

Family based dentistry

While the majority of pregnant women are not at increased risk of dental caries some expectant mothers will experience dental problems.

Dental care and education provided to a mother during pregnancy is likely to influence her child.

Treating fathers and mothers and providing them with dental education create an opportunity for sound family-oriented dentistry.

Pregnancy and oral health

During pregnancy women can experience increased risk of gingivitis, erosion and caries. Increased caries risk could be attributed to:

- Increased frequency of eating and 'food fads'
- Reduced frequency of oral hygiene due to tiredness, nausea or bleeding gums.

If any of the above happens the following steps are important:

- Maintaining good oral hygiene
- Low sugar diet and healthy snacking
- Rinse immediately and delay brushing for 30 minutes after vomiting.

In extreme cases of frequent emesis unfilled resin may need to be used to protect palatal surfaces of maxillary teeth.

The dental professional often has the opportunity to contribute significantly in providing health information to expectant mothers.

The dental professional should also attempt to take a special interest in general health promotion.

Factors affecting a baby during pregnancy

- The mother's own health and nutrition during pregnancy can impact on the baby's general and oral health.
- Factors such as pregnancy toxaemia, difficult delivery, uncontrolled diabetes and viral infections can contribute to enamel hypoplasia of the child's teeth.
- Maternal medication, drugs, smoking or excessive alcohol consumption during pregnancy are associated with birth defects including cleft palate/lip, or other cranio-facial dismorphism.

Dental authorities no longer recommend prenatal fluoride supplementation.

However, various fluoride products may need to be prescribed for the benefit of the mother and her dental health.

Caries risk in early childhood

The term currently used to describe caries in the first three years of life is Early Childhood Caries (ECC).

- ECC may take many forms (specific demineralisation pattern) depending on the aetiology. The most common pattern is related to the eruption sequence of the primary teeth with the first teeth to erupt having the longest exposure and being the most affected.
- ECC is a lifestyle disease with biologic, behavioural and social determinants. One of the main factors is the frequency and duration of exposure to acids. Continual access to a bottle containing milk or any sweetened/sugared or acidic drink during the night is considered to be the main cause of rapidly progressing ECC.

While dietary changes are a must when treating Early Childhood Caries, a guided improvement in tooth cleaning habits and cautious use of various fluoride vehicles are important.

