



CHW ORAL HEALTH TRAINING PROGRAM

ORAL HEALTH THROUGH THE LIFE COURSE

SESSION 3



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PRENATAL ORAL HEALTH

PRENATAL HEALTH MESSAGES

Pregnant people with healthy mouths **are more likely** to have babies with fewer cavities.

Remind pregnant patients to :

- Take care of their OWN mouth
- See a dentist early. Dental care is safe during pregnancy!
- Drink fluoridated tap water.
- Chew gum with Xylitol as first ingredient four (4) times a day for five (5) to ten (10) minutes each time.



MORE PRENATAL HEALTH MESSAGES

Other important reminders for pregnant patients:

- **Brush** two (2) times and **floss** one (1) time a day.
- **Keep brushing and flossing** even if your gums bleed – pregnancy hormones make bleeding gums common.
- **After throwing up/morning sickness**, wait sixty (60) min. before brushing your teeth. Instead, swish with a solution of (1) tsp of baking soda in eight (8) oz. warm water and spit it out.
- **Eat healthy for baby's development!** The baby's teeth develop before birth, so limit sweets. If consuming sweet foods or drinks, do so during mealtimes and rinse your mouth with water afterward.



DENTAL TREATMENT IN PREGNANCY IS SAFE!


Pregnant people should make sure their dentist knows they are pregnant!

- **Dental care is safe during pregnancy.** The second trimester is the best time to visit the dentist and get dental work done.
- **Dental x-rays are safe during pregnancy.**
- **Medi-Cal Dental covers pregnant people** who get dental care!
- **Some antibiotics are also safe.** These include Amoxicillin, Penicillin, and Clindamycin. Pharmacists can also inform patients about a prescription's safety.



DENTAL TREATMENT DURING PREGNANCY

Ideal timing for dental treatments during pregnancy (fillings, crowns, etc.)

First (1st) Trimester	Second (2nd) Trimester	Third (3rd) Trimester
→ Fourteen (14) weeks	Fourteen (14) to twenty-eight (28) weeks	~ Twenty-eight (28) to forty (40) weeks
Avoid unless <ul style="list-style-type: none"> • Infection • Pain • Emergency 	 BEST time to get dental work done	Avoid unless <ul style="list-style-type: none"> • Infection • Pain • Emergency
<i>Find a dentist.</i>	<i>Visit the dentist.</i>	



NEWBORN ORAL HEALTH

ORAL HEALTH AFTER DELIVERY

Messages for caregivers:

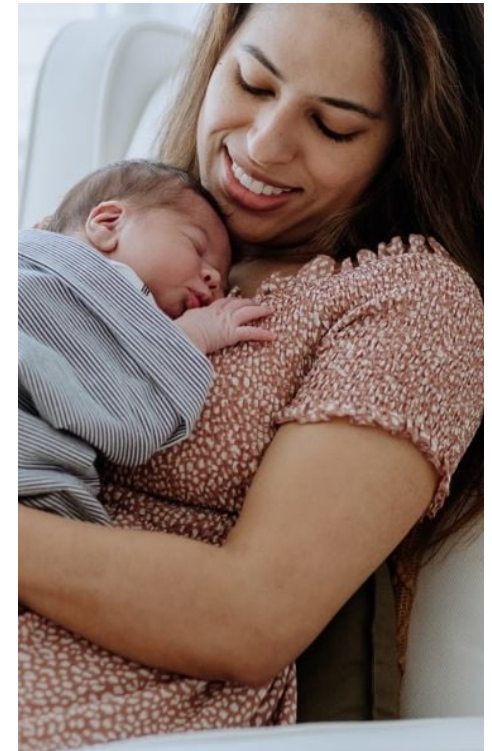
- Breastfeeding is best, at least until six (6) months old, and best through twelve (12) months of age.
- Hold infant while bottle feeding
- Avoid solids foods until six (6) months old.
- No juice for infants. At six (6) months, or when the baby can sit, start offering plain tap water in a sippy cup.
- Do not let baby fall asleep with a bottle or breast in the mouth. Milk (even breastmilk) contains sugar and pools in the mouth, so wipe the baby's mouth after feeding.
- At twelve (12) months, start to wean off the bottle and begin a cup for liquids at meals.



