

# Create a Caries-Free Generation

Providing prevention education to parents of young children is key to winning the fight against tooth decay.

By Rhea M. Haugseth, DMD



The dental profession has experienced many technological advances over the past 30 years—some so important they have changed the way we provide care. One facet of oral health care that has not changed is prevention. I have been placing sealants since the early 1970s, and I still recommend them to my patients and their parents to prevent occlusal decay. Restorative treatment has become much more conservative with the incorporation of composites, and now effective treatments exist even for white spot lesions. As the focus shifts to minimally invasive care, oral health is moving away from surgical, restorative techniques and moving toward individual preventive strategies for all patients.

## OUR YOUNGEST PATIENTS

February is National Children’s Dental Health Month (NCDHM), which provides the perfect opportunity to reflect on the progress made since the Surgeon General’s Report on Oral Health was released in 2000. This report found that “dental caries is the single most common chronic childhood disease—five times more common than asthma.”<sup>1</sup>

Over the past 11 years, there has been both good and bad news. The good news is that the incidence of dental caries has decreased in children aged 6 years to 12 years, as well as in teenagers.<sup>2</sup> The bad news is that dental caries is increasing among very young children (age 2 to 5)—the group least likely to access professional oral health care services—and it disproportionately affects minority and economically disadvantaged children.<sup>2</sup> Black and Hispanic children and children with low socioeconomic status are at increased risk and Hispanic children and children with lower incomes experience more untreated decay than the general population.<sup>2</sup>

While the causes of dental disease are multifactorial, dietary habits and oral hygiene issues contribute to these statistics. In my own office, I have seen a large increase in the



Dentists rely on dental hygienists to provide preventive education in the their offices. Patients' interactions with their dental hygienists can shape their attitudes about oral health for the rest of their lives.

consumption of sugary beverages, especially in sippy cups, and the constant grazing on snacks. These habits, along with parents not understanding the need to brush primary teeth as soon as they erupt, have led to the rise of caries among our youngest patients. Parents and caregivers must be educated about healthy dietary habits and proper oral hygiene procedures at home to help their children achieve and maintain optimal oral health.

### EARLY INTERVENTION

When children have an established dental home  age 1, dental professionals are able  emphasize the relationship between oral health and systemic health and educate parents and children on how to maintain oral health. A dental home is about developing and maintaining a relationship between dental professionals and

their patients. Implementing a dental home by age 1 ensures that children have access to dental care in the case of an emergency or trauma, as well as consistent risk assessments and the development of a prevention plan—all of which can help keep them caries-free.

### CHILDREN WITH SPECIAL HEALTH CARE NEEDS

Children with special health care needs are often at increased risk of dental disease, and their treatment can be a challenge for the dental office. Those with physical disabilities may be unable to use their hands, making it difficult to hold a toothbrush. Some may have uncontrolled movements that limit their ability to brush or floss without assistance. Children with medical disabilities may have difficulties with absorbing nutrients, which can lead to a diet high in carbohydrates or the tendency to snack continuously. The presence of complex medical issues may preclude some children from receiving care in the general dental office, creating access to care problems. Patients with emotional issues may not recognize the importance of good oral hygiene or their medications may interfere with their cognitive abilities and affect their oral health. Children with mental disabilities may exhibit behavior that interferes with their ability to accomplish self-care routines.

Dental hygienists are well-suited to educate parents and caregivers of patients with special needs about oral health. Children with special needs who successfully receive dental care in the pediatric office often go on to be effectively treated in the general dental office.

### EXPAND YOUR REACH

The best way to impact the oral health of children is to focus on prevention, thereby decreasing the need for restorative care. Dental hygienists—the prevention experts—have long focused on the various treatments that can help prevent all dental disease—not just dental caries. Dental hygienists in general dental and even periodontal offices have a great

opportunity to educate patients who are parents of young children while they are receiving dental treatment. Parents love to talk about their children. Ask them about their children's oral health routines and whether they have established a dental home.

Dental hygienists can also impact their communities by giving presentations to parent groups and school classes. Habits established early are more likely to last a lifetime. It is up to us as dental professionals to assist parents in supporting their children's oral health.

Dentists rely on dental hygienists to provide preventive education in their offices. Patients' interactions with their dental hygienists can shape their attitude about oral health for the rest of their lives.

### ADDITIONAL EDUCATION

The AAPD is partnering with *Dimensions of Dental Hygiene* to provide a series of articles in the coming year that focuses on the oral health of children. We hope the series will provide you with the knowledge you need to advance the goal of a caries-free generation. We all want to hear those wonderful five words more often—"Look mom, no cavities again!" 

### REFERENCES

1. Satcher DS. Surgeon General's report on oral health. *Public Health Rep.* 2000;115:489-490.
2. Centers for Disease Control and Prevention. Oral Health Improving for Most Americans, But Tooth Decay Among Preschool Children on the Rise: Trends in Oral Health Status: United States, 1988-1994 and 1999-2004. Available at: [www.cdc.gov/nchs/data/series/sr\\_11/sr11\\_248.pdf](http://www.cdc.gov/nchs/data/series/sr_11/sr11_248.pdf). Accessed January 18, 2012.

*Rhea M. Haugseth, DMD, is president of the American Academy of Pediatric Dentistry (AAPD) and maintains a private practice in Marietta, Ga. An AAPD member for 30 years, she has served the organization in a variety of positions, including president-elect, vice president, secretary-treasurer, and district trustee. Haugseth is an AAPD fellow and a diplomate of the American Board of Pediatric Dentistry. She is also past president of the Southeastern Society of Pediatric Dentistry.*