

Smiles FOR Kids

Pediatric
Dentistry



WHAT YOU SHOULD KNOW ABOUT INFANT AND CHILDREN'S ORAL HEALTH

Presented by Dr. Kasia Lindhorst
Smiles for Kids Pediatric Dentistry

Basic Information on Brushing, Flossing etc...

- When do I start?



- Before the teeth come in-wipe off the gums with gauze or washcloth
- Brush when the teeth 1st come in
- Use regular baby toothbrush w/ soft bristles
- Use non-fluoride (training) toothpaste until around 18 months-then switch to regular fluoridated toothpaste
- Use VERY little toothpaste on the brush-just a touch!!! Pea-size should last for 10 brushing sessions!

HOW am I going to get him/her to do this???



1. Brush twice a day, but NIGHT-TIME is the most important time.
2. After night-time brushing, no more food or drinks
3. Lay him/her down in your lap. Sit on the floor or on the couch and put his/her head in your lap.
4. Brush away!!!
5. Don't let the crying scare you! All you are doing is cleaning and preventing cavities.

Where do I brush?

- Start with upper molars on the cheek side and lower molars on the tongue side
- Move lower lip out of the way w/ your finger and brush the bottom teeth around the gumlines
- Do the same to the upper teeth
- Finish off with one more sweep over EVERYTHING
- Brush at least 1 minute or close to 2 minutes depending on how many teeth your little one has



You cannot be serious about flossing!!!



- Most kids will have cavities BETWEEN the teeth before they have them on TOP of the teeth because of lack of flossing
- Once your kiddo has molars... floss
- If he/she has front teeth that are touching one another-floss
- The more "crowded" your child is the more important flossing becomes
- Use these flossers to save your hands from being eaten

Healthy Foods and Snacking

- Greatest cause of cavities from foods is not the KIND of food eaten, but the FREQUENCY exposure of teeth to food (sugar)
- Greatest risk is JUICE drinking while "on the run".
- It is OK to have juice with meals, but not all day long...



Healthy Foods and Snacking



- Things healthy for your body are healthy for your teeth.
- Chewy, gooey, sticky candy stay on the teeth the longest and cause most problems
- Please, do not give kids carbonated drinks such as sprite; they not only are full of sugar, but also ACID that dissolves teeth

So why are we such
sticklers for brushing,
flossing and diet???

Early Childhood Caries



Where do these cavities come from???

- Lack of knowledge about milk's role in forming cavities
- Lack of knowledge about sugar in juices
- Lack of knowledge about oral hygiene for young children
- Lack of dental visits until visible dental decay is present

Thumb or Finger Sucking



- Children begin this habit before birth
- There is little you can do before the kids truly are willing to work on it
- Don't stress about it before 3 years of age!
- BUT... if it is connected with a blanket or a "lovee", limit it to bed only

Thumb and Finger Sucking



- Problems that arise from thumb/finger sucking:
 - OPEN bite where front teeth do not come together
 - CROSS bite where back teeth overlap "backwards"
 - OVER bite where front teeth stick out too much

Thumb and Finger Sucking



- So what do we do about it?
 - Between 3 and 5 $\frac{1}{2}$ years of age we encourage the kids to quit on their own using motivational charts, hand-puppets, and positive reinforcement-90% of kids will quit by themselves
 - At 5.5 years (close to eruption of permanent teeth) we put in a thumb guard (as pictured)

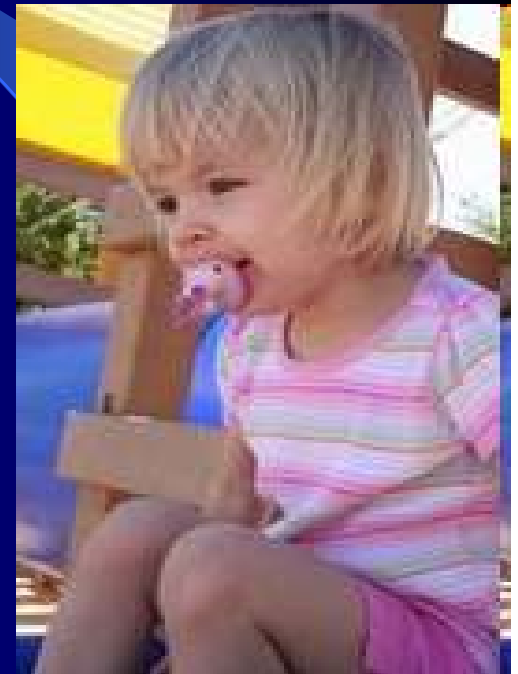
Pacifier Habit

- Problems connected with this habit are same as with thumb sucking
- Pacifiers can also be a factor in repeated ear infections
- BUT... it is an easier habit to break for the kids
- The challenge is "weaning" the parents off the pacifier
- Recommended time to get rid of the pacifier is 18 months of age before "separation anxiety" is developmentally at its fullest



Pacifier Habits

- Two ways to quit...
 1. **JUST DO IT:** take the pacifier away and be brave. After 2-3 nights, your child will forget all about it. If your child is older you might want to "donate" the pacifiers to a good cause such as "babies" or "puppies" or the "paci fairy"
 2. **CUT OFF THE TIP** (significantly) so that your child gets no more sucking satisfaction out of the pacifier



Bottle Habits



- Your pediatrician probably told you to change your child from the bottle to a sippy cup by 1 year of age
- From a dental perspective the most important part of being "on the bottle" is the habit of putting the child to bed with a bottle. It causes what used to be called "Baby Bottle Tooth Decay", which is the most severe childhood disease in the the United States!

