hold brush themselves and do brushing motion, since they are observant and keen to imitate. You must nonetheless finish brushing for them.
- Brushing should also follow every meal and every sweet or sticky snack.
- Brushing alone is not enough to clean in between teeth, where cavities can form. As such, you should floss between teeth once a day.
- Pacifiers should only be used for naps and at bedtime.

### How much fluoride toothpaste should I use for my child?

When the first tooth comes in: A tiny, paper-thin dab or smear.

At one year of age: No more than the size of a grain of rice.

After age three: A pea-sized amount.
### From three to four years of age

- Let your child brush on his own, then finish up the brushing to ensure all teeth are cleaned properly.
- If necessary, use incentives to encourage brushing, such as:
  - Being a role model by brushing your teeth at the same time;
  - Brushing to the tune of a song that is easy to hum;
  - Using a timer or an hourglass set to two minutes;
  - Following a brushing calendar with stickers.
- Floss between your child’s teeth once a day. Dental floss holders can also be handy.

### From five to nine years of age

- At around age six, the first four permanent molars coming in behind the primary molars (in the four corners of the mouth) require close attention during brushing. These teeth are “key” to your child’s adult tooth development. He now has 24 teeth as opposed to 20!
- Help your child learn the technique of flossing and develop his autonomy. He will need your help for this until he has developed the fine motor skills needed to do so. The earlier your child begins flossing, the better his dexterity will be and the quicker this excellent habit, vital to his dental health, will become part of his daily routine.
- Include the tongue brushing to his daily oral hygiene.

### For all age groups

- Since most children medicines contain a lot of sugar, we recommend rinsing your child’s mouth and cleaning his teeth after taking the medication.
- Wash your hands before and after toothbrushing.
- Replace toothbrushes at least every three months, or as soon as bristles become bent or flattened from use.
- Rinse brushes thoroughly after use and make sure they air dry without coming into contact with other brushes.
- Microorganisms can become lodged in between or at the base of the bristles, so replace brushes contaminated after a high fever or contagious illness.
- Help your children to brush since they don’t develop the required fine motor skills until about age six, and sometimes even eight! Parental supervision is also required to ensure children do not swallow toothpaste.
- All fluoridated products (toothpaste, mouthwash and gels) must be kept out of reach of children.
## Tips for Those All-important Visits to the Dental Hygienist!

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Instructions</th>
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<tr>
<td>From birth to one year of age</td>
<td>Have your child stick out his tongue to check that it moves properly. The frenum beneath the tongue is very strong in some children and can hinder their ability to learn to eat or speak. If necessary, speak to your dental hygienist, dentist or doctor.</td>
</tr>
</tbody>
</table>
| From one to three years of age                | The baby’s first visit should be around age one, or about six months after the first baby tooth comes in:  
  • To look at how your child’s mouth and teeth are developing;  
  • To check his oral habits including breathing, swallowing and speaking;  
  • To assess his risk for developing cavities;  
  • To determine the frequency of future visits;  
  • To get informed about daily oral health care. |
| From three to four years of age               |  
  • Follow-up visits should be scheduled every 6 to 12 months, according to your child’s needs. Opt for morning appointments, because children are well rested then. Storybooks or role playing can help prepare children for their visits.  
  • Preventive visits mainly involve:  
    • Cleaning the teeth;  
    • Professional application of topical fluoride (gel or polish);  
    • Personalized advice from the dental hygienist;  
    • Planning any treatments required based on the dentist’s examination. |
| For all age groups                            |  
  • Bring your child in right away if you suspect a problem or if your child has an accident, such as suffering a blow or fall that causes a tooth to fall out or break.  
  • X-rays may be required in order to:  
    • Detect cavities between teeth that are not visible to the naked eye early;  
    • Check whether a cavity has reached the nerve of the tooth and is causing an abscess to form;  
    • See if any teeth are missing;  
    • Monitor the development and alignment of adult teeth;  
    • Determine whether permanent teeth have enough room to grow. |
Sealing pits and fissures: A wise choice
Food particles and bacteria can easily become trapped in grooves on chewing surfaces, promoting cavity formation. As soon as the first permanent molars begin to grow in (around age six), and depending on their shape, the use of a sealant may be advisable. Easily applied with no anesthesia, sealants fill grooves and cracks. Together with good oral hygiene, sealants can prevent cavity formation on chewing surfaces. They may also be recommended for:
• The second permanent molars, which come in around age 12;
• Primary molars, which only fall out around 10 to 12 years of age;
• Permanent premolars that replace primary molars.

Mouthguards: Playing smart
Mouthguards are recommended for any sport with a high risk of falls or blows, and are custom-made at a dental office based on an impression of the teeth. They:
• Reduce the risk of concussion;
• Reduce the risk of fracturing the jaw or teeth;
• Lessen the severity of mucosal injuries to the mouth;
• Ensure a secure, comfortable fit.

