ARE YOU MOUTHWISE?
AN ORAL HEALTH OVERVIEW FOR PRIMARY CARE

Funding providing by:

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Why is oral health important?

- Tooth decay is the number one chronic disease in children. It is five times more prevalent than asthma.
- 80% of dental caries occurs in 20% of children.
- Tooth pain is the leading cause of missed school hours, accounting for nearly 51 million hours each year.
- Oral infection increases the risk for heart disease, type 2 diabetes and premature birth.
Do you know the facts?

• Untreated tooth decay causes pain and infection that may lead to problems such as eating, speaking, learning, and playing. (CDC)

• Nearly one in four children under the age of five already has cavities and nearly half of all teens have cavities.

• 80% of people will have a cavity in their lifetime.

• Cavities are preventable. Your teeth are meant to last a lifetime.
Florida Institute for Health Innovation surveyed primary care residency programs regarding oral health (2012).

- 16 Pediatric, Obstetric and Gynecology, Family Medicine and Preventive Medicine residency programs responded.
- More than 50% of the residents received less than 2 hours of oral health training.
- 94% did not spend any time with a dental professional during their training.
- Only 50% of the residents performed oral health risk assessments.

BUT: 75% who responded to the survey agreed that it is important to address their patient’s oral health issues. Teaching oral hygiene and healthy nutrition to parents and children is key for the prevention of dental disease.
The Primary Care Provider plays a significant role in the prevention of dental disease for the child.

- Primary care providers have regular, consistent contact with infants and children through well-child visits.
- The majority of poor children receive all their vaccines. They can be assessed for oral health in addition to overall health during these visits.
- Primary care providers can screen for tooth decay, provide preventive treatments such as fluoride varnish and teach parents about the importance of healthy nutrition, proper oral hygiene, and visiting a dentist during the child’s well visits.
Anatomy of a Tooth

20 Primary Teeth
32 Permanent Teeth
Primary Teeth

• Primary teeth begin to erupt around six months of age. However, a few newborns are born with a tooth and some may not get their first tooth before age one. There are 20 primary teeth.

• A baby should be seen by a dentist approximately 6 months after the first tooth has erupted, or by age one. Early dental visits will identify oral problems and help prevent dental disease.

Questions:

• What do I tell a parent if the baby is born with a tooth?
• What do I tell a parent if the child has not had their first tooth by age one?
Primary Teeth

Upper Teeth
- **Central Incisor**: Erupt 6-12 Months, Shed 6-7 Years
- **Lateral Incisor**: Erupt 9-13 Months, Shed 7-8 Years
- **Canine**: Erupt 16-22 Months, Shed 10-12 Years
- **First Molar**: Erupt 13-19 Months, Shed 9-11 Years
- **Second Molar**: Erupt 23-31 Months, Shed 10-12 Years

Lower Teeth
- **Central Incisor**: Erupt 6-10 Months, Shed 6-7 Years
- **Lateral Incisor**: Erupt 10-16 Months, Shed 7-8 Years
- **Canine**: Erupt 17-23 Months, Shed 9-12 Years
Permanent Teeth or Secondary Teeth

• Permanent teeth usually begin to appear at age 5-6 with the first molar.
• Most permanent teeth have erupted by age 18. Wisdom teeth may appear later.
• The main reasons for tooth loss are decay or periodontal disease or injury.
• Encourage proper oral hygiene, healthy nutrition that is low in sugar, and visiting the dentist every six months for checkups for optimal oral health.
Early Childhood Caries (ECC)

• ECC is an infectious, chronic disease that destroys the tooth structure.

• ECC is defined as the presence of one or more decayed, missing (due to caries) or filled tooth surfaces in any primary tooth in a preschool-age child between birth and 71 months of age.

• ECC frequently affects the upper front teeth because they erupt first and are least protected by saliva.

• Signs and symptoms of ECC include broken/damaged teeth, brown or black in color, red bumps or pimple formations in gums above teeth, fever, swelling, pain.

• Question: How do I best treat a dental infection in a child?
Etiology of Tooth Decay

- **Tooth Bacteria**
- **Carbohydrate**
- **Time**
- **Caries**

Factors:
- Social class
- Income
- Education
- Nutritional habits
- Family beliefs
Cavities – destruction of the tooth

• Oral bacteria (streptococcus mutans) metabolizes carbohydrates, especially from sugars in food and drinks, and forms acid. The acids persist for 20-40 minutes after sugar ingestion.