ORAL HEALTH AFTER DELIVERY

More messages for caregivers:

- Never dip pacifiers in sugary liquids and give them to babies.
- Wash pacifiers with soap and hot water. Do not clean pacifiers with your mouth, as this can transfer germs and bacteria to the baby.
- Don't share saliva (utensils, toothbrushes, etc.) This can pass germs that cause cavities.
- Before the first tooth erupts, gently wipe the baby's gums every day with a clean washcloth or finger brush and water after a bottle, after breastfeeding, and before bedtime.





PEDIATRIC ORAL HEALTH

REGULAR DENTAL VISITS

At what age should a child see the dentist?

- By their first (1st) birthday or after their first (1st) tooth erupts.
- Regular visits every six (6) months (more often if they are at high risk for cavities).

Why should a child see the dentist even if they do not have cavities?

- Helps the child stay cavity free
- Cleanings & fluoride varnish applications
- Education about oral hygiene and diet
- Ongoing assessment of oral health and development
- Become a patient of record in case of an emergency



TEETHING

Teething **DOES NOT** cause:

- Fevers
- Upper respiratory infections
- Ear infections
- Diarrhea

Teething **DOES** cause fussiness

- Might be painful for the child
- Drooling is common
- Before the tooth emerges, a hematoma (bruise) may appear
- Does not require treatment



Eruption hematoma

TEETHING TREATMENTS

- Use a bib for drooling
- Massage baby's gums with a clean cloth or finger for comfort
- Do not use numbing gel products for children under two (2) years of age
- Give a cold (not frozen) teething ring or a cold/frozen washcloth to chew on
- Avoid solid frozen liquids/rings -
Can be too hard and can damage gums!
- Avoid liquid-filled teething rings that could break.

Only give safe things to chew on in order to avoid choking.



AFTER THE FIRST TOOTH ERUPTS

- Brush teeth and gums with a small soft baby toothbrush twice daily for two (2) minutes.
- Use a smear of fluoride toothpaste the size of a grain of rice for kids under three (3) years old. No need to rinse.
- Use a pea size of toothpaste for kids three (3) years and older.
- Children need parental help brushing their teeth until around eight (8) years old (when they can tie their shoelaces).
- Brush in gentle circles at a forty-five (45)-degree angle at the gum line to get under the gums.
- Begin flossing when teeth touch each other.



“Smear” or “grain of rice”

When first tooth
and until 3 years old



“Pea size”

AFTER 3 years old

TOOTHBRISHING TIPS

Make sure caregivers can see what they are doing!

- **Lay child down** – on the couch, bed, floor
- **Sit behind** for better visibility
- **Tilt** their head back
- Make it fun, sing a song

Try the Knee-to-Knee method with two (2) people for added help!



MAKE IT FUN!

ELMO'S TOOTHBRUSHING VIDEO:



ARE BABY TEETH IMPORTANT?

The answer is **YES!** Baby teeth:

- Help the child speak clearly
- Allow the child to chew naturally
- Provide a path for permanent teeth

Healthy Teeth & Gums:

- Teeth are pearly and smooth
- Gums are pink, moist, and don't bleed with brushing
- No signs of deviations, roughness, or irregularity
- No white or dark spots
- No bad breath



CAREGIVERS CAN "LIFT THE LIP"

Caregivers should look inside their child's mouth regularly.

Check the teeth and gums for:

- Red, swollen, or bleeding gums when brushing
- Plaque after brushing
- White spots on teeth
- Yellow/Brown/Black spots
- Bad breath
- Gum boil

These may be signs of early decay or infection and should be addressed right away.



"Lift the Lip"



Bleeding Gums



Gum Boil



*Discolored
Teeth*

THUMB SUCKING & PACIFIERS

Thumb sucking increases the risk of open bite, and can even affect speech.

Break the Habit!