"Baby Bottle Tooth Decay"



Eruption Patterns

- Each child is very different so please do not worry if your child is a little "off" the schedule.
- **AVERAGE** time of eruption of 1st baby teeth (lower front teeth) is 6 months of age, but we have seen it as late as 16 months.
- Next teeth follow until at around age 2-3 years all baby teeth are in.
- Kids should have 20 baby teeth: 10 on the top and 10 on the bottom.

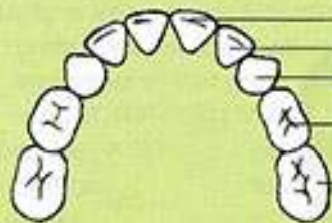
Eruption Patterns

- Permanent teeth start coming in at around the age of 6 starting with the lower front teeth and 6 year molars which erupt **BEHIND** all baby teeth
- Over the next 2 years all of the 4 top and bottom front teeth will come in
- Then kids stop losing teeth for about 2-3 years
- Around 9-12 years of age all the back teeth start getting loose and permanent teeth erupt

Eruption Patterns

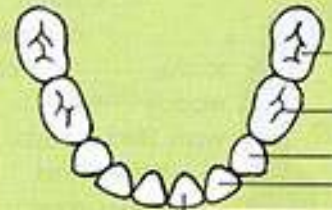
THE DEVELOPING SMILE: TOOTH ERUPTION CHARTS

PRIMARY TEETH



Upper Teeth

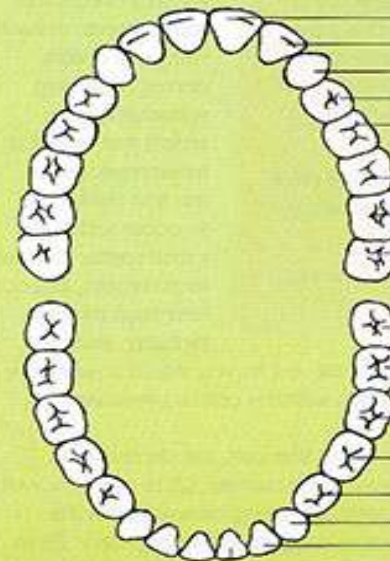
Teeth	Erupt	Shed
Central incisor	8-12 mos.	6-7 yrs.
Lateral incisor	9-13 mos.	7-8 yrs.
Canine (cuspid)	16-22 mos.	10-12 yrs.
First molar	13-19 mos.	9-11 yrs.
Second molar	25-33 mos.	10-12 yrs.



Lower Teeth

Teeth	Erupt	Shed
Second molar	23-31 mos.	10-12 yrs.
First molar	14-18 mos.	9-11 yrs.
Canine (cuspid)	17-23 mos.	9-12 yrs.
Lateral incisor	10-16 mos.	7-8 yrs.
Central incisor	6-10 mos.	6-7 yrs.

PERMANENT TEETH



Upper Teeth

Teeth	Erupt
Central incisor	7-8 yrs.
Lateral incisor	8-9 yrs.
Canine (cuspid)	11-12 yrs.
First premolar (first bicuspid)	10-11 yrs.
Second premolar (second bicuspid)	10-12 yrs.

First molar	6-7 yrs.
Second molar	12-13 yrs.
Third molar (wisdom tooth)	17-21 yrs.

Lower Teeth

Teeth	Erupt
Third molar (wisdom tooth)	17-21 yrs.

Second molar	11-13 yrs.
First molar	6-7 yrs.
Second premolar (second bicuspid)	11-12 yrs.
First premolar (first bicuspid)	10-12 yrs.
Canine (cuspid)	9-10 yrs.
Lateral incisor	7-8 yrs.
Central incisor	6-7 yrs.



Dental Emergencies- Infection

- Infected baby teeth are a true problem!!!
- Infection starts 99.9% of the time in teeth with large, neglected areas of dental decay
- Infections in baby teeth spread FAST to infections of face, neck, head and eyes
- Such an infection can cause hospitalization, IV antibiotics, and many... MANY problems!
- Sometimes kids DO NOT feel pain because the bone is so porous that it allows for the "pus" to drain into the rest of the face without causing much discomfort



Dental Emergencies- Infection

- Dental infections need to be treated as soon as they are noticed
- Call your dentist immediately
- Sometimes you will be seen right away, but sometimes an antibiotic and pain meds might be called in for a few days and then your child will be seen
- Infected baby teeth **MUST** be extracted...



