

Programs may prevent tooth decay in tots

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A toddler's tiny teeth are destined to fall out in later years as their permanent pearly whites grow in. But for some children, especially those from low-income families, cavities and poor oral health lead to complicated dental problems long before they even graduate from their cribs.

Programs designed to incorporate tooth decay prevention as part of a child's regular checkup with the doctor could be a big step toward improving infants' and toddlers' [dental](#) health, say University of Florida researchers, who received a \$293,000 grant from the National Institutes of Health to study whether such programs in Florida and Texas are actually improving dental care in young children enrolled in Medicaid.

The American Academy of Pediatrics, the American Dental Association and the American Academy of Pediatric Dentistry recommend children visit the dentist for the first time by age 1, but many children do not receive preventive dental care until they are much older, if at all, said UF health economist Jill Boylston Herndon, the principal investigator on the two-year grant.

“There is also this attitude that baby teeth are not that important,” said Frank Catalanotto, a professor of pediatric dentistry in the College of Dentistry who advocated for Florida to establish a program targeting early childhood caries. “But the reality is getting a cavity in a baby tooth can lead to an infection. And, in fact, several children have died over the last several years in this country of an untreated dental infection.

“The tragedy of this is that it is relatively easy to prevent early childhood caries with some simple measures of just toothbrushing using a fluoridated toothpaste, not putting a baby to bed with a bottle, and a dental visit with an application of a fluoride varnish,” added Catalanotto, a co-investigator on the grant.

In 2008, Florida and Texas adopted policies to reimburse pediatricians for providing preventive services to young children receiving Medicaid and dental education for their parents. As part of a child’s regular checkup, pediatricians provide dental education to parents about proper toothbrushing and oral care and apply a fluoride varnish to children’s teeth. The doctors then refer the parents and child to a dentist.

“The research tells us that if they get these preventive services, they are less likely to have problems later,” said Herndon, a research associate professor of health outcomes and policy in the College of Medicine. “In addition to reducing caries in their primary teeth, they are less likely to have caries in their permanent teeth when they are older.”

Dental caries is the most prevalent disease in young children, affecting more than one-fourth of kids between 2 and 5, according to the Centers for Disease Control and Prevention. By their teen years, two-thirds of children from low-income homes have suffered tooth decay. Dentists can spot the first signs of caries and prevent cavities from forming, said Joel Berg, chairman of pediatric dentistry at the University of Washington and president-elect of the American Academy of Pediatric Dentistry. With training, pediatricians can spot these signs, too, Berg added.

At home, parents should aim for brushing their infant or toddler’s teeth twice a day, or at least once before bed with a lentil-sized amount of fluoridated toothpaste. Although it is a common belief that parents should not use toothpaste with fluoride in children under 2, Catalanotto

says this is a myth experts are trying to dispel.

“It’s not a matter of if a child should use fluoride but how much,” said Berg, who is not involved with the study. “With fluoride, it is important to have frequent exposure to small amounts.”

Of course, a lack of parental understanding about oral care is not the only issue affecting children’s teeth. There are few dentists who accept Medicaid and even fewer who will see very young patients, particularly those with dental problems, Catalanotto said. To address cavities and other problems, small children must frequently be put under sedation or admitted to a hospital and placed under general anesthesia.

“Getting some simple, inexpensive preventive procedures can cut a lot of dental costs down the line and prevent some big medical costs,” Catalanotto said.

Including Florida, 33 states have established programs to involve pediatricians in dental prevention, but there is limited evidence about how well these programs actually work to improve oral health for small children, Herndon said.

As part of their study, UF researchers from the colleges of Medicine and Dentistry and the Institute of Child Health Policy will examine whether children who receive preventive dental services from pediatricians are more likely to subsequently see a dentist. They will also look at geographic and population differences to see which [children](#) are receiving services and where there are unmet needs, Herndon said.

Other researchers involved in the study include Scott Tomar, a professor of community dentistry in the College of Dentistry; and Elizabeth Shenkman, director of the Institute for Child Health Policy and chair of health outcomes and policy in the College of Medicine.

Provided by University of Florida

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