• The acid demineralizes the tooth enamel, creating porosity in the tooth surface causing it to weaken and break down, forming a cavity.

Decreasing sugar consumption, especially continuous consumption throughout the day, is key to decreasing the incidence of cavities.
How is a cavity formed?

TOOTH + GERMS + SUGAR = PLAQUE → ACID = CAVITY
Common Questions:

• What is the best way to avoid cavities?
• Is mutans streptococci transmitted from the primary caretaker to the baby? How do I prevent that from happening?
• What type of toothpaste should I buy for my child?
• What type of toothbrush should I buy?
• Is an electric toothbrush better?
• When can my child brush independently?
• What age should I encourage dental floss?
• My child fights when I try to brush their teeth, any suggestions?
What is the best way to avoid cavities?

• Start early – keep the baby’s mouth clean
• Brush teeth twice a day for two minutes
• Encourage water in-between meals
• Encourage low sugared foods and drinks
• Encourage a healthy diet with calcium rich food, fresh fruits and vegetables
• Don’t share utensils or pacifiers, or dip pacifiers in sugary substances
• Drink fluoridated water
• Place fluoride varnish on all teeth and sealants on molars
• Establish a dental home at age one
Do I need to prescribe fluoride supplements?

• Check with your city water department to determine the level of fluoride in your water. The optimal amount of fluoride is 0.7 parts per million.
• If fluoride is not at optimal levels in the community water, take action, and educate your policy makers. Fluoride reduces tooth decay.
• Go to the CDC website for detailed information about infant formula and fluoride supplements: http://www.cdc.gov/fluoridation
Do I need to prescribe fluoride supplements?

Recommended ADA Fluoride Supplement Schedule (mg F/day)

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<thead>
<tr>
<th>AGE</th>
<th>F Concentration in Water (ppm)</th>
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<tr>
<td></td>
<td>&lt;0.3</td>
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<tr>
<td></td>
<td>0.3-0.6</td>
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<tr>
<td></td>
<td>&gt;0.6</td>
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<tr>
<td>Birth-6 mos.</td>
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<tr>
<td>6 mos. – 3 yrs.</td>
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<tr>
<td>3-6 years</td>
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<tr>
<td>6+ years</td>
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Prevention:

Should I apply fluoride varnish to patients in the office? Does insurance cover it? What is the billing code for applying varnish?

What are Sealants? Should baby teeth be sealed? Are sealants permanent? Any special care needed for sealants?
Nutrition for a Healthy Mouth

• Breast milk is best for a baby. Only breast milk, formula, or water in bottles.
• Infants should finish their bottle before napping or going to bed. Infants/children should not take a bottle or sippy cup with them to bed. Clean their mouth by wiping with a moist cloth or soft toothbrush prior to going to sleep.
• Avoid giving sugared beverages and foods with a high sugar content. Provide fruit juice with the meal or dilute juice with water to decrease sugar content. Refrain from ad-lib use of juice-filled sippy cups throughout day.
• Provide water in-between meals rather than juices, sugared drinks, sports drinks or artificially sweetened soda.
• Encourage fruits and vegetables, dairy, whole grains, and lean proteins.
• It’s not what children eat, but how often. Avoid frequent snacking and drinking of high carbohydrate foods/beverages.
Dental Injuries:

Why is a tooth gray? Is there anything that can be done to make it white?

What is the best thing to do for an avulsed tooth? Do I stick it in milk?

Tongue/lip piercings? Grills?

Discussion:
Recommendations for preventing injuries to the mouth
When should a child be referred to an orthodontist?

• Refer a child to the orthodontist around age eight or earlier if there is an obvious lack of proper functioning of teeth or severe crookedness. Hopefully a dental home has already been established.
Teeth are Meant to Last a Lifetime. Education is the first step to Prevention!
For more information about oral health, consult: www.smilesforlifeoralhealth.org

Additional resources:
- www.flhealthinnovation.org
- www2.aap.org/oralhealth
- www.ada.org
- www.mouthhealthy.org
- www.cdc.gov/oralhealth
- www.morehealthinc.org
- www.areyoumouthwise.com
- www.floridaoralheath.com

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