Dental Emergencies- Trauma

- Dental trauma is VERY common in children
- Severity varies from "bumping" the tooth to bone and tooth fractures
- If the tooth was "bumped" to the point of it changing position or bleeding-call your dentist
- You will need to be seen for a baseline x-ray and exam



Dental Emergencies- Trauma

- Most of the time no treatment is necessary aside from a follow-up in 6-8 weeks
- BUT you will be asked to watch for signs of infection: sudden pain and sensitivity, pimple on the gum, swelling
- If the tooth is broken to the point of sensitivity immediate treatment such as fillings or crowns or root canals needs to be rendered
- Soft tissue (lip, gum etc) trauma level depends on how hard it is to stop the bleeding. If you have trouble controlling it-see your dentist ASAP



Dental Emergencies- Trauma

- If trauma happens to be to a permanent tooth- seek dental attention right away
- AVULSED (or totally "knocked out") permanent teeth should be put back in the socket, put in a "Save A Tooth" solution or save in milk. They **MUST** be reimplanted within 1 hour to survive!!! Even then they will probably need a root canal.
- **BROKEN** permanent teeth should also be fixed ASAP.

What is the deal with Pediatric Dentists?

- The pediatric dentist has an extra two to three years of specialized training after dental school.
- This training involves growth and development issues (which are not discussed in dental school) as well as behavior management issues (which are amazingly significant)
- Also pediatric dental staff is highly trained in taking care of kids. They spend the time and effort and truly CARE about the kids.

When should my child see
the dentist for the 1st
time???

What does the American Academy of Pediatric Dentistry (AAPD) say about it?

"A dental home should be established within 6 months of eruption of the first tooth and no later than 12 months of age to conduct a caries risk assessment, educate parents, and provide anticipatory guidance for prevention of dental disease."

What does our office say about it?

- We follow the recommendations of the AAPD and recommend the first visit by 1 year of age.
- At that time we do what we call a "Well Baby Exam"

Well Baby Exam

- We bring parents and children to an isolated room with lots of toys.
- We spend around 15 minutes educating parents on different aspects of tooth development and decay formation.
- Finally we do a knee-to-knee exam of the child's dentition.

Well Baby Exam

- Things we discuss with parents:
 - Why, when and how often we want to see their child
 - Pointers to help parents create a pleasant experience for children in our office
 - Tips on teething
 - Decay process and development

Well Baby Exam

- Things we discuss with parents (cont):
 - Proper brushing and flossing techniques
 - Fluoridated toothpaste use and any supplemental fluoride
 - Influence of milk and other sources of sugar on teeth
 - Weaning children off sleeping with bottles, sippy cups and any sources of sugar

Well Baby Exam

- Things we discuss with parents (cont):
 - Why baby teeth are important
 - Approach and appropriate age to weaning children off any harmful habits such as prolonged pacifier use, thumb/finger sucking and others
 - Future development of dentition and what to expect in terms of losing and gaining teeth



Well Baby Exam



- Finally we sit down with parents knee-to-knee to the doctor and lean the child into the doctor's lap.
- Now I can demonstrate brushing techniques, discuss any anomalies and check occlusion (how the teeth come together).

Well Baby Exam

- We then recommend a 6 month recall schedule for the children
- We also remind parents about possibility of dental trauma at this age as children are learning how to walk and run, and we give them our emergency 24 hr number they can call with any questions. (the number goes directly to Dr. Lindhorst's cell phone)

New Patient Exam

- By 3 years of age the child has hopefully been well acquainted with us!
- At this time we do a full exam including full set of x-rays, regular dental cleaning, fluoride application and flossing.
- 90% of the children do **GREAT** for this appointment!



New Patient Exam

- During the New Patient Exam we usually try to bring the kids in by themselves-not because we mind parents there (and we do let them watch), but because the kids do MUCH better by themselves
- We then bring parents in for the exam once the "hard part" is done to discuss x-rays, occlusion and answer any questions.
- Parents are very important, but kids are our priority. We want them to be happy and do their best!



A little bit about us

- Our office is located in Professional Building 1 in the Memorial Medical Center right by Memorial City mall.
- It has been around for 34 years, first owned by Dr. Freele and three years ago purchased by Dr. Lindhorst.
- It is a one-doctor, small, private office that focuses on quality vs. quantity and always has unlimited time for our patients and parents.



Smiles For Kids



- We see children from the youngest age all the way through college.
- We focus on education, prevention and positive dental experience from the youngest years.
- We see children for their exams, treatment, oral sedations if needed and even IV general anesthesia if necessary.
- We also gladly see special needs patients.