



Healthy Diet

What can I do to protect my child's teeth from harmful foods and drinks?

- ◆ The best snack foods are those with low levels of refined sugars, including non-sticky **fruits, vegetables, cheese, nuts, water, etc.**
- ◆ Kids that are “**Grazers**” and snack throughout the day have a higher risk of developing cavities. Encourage meals and try to limit extra snacks if possible or have your child brush again/rinse with mouthwash (ages 6 and up) or water if you are on the go.
- ◆ A child should never eat (or drink anything but water) **after brushing** at night.
- ◆ **Bottles** should be discontinued by the time your child turns one. Always brush before bed/after milk is given.
- ◆ **Tap water** with the proper level of fluoride makes a huge difference in reducing cavities. Good resource: <https://www.colorado.gov/pacific/cdphe/community-water-fluoridation>.
- ◆ Foods that contain sugars or are sticky (including **sugar containing gummy vitamins**) **should be limited**. They are less damaging to teeth when they are consumed with other foods at mealtimes. They are more harmful when eaten between meals or at nighttime for snacks. Among other foods, these **dangerous foods** include

○ Candy	○ Crackers/Goldfish
○ Cookies	○ Gummy vitamins
○ Chips	○ Fruit snacks
	○ Dried fruit

- ◆ Almost any drink but water contains some level of harmful acid or sugar. Sipping on anything but water between meals or at night can cause some of the most severe childhood cavities. Among other drinks, these **dangerous beverages** include:

○ Soda	○ Chocolate Milk
○ Koolaid	○ Sports drinks/Energy drinks/Ice teas
○ Juice	○ Nutritional supplements

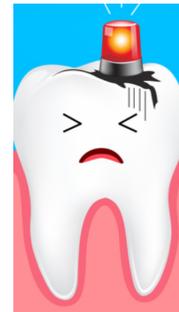
- ◆ **Breastfeeding and formula** for newborns do not contribute to cavities. However, at-will nighttime breastfeeding has been shown to cause decay once the child has also been introduced to other foods. Once your child has teeth erupting, always brush after nursing. If brushing is not possible wiping the mouth out with a wet washcloth or using Spiffies/Tooth wipes is advised.
- ◆ **Gummy vitamins** Ask your pediatrician if your child needs to be on vitamins or supplements. Even picky eaters rarely need vitamins and get enough nutrients from a regular diet. Regular chewable or liquid drops are preferable to gummy vitamins if your child does need to take them regularly. We realize that gummy vitamins have become ubiquitous and this is often a cause of early cavities in children.

Dental Safety



Are sports mouth guards important?

- ◆ Yes! When children start playing sports, a mouth guard can prevent serious dental injuries. Your pediatric dentist can make a custom fit mouth guard when your child is at the appropriate age. Some mouthguards may need to be fabricated by your orthodontist if your child has braces.

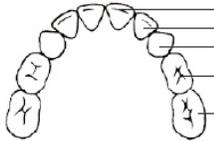
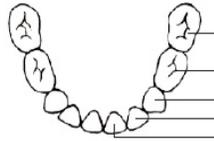


What should I do if I have a dental emergency?

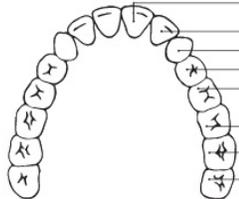
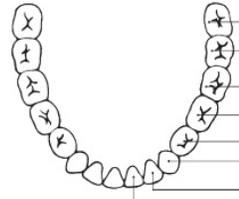
- ◆ Contact your pediatric dentist immediately. You can also send us a photo via email if you aren't sure your child needs to be seen. Getting an x-ray and exam is typically advised following even minor dental trauma.
- ◆ If a permanent tooth is knocked out, find the tooth and rinse it in water.
- ◆ Place the tooth back in the socket and hold it in place with a clean towel or gauze until you get to the dentist.
- ◆ If you are unable to place the tooth in the socket, put it in cold milk or Hanks Balanced Salt Solution (sports teams may have access to this), or keep it in saliva and bring it to the pediatric dentist immediately or to your nearest emergency room.

Dental Development

When will my child start to lose their baby teeth?

	Upper Teeth	Erupt	Shed
	Central incisor	8-12 mos.	6-7 yrs.
	Lateral incisor	9-13 mos.	7-8 yrs.
	Canine (cuspid)	16-22 mos.	10-12 yrs.
	First molar	13-19 mos.	9-11 yrs.
Second molar	25-33 mos.	10-12 yrs.	
	Lower Teeth	Erupt	Shed
	Second molar	23-31 mos.	10-12 yrs.
	First molar	14-18 mos.	9-11 yrs.
	Canine (cuspid)	17-23 mos.	9-12 yrs.
	Lateral incisor	10-16 mos.	7-8 yrs.
Central incisor	6-10 mos.	6-7 yrs.	

