# When should toothbrushing start?

## After the first teeth erupt through the gum:

Daily wipe the teeth and gums gently with a clean damp washcloth or gauze pad or use a 'finger brush'

## At about 18 months:

- Use a small tooth brush with soft bristles
- Twice a day after breakfast and at bedtime
- Start by teaching your child how to hold the brush
- Your child will probably want to copy parents or brothers and sisters, and will probably want to brush his or her own teeth.

Because a young child cannot brush his/her teeth very well, you should brush his/her teeth - aim to help with 'every surface of every tooth two times every day'.

> hands on supervision with putting toothpaste on the brush and brushing until vour child is 6 – 7 years old

## After the second birthday

- Begin using a junior strength fluoridated toothpaste. Parents should apply the toothpaste to the brush
- Put only a smear of fluoridated junior toothpaste on your child's toothbrush
- Unsupervised, a young child is likely to squeeze a large amount of adult toothpaste on the brush, and swallow most of the toothpaste
- Encourage your child to spit out the toothpaste after brushing rather than rinsing. Putting water into the mouth may stimulate the swallowing reflex, causing both rinse water and toothpaste to be swallowed.

A smear of fluoridated iunior toothpaste is recommended for 2 – 6 year olds

# Fluorides make tough teeth

Fluorides are important for protecting teeth from decay:

- They act with minerals in saliva to restore and harden teeth damaged by early reversible decay
- Fluoride makes the tooth surface mature faster and become more resistant to decay

Fluoride occurs naturally in minute quantities in most foods and water.

Ask a dental professional before beginning to use any additional fluoride products for your child's teeth. Keep all fluoride products out of the reach of young children.

#### Time when first teeth erupt





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# DON'T leave bottle with child at night **DON'T** give sweetened drinks or fruit juices in bottle **AVOID** long feeding periods during day or night **AVOID** sweets and sticky snacks **DON'T** put honey on the dummy DON'T skip regular tooth brushing

<b>~</b>	<b>BRUSH</b> your child's teeth twice a day with low FLUORIDE toothpaste
<ul> <li>✓</li> </ul>	NO DRINKS OR SNACKS after brushing at bedtime
✓	CHANGE  from a bottle to a CUP or FEEDING MUG
<ul> <li>✓</li> </ul>	LIMIT soft drinks, cordial and fruit drink
<ul> <li>✓</li> </ul>	Use FLUORIDATED TAP WATER for drinking
<ul> <li>✓</li> </ul>	ENCOURAGE tooth-friendly snacks
$\checkmark$	ESTABLISH regular meals & healthy eating habits
$\checkmark$	<b>CHECK</b> your child's teeth regularly for dark spots

## When do I take my toddler to the dentist?

#### After all of the baby teeth have erupted.

The first dental visit can be made when your child is 18-24 months old; or earlier if you see dark spots or discoloured or chalky-looking patches on the front teeth.

#### **Date of your next appointment**

## Early childhood decay

Protecting your baby or pre-schooler from decay problems.



**Colgate Caries Control Program** 

Newly emerged teeth are particularly vulnerable to dental decay.

As teeth get older and become more mature, the outer surface becomes stronger and more resistant to acid attack.

# Your child's first teeth

Babies and toddlers rely completely on their parents and carers to make choices about food and oral health habits.

As soon as the first teeth emerge through the gum, they are attacked by the acids in food and plaque **every time your baby eats or drinks.** 

# The enamel surface of your baby's teeth is THINNER and NOT AS TOUGH as adult teeth.

It is important that your child's baby teeth stay healthy:

- For chewing
- For speaking
- To keep the spaces needed for permanent teeth to fit into the mouth
- To avoid toothache!

Drink	pН
Water	7.0 (neutral)
Natural orange juice	3.6
Apple juice	3.3
Rose-Hip syrup	2.9
Rasperry/Lime cordial	2.8
Soft drinks	2.4 – 3.1 (acidic)

Table 1: pH of juices, cordial and soft drinks shows acid levelscompared to water = 7 (neutral).pH 5 is 10 times more acidic than pH 6.pH 4 is 10 times as acidic as pH 5.



# **Diet and low decay risk**

Tooth decay is caused mainly by eating sugary foods or acidic or sweetened drinks too often:

- Home cooked meals (low in added sugar) plenty of vegetables and fresh fruit are best for your child
- Fast foods and processed foods are often loaded with hidden sugars, fats and salt. Check nutritional information on packaging
- Provide snacks that are nutritious and low in sugar
- Limit sweets and sticky snacks, soft drinks, cordial and fruit drinks for children of all ages
- 'Grazing' pattern of frequent snacking increases decay risk
- The effect of acidic foods and drinks is reduced when they are diluted or consumed at mealtimes with other foods

Between meals choose non-acidic drinks eg water & milk.

# What IS plaque?

**Plaque** is a sticky film on the teeth that forms daily in the mouth and cannot be seen. It contains millions of bacteria (germs) which use sugar as their food, at the same time producing acid which attacks and softens the teeth.

Babies do not have plaque bacteria in their mouths when they are born. These bacteria are passed from others, usually from the main carer, through using the same spoon to check the taste/temperature of food, putting the dummy into your own mouth to clean it or by kissing.



Decay on the top front teeth often occurs when children have been bottle fed for too long. When a child has continuous access to a bottle containing milk, sweetened drinks or fruit juice, **prolonged acid attack occurs**.

If the bottle is left with the child at bedtime, the risk of decay is even greater. The saliva flow in the mouth while sleeping is greatly reduced, hence acids forming in the mouth are washed away at a slower rate.

Our teeth are attacked by food and plaque acids every time we eat or drink. The acid attack lasts for approximately 20 minutes, until food particles are diluted and washed away by saliva. Acid is continually present if the baby is sucking a sweetened dummy or has unrestricted access to a bottle containing milk or juice throughout the day or night.

> Prolonged acid attack e.g. night bottle

Figure 3: Stephan Curve - showing acid level in mouth following consumption of food and drink.



Change from the bottle to a cup or feeding mug as soon as possible. If a bottle is needed at night to settle the child, offer only plain boiled water and **remove the bottle once the child is asleep.** 

#### Acid attack

Acid damage starts below the tooth surface, dissolving minute amounts of tooth. When the acid is gone, the teeth recover if there is enough time before the next acid attack.





Tooth at risk

and with cavity

In a healthy mouth, the constant decay and healing processes balance each other. Continual acid attack upsets the balance and **a honeycomb effect of tiny holes develops below the surface.** The tooth becomes fragile and eventually the weakened enamel surface breaks. This allows bacteria to enter and the decay process speeds up.

Figure 4: Advanced dental decay Reddened gum where painful abcesses have formed.



Rotted stumps of teeth