
More than a nutritional choice, breastfeeding is a parenting choice, with benefits for mothers, infants, and families.

Some recommendations are:

- > Encourage exclusive breastfeeding during the first six months and continue breastfeeding combined with solid foods for 12–24 months;
- > Talk to a dental practitioner about all possible doubts you have concerning breastfeeding and the oral health of your baby. Sometimes the quality of the information you get on the web or TV is not the most appropriate. Dental practitioners are the right people to answer all your questions concerning your and your baby's oral health.
- > Visiting the dentist while you are pregnant or breastfeeding is very important for baby's and your oral health;
- > You can continue breastfeeding even after your baby's teeth appear in the mouth. You only should stop breastfeeding when you think it is the best for you and for your baby, but not just because the teeth appear in baby's mouth;
- > Talk to your dental practitioner about the oral hygiene of your baby even before the first tooth appears;
- > A few days after birth, you are encouraged to begin cleaning your baby's gums and tongue. The earlier you introduce oral hygiene habits, the easier it will be for your child to get used to them;
- > As soon as the first tooth appears in your child's mouth, brushing is recommended. Your dental practitioner will instruct about the best way to brush your child's teeth and the most suitable toothpaste and tooth brush to use for your child;
- > Taking other types of foods and drinks, mainly those containing sugar, in the first months of life might be harmful to baby's general and oral health. You are encouraged to talk to your dental practitioner about your concerns regarding your baby's diet.

Accessing information on the use of medication when breastfeeding

Mothers who breastfeed may have doubts on the effects of the medication prescribed by dental practitioners on milk production. Besides clarifying these questions with your dental practitioner, you are encouraged to access a free online database with information on medication and lactation recommended by the Australian Breastfeeding Association.
(<https://toxnet.nlm.nih.gov/newtoxnet/lactmed.htm>)

Acknowledgement:

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Breastfeeding
and Oral health:

Information for Patients

Special Topic Pamphlet No. 12

Breastfeeding is recognised as the oldest practice to feed a baby since the Egyptian, Greek and Roman empires and is responsible for saving thousands of children's lives worldwide. Even today, breast milk remains a baby's best and most natural food. While older children and adults need to eat a variety of foods, babies need just one. Breast milk can provide all the elements for baby's healthy development. Almost all children start breastfeeding in Australia and New Zealand, but less than one fifth have breast milk as their only source of energy until 6 months of age.

Types of breastfeeding

According to the World Health Organization (WHO) there are two types of breastfeeding:

Exclusive breastfeeding when no other food or drink, not even water, except breast milk is offered to the baby for the first 6 months of life. However, it allows the infant to receive Oral Rehydration Solution (ORS), drops and syrups such as vitamins, minerals and medicines.

Predominant breastfeeding when the infant's predominant source of nourishment has been breast milk. However, the infant may also have liquids such as water, water-based drinks and fruit juice as well as ORS, drops or syrups such as vitamins, minerals and medicines.

What are the general benefits of breastfeeding?

Breast milk provides specific nutrients and protection against diseases to the growing infant.

Breast milk contains immune cells, antibodies and proteins that contribute to the baby's development.

Breastfeeding plays many roles in improving health both in children and mothers. Longer periods of breastfeeding helps to:

- > Reduce the risk of infectious diseases in children and their death;
- > Increase the level of intelligence in children;
- > Protect against weight gain and diabetes later in life in children;
- > Prevent breast cancer for mothers;
- > Reduce the risk of diabetes and ovarian cancer in mothers.

How can breastfeeding influence oral health?

Breastfeeding can influence two important oral health conditions: malocclusion and tooth decay.

What is malocclusion?

Malocclusion is a problem of irregular contact in the way the upper and lower teeth fit together in biting or chewing. This can be caused by an incorrect development of the facial bones and muscles, and/or a bad positioning of the teeth.

Figure 1. Malocclusion



How can breastfeeding prevent malocclusion?

Breastfeeding stimulates the facial bones and muscles to develop and prevents malocclusion in two different ways:

1. Mother's nipple adaptation to the baby's mouth

The mother's nipple has a perfect adaptation to the shape of the baby's mouth, contributing to an adequate positioning of the teeth and, consequently, promoting better breathing activity. The nipple of the baby feeding bottle is usually less flexible than the mother's nipple. Therefore in bottle fed babies the teeth may be positioned in an unsuitable way negatively affecting the growth of their mouths.

2. Process of sucking- The squeeze action

The movement of lips and tongue during breastfeeding forces the child to draw breast milk through a squeeze action. Children who are bottle-fed need less forceful movement to get milk out. Babies who are breastfed have greater facial muscle activity than those who are bottle-fed due to the forceful action they need to get the breast milk out.

In summary: Babies who are breastfed for longer have a lower risk of malocclusion than those who are breastfed for shorter lengths of time. Breastfeeding prevents malocclusion both in the milk teeth and the permanent teeth.

What is tooth decay?

Decay is destruction of the tooth surface caused by bacterial action. These bacteria use sugar as their main source of energy and release acids, which may ultimately destroy the tooth surface.

How can breastfeeding prevent tooth decay?

Breastfeeding has a protective role against tooth decay in different ways:

Figure 2. Decayed teeth



1. Type of sugar in the breast milk

Compared to other substitutes such as infant formula breast milk contains sugars less preferably used by bacteria. Lactose is the main type of sugar found in breast milk. Bacteria prefer sucrose, which is usually found in infant formulas, to lactose.

2. Special substances

Breast milk contains special substances such as antibodies and proteins which slow down bacterial growth.

3. Mother's nipple adaptation to the baby's mouth

Mother's nipple gets adapted to the baby's mouth perfectly. In contrast, the bottle nipple blocks the access of saliva to the upper front teeth and exposes teeth to sugars and bacteria for a long time.

In summary: Children up to 12 months who are exposed to breastfeeding for longer, have reduced risk of tooth decay.

Oral health care before going to bed!

Dental caries risk is greater in children who are breastfed beyond 12 months compared to those who are not. Possibly, these children are breastfed more during night time when natural cleaning of teeth via saliva flow and mouth movement is less effective. Therefore, mothers who breastfeed are encouraged to clean their children's teeth at least twice a day once they appear in the mouth.