The benefits of fluoride
Much like calcium, surface fluoride occurs naturally in the teeth and bones and is mostly effective once teeth begin to come in. Applying small amounts of fluoride regularly and directly to the teeth is beneficial. Fluoride mainly helps prevent the formation of cavities:
• By stopping bacterial activity and the demineralization process;
• By promoting the remineralization of the enamel.

Since food alone does not provide enough fluoride to meet our daily needs, other possible sources include:
• Tap water: 3% of Quebec residents consume fluoridated water;
• Bottled water: Check the label for the product’s fluoride content;
• Toothpaste bearing the Canadian Dental Association logo;
• Topical fluoride applied by a dental professional twice or more per year;
• Therapeutic fluoride gel or mouthwash, which can be a supplementary preventive measure but should only be used after age six and only when recommended by a health professional;
• Fluoride supplements, which may also be recommended by a professional.

While fluoride has numerous benefits, it also has its limitations. Preventing tooth decay is also dependent on a healthy diet and good oral hygiene.
Tips and Answers to Your Questions

Up to what age is thumb-sucking acceptable?
Thumb-sucking is normal for babies but should stop gradually beginning at age two or three, to prevent problems with the alignment of permanent teeth or the jaw. The negative effects of persistent thumb-sucking depend on the frequency, duration and intensity of the habit. Your dental hygienist and dentist can help you find solutions to get your child to stop, ideally before age five. If the habit continues after the permanent teeth come in, a solution must be found quickly.

Why is it important to preserve the baby teeth until adult teeth come in?
Primary teeth act as guardians. They stop erupting at around two years of age and remain in the mouth until 11 or 12. They make room for permanent teeth to grow and keep those spaces aligned until the adult teeth come in (between age 6 and 13).

If a child loses a baby tooth too early because of tooth decay or an accident:
• The other teeth may shift out of alignment;
• The space created for the permanent tooth shrinks;
• The permanent tooth may grow in at an angle (crooked);
• Adult teeth may overlap.

If cavities are left untreated:
• They can cause a painful abscess to form;
• The infection can spread to the bud of the permanent tooth beneath the gums and cause abnormalities.

Early loss of baby teeth can also affect:
• Speech (pronunciation);
• Swallowing;
• Development of the palate and jaw;
• The ability to chew and eat properly, thereby hampering growth;
• Self-esteem.

Around age nine, your child is in the mixed dentition stage, with 12 primary and 12 permanent teeth in place.
Why do some kids have lots of cavities while others do not?
Numerous risk factors combine to cause cavities, and this combination of factors varies from child to child.

While they can be prevented by addressing the appropriate factors, dental caries remain the most common chronic, infectious, transmissible (by saliva) disease among children.

What are Early Childhood Caries (ECC)?
ECC affect children under five years of age, and onset can be quiet devastating. They often cause sensitivity to cold, pain while chewing or spontaneously throughout the night.

They can develop in children who:
- Have poor oral hygiene;
- Go to sleep with a bottle or trainer cup containing juice, milk or a sugary drink;
- Eat a diet high in sugar;
- Have a family history indicating a high risk for dental caries;
- Suck on a pacifier soaked in a sugary substance.

Once a month, check the appearance of your child’s enamel by lifting his lips. The first signs of a cavity can include dull-looking enamel or chalky white or brownish spots. Cavities typically occur in the following order:
- Upper incisors, near the gum line or in between teeth;
- Canines;
- Molars.
Since this type of dental caries progresses quickly, you should consult a dental professional right away.
What should I do if my child bites his tongue or lip?
- Gently clean the wound with a clean, dry cloth;
- Apply direct pressure to the wound to stop the bleeding;
- Prevent swelling by applying a very cold, wet washcloth;
- Bring him to the emergency room if the wound is deep or if the bleeding persists, since stitches may be needed.

Is it normal for a child to grind his teeth?
Grinding (bruxism) in very young children typically goes away with the eruption of permanent teeth. It is recommended that you help the child relax, create a calm environment and try to maintain a certain routine. Speak to a dental professional, however, since a mouthguard may be advisable.

Can a broken primary or permanent tooth be fixed?
Most of the time, yes. A consultation with the dentist is needed.

My child fell, and his tooth came out completely. What should I do?
- Quickly rinse the tooth with water and try to put it back in place if possible, without touching the root;
- If you cannot get it back in its place, put it in cold milk;
- Have your child rinse his mouth with water and then bite down on a cotton pad;
- Bring him to the dentist or to the emergency room immediately, and bring the tooth with you.