Permanent Teeth Eruption Chart

	Upper Teeth	Erupt
	Central incisor	7-8 yrs.
	Lateral incisor	8-9 yrs.
	Canine (cuspid)	11-12 yrs.
	First premolar (first bicuspid)	10-11 yrs.
	Second premolar (second bicuspid)	10-12 yrs.
	First molar	6-7 yrs.
	Second molar	12-13 yrs.
	Third molar (wisdom tooth)	17-21 yrs.
		Lower Teeth
Third molar (wisdom tooth)		17-21 yrs.
Second molar		11-13 yrs.
First molar		6-7 yrs.
Second premolar (second bicuspid)		11-12 yrs.
First premolar (first bicuspid)		10-12 yrs.
Canine (cuspid)		9-10 yrs.
Lateral incisor	7-8 yrs.	
Central incisor	6-7 yrs.	

- ◆ On average, the lower middle teeth start loosening around age 6, and the last baby teeth (in the back) fall out around age 11. Permanent molars erupt around ages 6 and 12 (first and second molars respectively).

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- ◆ Some children may be quite a bit earlier or delayed. This is normally not a concern.
- ◆ If your child develops "double teeth" or adult permanent teeth coming in behind the baby teeth there is no need to be alarmed. If the baby teeth aren't loose or your child is having a hard time getting the baby teeth out, you can take a picture and send it to our office to see if your child needs to come in for an appointment.



Dental Development



How do thumb-sucking and pacifiers affect a child's oral health?

- ◆ Once a child has turned two, a finger-sucking or pacifier habit can significantly alter the growth pattern of their jaw and teeth, resulting in a need for braces (longer treatment times than if they didn't have these habits), sleep/airway issues, or even corrective jaw surgery.
- ◆ Your dentist can discuss options to help if your child has a persistent habit.



- ◆ **Pacifiers** - Pacifiers should be stopped by age 2, 3 the latest. First start by limiting the amount of time your child has one (car rides, stressful situations or sleeping) then reduce to only for sleep. To wean from nap/night-time try poking a hole or cutting off the tip to reduce the suction (check that there are no small pieces of plastic that could be swallowed). This is a more gradual approach to "cold-turkey". Changes to a child's sleep routine may take several weeks to resolve completely. Replace pacifiers with a "chewy tube" or "lovey" stuffed animal/blanket can also help.
- ◆ **Thumb habits** - Thumb/finger sucking can be harder to stop, which is why pacifiers are preferred for infants. At home methods to try include: Positive reinforcement/sticker chart, Mavala stop (bitter tasting paint, needs to be applied frequently for best results), thumb guard or tube-sock finger puppet. You can purchase a thumb guard or make one yourself by sewing a tube sock to a tight-fitting T-shirt. You can decorate the tube-sock and make it a character. This will prevent your child from sucking as they are sleeping/falling asleep and remind them. Some kids may need temporary appliances for a short time frame to serve as a friendly reminder and help stop the habit. These appliances are very effective and are custom fabricated in our office.

Protecting Your Child's Dental Health

Little teeth are a big deal! By following a few simple steps, you can go a long way in preventing significant pain, dangerous infection, and lifelong facial deformity for your child. The enclosed answers to commonly asked questions, based on years of experience and the latest dental research, will help you set your child on track for a lifetime of dental health and confidence.

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Q/A

When should my child first see a pediatric dentist?

- The American Academy of Pediatric Dentistry recommends seeing a pediatric dentist when the child's first tooth appears or no later than their first birthday.

How often should I take my child to see a pediatric dentist?

- Every 6 months at a minimum. We see some children every 3 months.
- Regular visits to the pediatric dentist will help to strengthen teeth and to increase your child's comfort level with the dentist.

Are x-rays safe for my child?

- Yes. Digital X-ray technology, lead aprons, and shields minimize the amount of radiation exposure your child receives.
- The dentist will adjust the amount of x-rays taken according to each child's specific needs and risk for decay.

When should we think about braces?

- Most individuals are ready for orthodontic treatment when all baby teeth have been lost (around age 11), but some jaw and tooth-position problems may require early treatment.
- The American Association of Orthodontists recommends an orthodontic evaluation at age 7.
- Your pediatric dentist can answer specific questions about the timing of braces and will refer when we feel this initial check-up is needed.

How can I prevent decay in my baby?