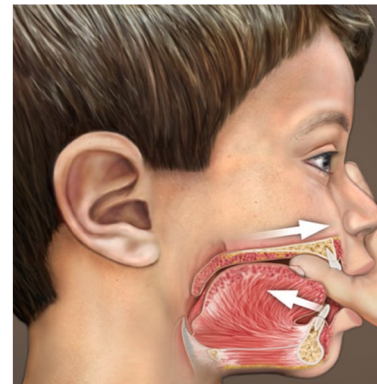
- Caregivers should stop the child's thumb sucking habit by four (4) to six (6) year of age, especially if changes with the bite occur.
- Thumb sucking should be stopped before permanent teeth come in.

Pacifiers

- Orthodontic designs may cause less “open bite.”



Open Bite



EARLY CHILDHOOD CARIES (ECC)

Early Childhood Caries (ECC) is the **most common chronic disease in children**. ECC is defined as one or more decayed, missing (resulting from decay) or filled teeth in primary teeth in children under six (6) years of age. ECC is:

- Twenty (20) times more common than diabetes,
- Five (5) times more common than asthma
- Four (4) times more common than obesity

ECC is sometimes referred to as "Baby bottle caries."

For infants, the **top front teeth** are most affected due to having less protection from saliva and its action of neutralizing acids. Also, because they are most exposed to sugary liquids.



WHITE SPOT LESIONS

The term “**White Spot Lesion**” is defined by Fejerskov et al. as the first sign of a cavity that can be detected with the naked eye.

- White spot lesions begin below the surface of the enamel (first layer of the tooth) and appear as a pale stain.
- White spot lesions can turn into cavities quickly—even in a span of just a few months.



White Spot Lesions



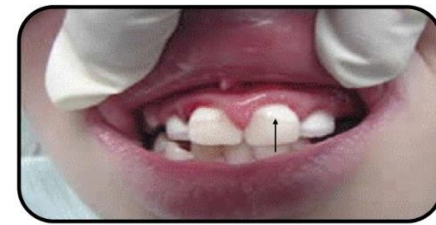
HEALTHY BABY TEETH VS. UNHEALTHY BABY TEETH



Normal primary teeth



White spot lesion



White spot lesion



Tooth decay



Tooth decay



Tooth decay



Tooth decay



Tooth decay



Dental abscess

WHITE SPOT LESIONS



HOW DO WE TREAT WHITE SPOT LESIONS?

Improve oral hygiene and diet

- Brush two (2) times per day using fluoride toothpaste.
- Avoid snacking, especially on sugary foods and beverages as well as chips and crackers.

Fluoride can prevent the formation of cavities

- Spit out (don't rinse) fluoride toothpaste after brushing.
- Drink tap water with fluoride
- A dentist can:
 - Prescribe a high fluoride toothpaste
 - Apply fluoride varnish



Fluoride Varnish Application

TAKING CARE OF A CHILD'S TEETH AT HOME

<https://www.youtube.com/watch?v=swTGzUZi3kl>



ADOLESCENT ORAL HEALTH

ADOLESCENT ORAL HEALTH

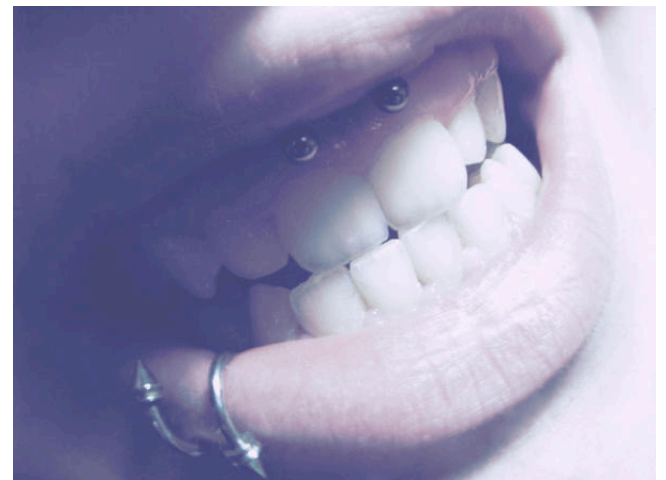
- Adolescence is a critical period for oral health due to physiological and lifestyle changes.
- Hormonal shifts can affect gum health, making adolescents more susceptible to gingivitis and early periodontal disease.
- Common challenges include orthodontic needs, increased risk of dental decay due to dietary habits, and inconsistent oral hygiene.
- Preventive measures, such as **fluoride use**, **sealants**, **regular dental visits**, and **education on healthy dietary choices**, are essential to establish lifelong oral health habits.