Why do primary teeth sometimes turn grey?
A blow can lead to bleeding inside the tooth, causing it to appear grey after a while. Speak to your dentist, since the grey tooth should ideally remain intact until the permanent tooth grows in.

What are the benefits of electric toothbrushes for kids?
Excellent oral hygiene can be maintained with the regular use of a manual brush and dental floss. However, a kids' electric toothbrush may make it easier and more fun for them to keep their teeth clean.

Electric toothbrushes for kids are smaller and have shorter bristles than adult brushes. Models with slightly longer bristles make it easier to clean pits and fissures on chewing surfaces, where cavities tend to form.

Parental supervision is necessary when using electric toothbrushes, and the brush heads should be replaced as often as a manual brush is replaced.
Here are The Top 20 tips from your dental hygienist to promote your child’s oral health

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<tbody>
<tr>
<td>1</td>
<td>Avoid transferring cavity-causing bacteria to your child. A newborn’s mouth is free of these bacteria, which are transmitted by sharing pacifiers, utensils or toothbrushes, among other things.</td>
</tr>
<tr>
<td>2</td>
<td>Avoid putting your baby to bed with a bottle.</td>
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<td>3</td>
<td>Clean your infant’s gums at least twice daily using a small, clean and moist washcloth.</td>
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<tr>
<td>4</td>
<td>As soon as the first tooth appears, begin using a soft-bristle toothbrush for babies twice a day.</td>
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<tr>
<td>5</td>
<td>Clean your child’s mouth after administering any medication or syrup containing sugar.</td>
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<td>6</td>
<td>Supervise tooth brushing, and stress the importance of brushing before bedtime. We produce less saliva at night, so its protective properties are diminished.</td>
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<tr>
<td>7</td>
<td>Give your child a leading-brand flavoured fluoride toothpaste for kids.</td>
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<tr>
<td>8</td>
<td>Use a soft-bristle toothbrush suitable for the size of your child’s mouth, and change it every three months at least. Since microorganisms can become lodged at the base of the brush, or between and at the bottom bristles, a contaminated toothbrush should also be changed after a high fever or contagious illness.</td>
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<tr>
<td>9</td>
<td>Once a month, check your child’s teeth for early signs of a cavity by lifting his lips to see if there are any white or brownish spots.</td>
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<tr>
<td>10</td>
<td>As soon as your child has two teeth that touch, begin flossing once daily, since a toothbrush cannot reach these spots where cavities tend to form.</td>
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<tr>
<td>11</td>
<td>Visits to the dental hygienist should begin at age one, and be made every 6 to 12 months, according to your child’s needs. You should, however, consult right away if your child is in pain or you have other concerns.</td>
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<tr>
<td>12</td>
<td>Protect your child’s primary teeth, because they make room for the permanent teeth, which usually erupt between the ages of 6 and 13.</td>
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<tr>
<td>13</td>
<td>Pay close attention to the first four adult molars that come in around the age of six, since these teeth are key to your child’s permanent dentition.</td>
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<td>14</td>
<td>Restrict intake of juice, since, in addition to its high sugar content, the acidity of juice causes irreversible enamel erosion.</td>
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<tr>
<td>15</td>
<td>Opt for snacks such as fresh fruits and vegetables, as well as some cheeses. Cheese is high in calcium and helps prevent cavities by reducing the saliva’s acidity and slowing the effects of bacteria.</td>
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<tr>
<td>16</td>
<td>Make sure your child has enough dairy in his daily diet.</td>
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<td>17</td>
<td>If your children can’t brush their teeth after a sugary snack or meal, have them rinse their mouth with water, or offer them a crunchy fruit or vegetable or a slice of firm cheese such as cheddar.</td>
</tr>
<tr>
<td>18</td>
<td>Let your dental hygienist know about your child’s habits, including thumb sucking, his way of swallowing or speaking, or whether he breathes through the mouth.</td>
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<tr>
<td>19</td>
<td>Have your child’s teeth protected from cavities with dental sealants.</td>
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<tr>
<td>20</td>
<td>Have your child use a mouthguard while playing sports to avoid cracking or breaking teeth.</td>
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Your dental hygienist is your partner in maintaining good oral health!

Dental hygienists know how important good oral health is to your child’s overall health and development. These prevention specialists are always eager to help you, by:

• Detecting dental oral diseases;
• Teaching you the principles of oral hygiene and providing personalized advice;
• Developing preventive programs;
• Using scientific means to control and prevent dental oral ailments, such as polishing or applying topical fluoride or pit and fissure sealants;
• Performing delegated dental acts, such as dental x-rays, scaling and insertion of filling materials.

There are over 5,200 practising dental hygienists across Québec. Their expertise and skills are invaluable in maintaining excellent oral health, which is vital to your child’s overall health and development!

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