

Oral Health Guidance for Medical Professionals

Children with Special Health Care Needs & Their Caregivers

Dental disease is the most common chronic disease of childhood, five times more common than asthma.

The early and frequent contact that most Children with Special Health Care Needs (CSHCN) have with medical professionals presents a unique opportunity to assist families in understanding the importance of good oral health.

Oral environment

- After providing an oral assessment at every well child check, discuss the oral health of the child with the parent.
- The American Dental Association, the American Academy of Pediatric Dentistry and the American Academy of Pediatrics recommend that children with special needs establish a dental home, that is a place to receive routine dental care, 6 months after the first tooth erupts or by 1 year of age (whichever comes first).
- If caries are detected, make a dental referral and communicate with parent the importance of dental care for all teeth (baby and permanent).
- Discuss normal eruption pattern of teeth with parents.
- Consider fluoride supplementation as needed.

Home care

- Encourage parents to establish a routine for appropriate brushing and flossing when age appropriate; mindful of the challenges some CSHCN may have with this task.
- Communicate the importance of fluoride in toothpaste and water in preventing caries.

Nutrition

- Remind parents to discourage the consumption of cariogenic foods and beverages; limit frequent snacking unless medically necessary and consider dietary counseling.
- Discuss other feeding practices such as overuse of the bottle and using cariogenic food as rewards.
- Prescribe sugar-free medications if possible.

Dental care

- If possible, establish a relationship with a dentist in your community to serve as a resource.
- Recommend that parents ask dentists about preventive measures such as sealants.
- Contact your Local Health Department/District and the State Oral Health Program Web site for educational materials and referrals for local dental clinics: <http://www.doh.wa.gov/cfh/oral%5Fhealth/>

Other

- Communicate with dentist and dental hygienist for helpful information regarding the child's special oral health needs and how to coordinate medical and dental services whenever necessary.
- Prescribe sugar-free medications if available.
- Recommend rinsing with water thoroughly after taking each dose of medication containing sugar and suggest frequent water intake for children taking xerostomic medications.
- Advise rinsing mouth with plain water four times a day to mitigate effects of gastric acid in children with GERD.
- Discourage consumption of sugary snacks and drinks (juices, pop) and avoid using them as rewards. Ask caregiver to look at labels on food products for words ending in "ose" such as "fructose" and "sucrose" and limit their use.

Children with Special Health Care Needs & Their Caregivers continued

- Advise caregiver to not share utensils, cups and toothbrushes with the child to avoid transmitting the bacteria which can cause dental caries. When using pacifiers, do not dip it in honey or sugary liquids. Clean it with water. Do not serve juice in sip cups, just in open cups. Put the child to bed with a bottle filled with water only.
- Advise brushing the child's teeth twice a day with fluoride toothpaste and use any aids that are recommended to keep teeth and mouth clean. Be cautious about the use of a power toothbrush, as it may be too stimulating for some children.
- Encourage parent/caregiver to find a toothpaste their child will tolerate. Try different toothpastes—both for taste and foaming action (Sodium Laurel Sulfate). Explain that toothpastes vary in taste and in amount of foam; and that Fluoride is the essential ingredient for decreasing caries.
- Recommend preventive measures such as fluoridated water, topical fluorides and sealants.
- Discuss safety measures such as the use of seat belts, stair gates, bike helmets, and mouth guards to prevent oral/facial trauma and injuries. Instruct caregiver on appropriate protocol following dental trauma (seek immediate professional care and locate/preserve missing tooth if avulsed).
- Refer to dentist when finding any oral developmental abnormalities.

Further information (Fact Sheets for specific conditions for Medical and Dental Professionals, Oral Health Guidance for parents/Caregivers and Dental Anticipatory Guidance) can be found at:

http://dental.washington.edu/departments/omed/decod/special_needs_facts.php



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