- Begin brushing their teeth as soon as their first tooth appears.
- Avoid anything that could pass the cavity-causing bacteria from anyone's mouth to theirs (sharing spoons or cups, mouth-to-mouth contact, pre-chewing food, etc.).
- We recommend a thin smear (grain of rice) amount of fluoride

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toothpaste for children under age 2 or that are still swallowing toothpaste.

When should I let my child brush their teeth on their own?

- Parents should brush their child's teeth for them until they are at least seven years old, at which age they may have adequate muscle control to begin brushing their teeth without adult help.
- Even after the age of seven, it is still important to consistently monitor your child's brushing technique and consistency as some kids need continued help.

Is flossing important for children?

- Anywhere that two teeth are tight against each other, flossing is important to clean between them and prevent cavities in these areas.

How should I brush my child's teeth?

- Brush your child's teeth for two minutes at least twice a day with a soft-bristled brush.
- The best times to brush are after or before breakfast and right before bed.
- When using fluoride toothpaste with infants and children that cannot spit, use a smear the size of a grain of rice.
- Encourage your child not to swallow any fluoride toothpaste.
- Help your child develop the skill of brushing in circular motions to clean along the gum line and all three surfaces of each tooth (the biting surface, the tongue side, and the cheek side) and the tongue if possible.

Should my child use mouth rinse?

- When a child is at a high risk of cavities and is old enough to completely swish and spit (around age 6), they may benefit from a children's non-alcohol, fluoride mouth rinse such as Listerine Smart

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Rinse or ACT.

What if my child resists toothbrushing?

- Don't give up! They will gradually learn that it is not an option, and that it is an important part of their normal daily routine.
- Allowing your child to choose their toothpaste or toothbrush may make it more exciting for them. Give choices to young children (have two different color toothbrushes and allow them to pick the one they want to use). Introducing a spin brush can also be motivating.
- Try turning it into a game: describe the "sugar bugs" you're chasing; sing songs; distract them with a television show, etc. Oral-B has an app you can download with stickers to use during brushing.
- Setting a timer can make brushing more fun and help your child brush for the full two minutes.
- It may be helpful to have your child lay their head in your lap or to hold them backwards in your lap while a second adult brushes their teeth.

What should I do to help my baby/child with teething?

- Children's Tylenol and Children's Motrin (per weight as directed) can be helpful while infants/children are actively teething (for the first few days the teeth are cutting through). Never give your child Aspirin. Some children don't experience any discomfort from teething, but others do or may be extra fussy/not eating or sleeping as well as usual. If you notice this, try some children's Tylenol and/or Motrin to see if it helps.
- Do not use teething tablets, teething gels or other topical treatments on infants (2 and under) as they could be harmful to your baby. Amber teething necklaces are NOT recommended. Please see additional handouts on teething for further information.
- Teething rings, baby banana brushes (we sell them at the office) or a

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wet frozen washcloth can be helpful in addition to oral pain medications as described above.

- Teething does NOT cause fevers (low grade sometimes possible), diarrhea or other symptoms. If your child has other symptoms they are most likely from a virus or from other causes. They often occur at the same time as teething since infants get exposed to viruses frequently and are also teething frequently! See your pediatrician if your child has any other symptoms that you are concerned about.

What should I do when I hear my child grinding their teeth?

- It is common for young children to grind their teeth while asleep. Sometimes it can alarm parents since it can sound very loud. Usually this does not cause lasting problems, and no treatment is necessary since their baby teeth will eventually fall out.
- Your dentist will check for signs of severe dental wear and discuss these with you. There is some research that indicates a possible correlation in some patients with poor muscle tone, crowding/jaw growth, anxiety, ADHD/certain medications and sleep issues. Referrals will be given if deemed necessary.
- If your child has not grown out of the habit by the time their adult teeth are present, an occlusal night guard can be made to protect their permanent teeth. We don't recommend nightguards until after braces are completed.

What if my child gets Canker Sores?

- Canker sores are small sores that occur on the gums. They can be painful and uncomfortable. There are many different causes for getting canker sores that your dentist will discuss with you.
- Canker sores typically resolve on their own within 7-10 days and don't require any treatment.
- Avoid spicy and acidic foods while your child has canker sores (citrus, marinara sauce/tomatoes, vinegar, salad dressing).
- If your child has frequent, recurrent canker sores please discuss this with your doctor. Some people can be reactive to the sodium-laurel

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sulfates (SLS) in toothpaste and may benefit from an SLS-free toothpaste. The only ADA recommended SLS-free toothpaste with fluoride is made by a company called CLOSYS and can be found online.

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