ORAL PIERCINGS

Oral piercings can cause many oral health issues, including:

- Swelling
- Trouble talking, eating, etc.
- Prolonged bleeding
- Nerve damage
- Infection
- Injury to gums
- Teeth fracture
- Aspiration (if pieces are inhaled)





ADULT ORAL HEALTH

COMMON ORAL HEALTH ISSUES

Common oral health issues for adults include:

- **Periodontal disease (gum disease):** A leading cause of tooth loss among adults, often exacerbated by poor oral hygiene and systemic health conditions.
- **Tooth wear and sensitivity:** Commonly caused by bruxism (teeth grinding), acid erosion from dietary choices, and aging-related enamel loss.
- **Oral cancer risk factors:** Includes tobacco use, heavy alcohol consumption, human papillomavirus (HPV) infections, and prolonged sun exposure affecting lips.



IMPACT OF LIFE CHOICES

Life choices can have serious impacts on oral health:

- **Smoking:** Increases the risk of gum disease, tooth discoloration, and oral cancers.
- **Alcohol:** Can lead to dry mouth and higher susceptibility to tooth decay and oral cancer.
- **Stress:** Contributes to bruxism and gum disease through inflammation.
- **Diet:** High-sugar diets promote tooth decay, while nutrient deficiencies can weaken gums and teeth.



PREVENTIVE CARE

Consistent oral hygiene habits

- Brushing twice daily with fluoride toothpaste
- Flossing daily to remove plaque

Regular dental cleanings and screenings

- Help identify early signs of gum disease, tooth wear, and oral cancer
- Enable timely interventions

Lifestyle modifications

- Encourage cessation of smoking, reducing alcohol consumption, and managing stress
- Help maintain a balanced diet rich in calcium and vitamin D



“DRY MOUTH”(XEROSTOMIA)

Dry mouth can be caused by medication such as blood pressure medicines, antidepressants, and asthma medicine.

Treatment for dry mouth includes:

- Taking frequent sips of water throughout the day
- Avoiding gum, candies, or cough drops with sugar
- Using gum or candies that contain Xylitol
- In some cases, using over-the-counter sprays (ex. Biotène)



COMMUNICATION & EDUCATION STRATEGIES

Effective communication techniques for adolescents and adults include:

- Culturally sensitive approaches to oral health education
- Tools and resources for promoting oral health awareness
- Social media campaigns
- Community outreach programs

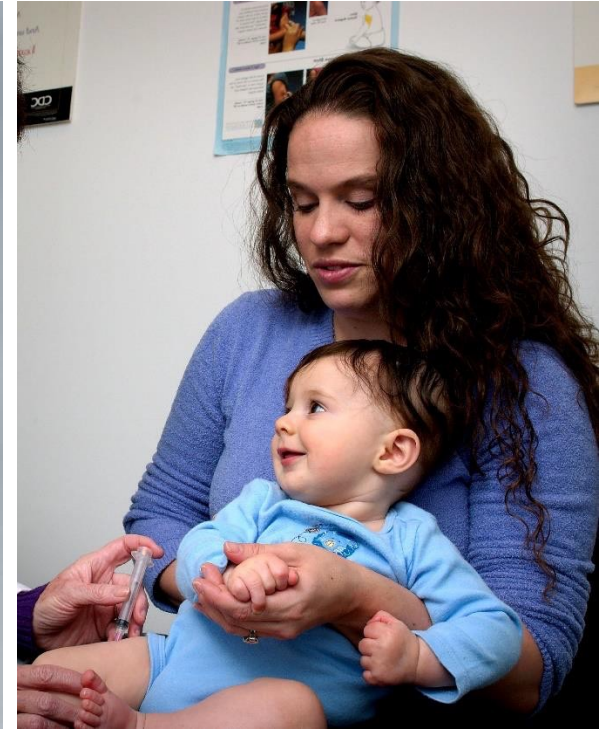
For Adolescents:

- Address dental anxiety
- Use age-appropriate educational tools

For Adults

- Focus on lifestyle and systemic health awareness
- Encourage proactive self-care





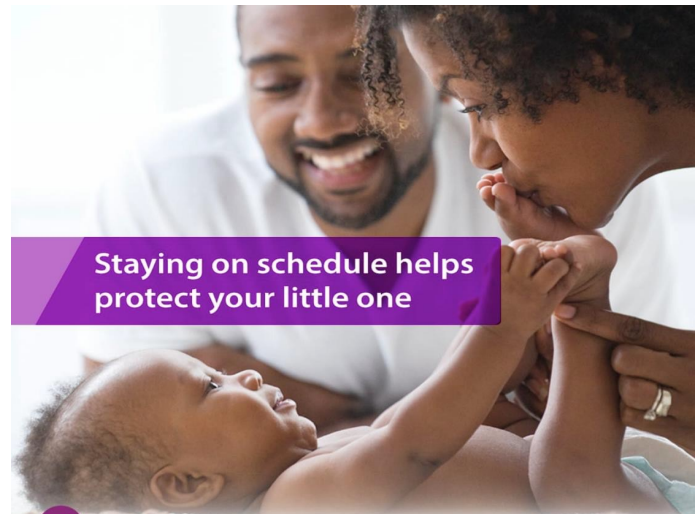
VACCINATION AWARENESS & EDUCATION

ON-TIME VACCINATIONS

Well-child visits are important to:

- Track children's growth and development
- Discuss concerns regarding your children's health
- Schedule on-time ***vaccinations***

On-time vaccinations in children are essential to help provide immunity before they are exposed to life-threatening diseases.



VACCINES STRENGTHEN IMMUNITY

- A baby's immune system is not fully developed at birth.
- Babies face a greater risk of becoming infected and getting sick.
- Children are exposed to germs everyday.
- Vaccines help the immune system learn how to defend itself against germs.
- Vaccines protect babies by helping them build up natural defenses.



VACCINES ARE TESTED

- The FDA regulates vaccines to make sure they are safe and effective.
- Researchers spend years testing vaccines in a lab to see if it can help protect against a specific disease.
- Vaccines are made through three (3) Phase Clinical Trials:
 - Phase One (1): Safety & Dosage
 - Phase Two (2): Side Effects & Immune Response
 - Phase Three (3): Vaccine Benefits
- Even after a vaccine is approved, the FDA and CDC continue to monitor safety.



VACCINE-PREVENTABLE DISEASES



- RSV
- Hepatitis B
- Rotavirus
- Diphtheria
- Pertussis (Whooping Cough)
- Tetanus
- Hib
- Pneumococcal
- Polio
- Covid-19
- Influenza (Flu)
- Measles
- Mumps
- Rubella
- Chickenpox
- Hepatitis A



THE DENTAL VISIT

HOW TO FIND A DENTIST

Ask your child's doctor for a referral

Ask your friends and relatives

Other resources:

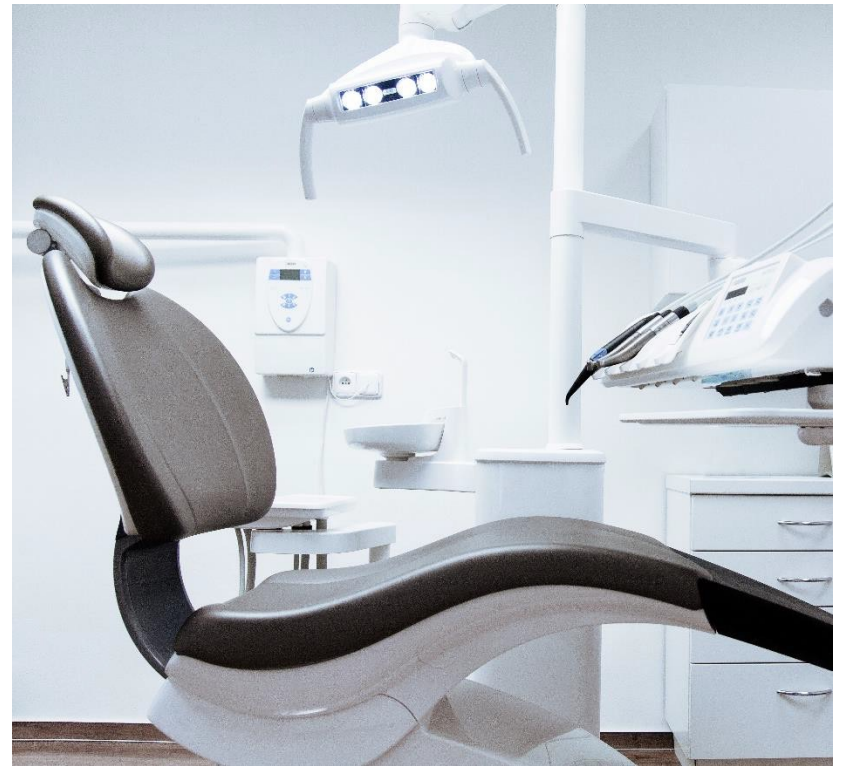
- Do you have Medi-Cal?
Contact Medi-Cal Dental at (800) 322-6384
- California Dental Association at (800) 232-7645
- Insure Kids Now <http://insurekidsnow.gov>
- Smile California <https://smilecalifornia.org/>



FINDING A DENTAL CLINIC

Questions to ask:

- Is your clinic taking new patients?
- Does your clinic take my insurance?
- Does your office speak my language or have a translator?
- When is your clinic open? Evenings? Weekends?
- What information or forms do I need to bring (ID, Insurance card)?



PARTNER WITH THE DENTIST



It's important for caregivers to partner with their child's dentist. If the caregiver is anxious, it increases the child's fear.

Instead, caregivers should be positive, ask questions, and allow the dentist to talk to child.

Remind parents to:

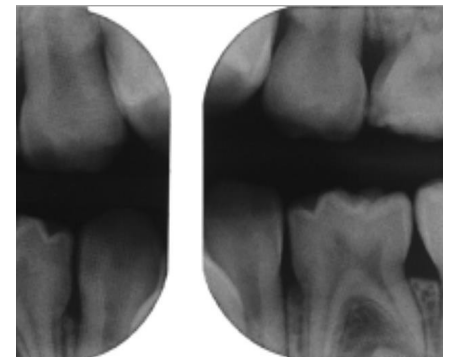
- Prepare by reading a book about visiting the dentist.
- Tell the dentist about their child's health.
- Do NOT use the dentist visit as "punishment."
- If possible, refrain from sharing unpleasant experiences with their child.

RADIOGRAPHS (X-RAYS)

Why are X-rays necessary?

- Provide information on how to best treat the patient.
- They are the only way to check between teeth especially when there's no space between them.
- Help identify cavities, missing or additional teeth, bone diseases, or tooth injury.
- Help determine if there is a need for orthodontic treatment.

Children are at higher risk of getting a cavity than adults and may require x-rays more often.

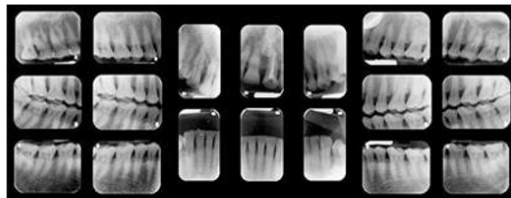


ARE X-RAYS SAFE?

Yes! X-rays have a smaller risk than undetected and untreated dental problems.

- Minimal radiation is delivered when X-rays are taken with proper protection (especially digital X-rays).
- Sleeping next to your spouse, flying in a plane, cooking with a natural gas stove, and eating a banana give you more radiation than an X-ray.

** mrem stands for millirem, the unit used to measure radiation doses*



X-rays = six (6) mrem*



Thirty (30)-minute flight half (0.5) mrem*



Cooking with natural gas = ten (10) mrem*/year



Sleeping with someone = two (2) mrem*/year

REFERENCES

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