Vanessa Amos District Oral Health Programs Coordinator Mid North Coast Local Health District



Oral Health

FIRST 2000 DAYS

Webinar Series

Session #9





I acknowledge the traditional owners on the lands in which we meet, and pay my respects to elders, past, present and emerging



Learning objectives

- •Increase your knowledge of oral health and dental caries in children 0-5 years
- •Increase knowledge of the risk factors that cause dental caries
- •Increase knowledge of and confidence to support families with strategies to prevent and manage dental disease
- •Increase your knowledge of the public dental service and how to access this service
- •Increase your confidence to support and refer families and young people to see a dental professional







The First 2000 Days of Life

The first 2000 days of childhood are crucial for the promotion of home care practices to prevent tooth decay and gum disease for better health outcomes. The early identification of children at risk of oral diseases can provide better oral health outcomes for children.

https://www.nsw.gov.au/initiative/brighter-beginnings





Oral Health

- •Oral health is a key indicator of overall health, well-being and quality of life
- •The Global Burden of Disease Study 2019 estimated that oral diseases affects close to 3.5 billion people worldwide
- Most oral diseases and conditions share modifiable risk factors with other diseases such as cardiovascular diseases, cancer, chronic respiratory diseases and diabetes.
- These risk factors include tobacco use, alcohol consumption and unhealthy diets high in free sugars, all of which are increasing at the global level.
- •There is a proven relationship between oral and general health.
- •It is reported, for example, that diabetes is linked with the development and progression of periodontitis.
- There is a causal link between high consumption of sugars and diabetes, obesity and dental caries



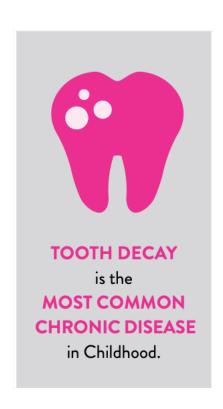


Pregnancy and Oral Health

https://www.youtube.com/watch?v=ZNvh hMgYPU

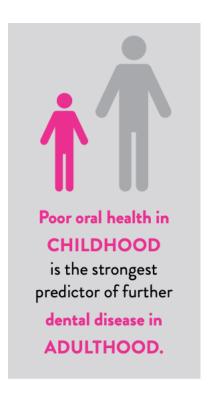


Dental Caries in Young Children



Oral diseases such as

tooth decay,
gum disease
and oral cancer
contribute to illness,
disability and death
in Australia.



Why are baby teeth important?



PRIMARY TEETH KEEP THE SPACE FOR THE PERMANENT TEETH



SPEECH DEVELOPMENT



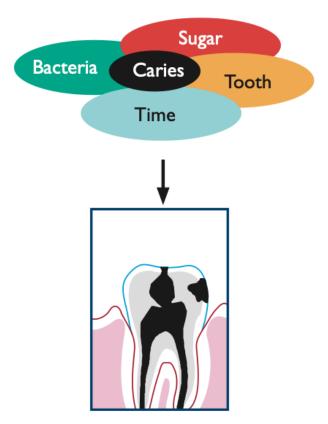
MAINTAIN GOOD NUTRITION AS CHILD CAN CHEW AND SWALLOW PROPERLY



HELP CHILDREN TO FEEL GOOD ABOUT THEIR SMILE AND THEIR APPEARANCE



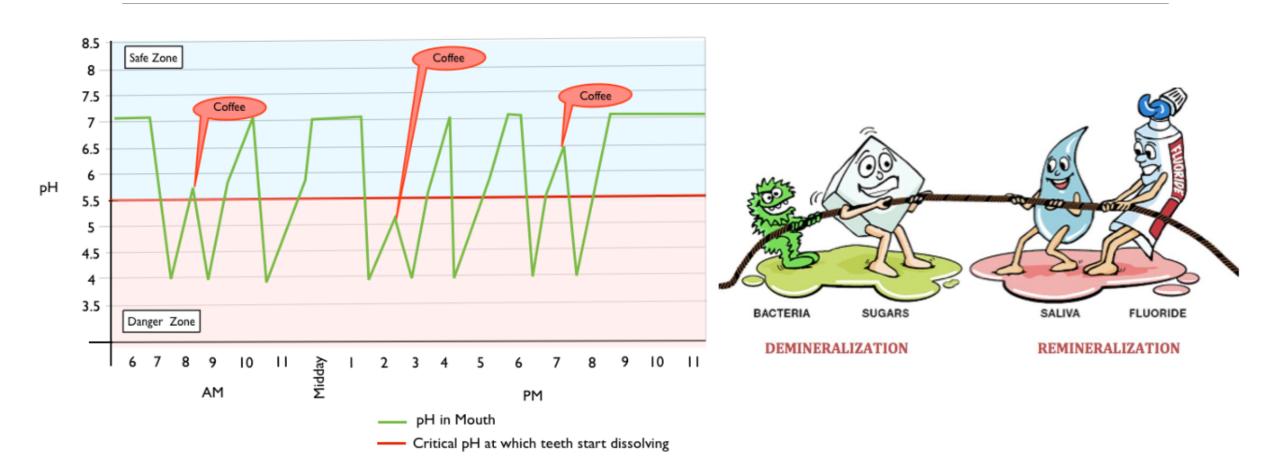
Dental Caries is Multifactorial



Source: http://www.mchoralhealth.org/openwide



Stephen Curve





Transmission

Children are not born with cavity-causing bacteria (streptococcus mutans).



Bacteria can be transmitted from birth onwards, usually from their mother or primary caregiver by placing food, utensils, dummies or teats into their own mouths and then into their child's mouth.



Oral health guidance (planning ahead) should be provided to pregnant women, new parents, and other primary caregivers. By brushing their own teeth daily with fluoridated toothpaste, parents and caregivers can help prevent or reduce tooth decay in both themselves and their children.



Pregnant women should visit a dentist for a dental examination and restoration of all active dental decay.





Early Childhood Caries

Early Childhood Caries (ECC) is a serious dental condition.

Often results in hospitalisation and dental treatment in an operating theatre under general anaesthetic.

The pain, health risks, and costs associated with restoration of carious teeth for children affected by ECC can be substantial.

In NSW 40% of children aged 5-6 years have evidence of dental decay and yet the disease is mostly preventable.





Risk factors that contribute to ECC

Family Stress and parenting methods

Socioeconomic status

Caregivers education levels

Diet

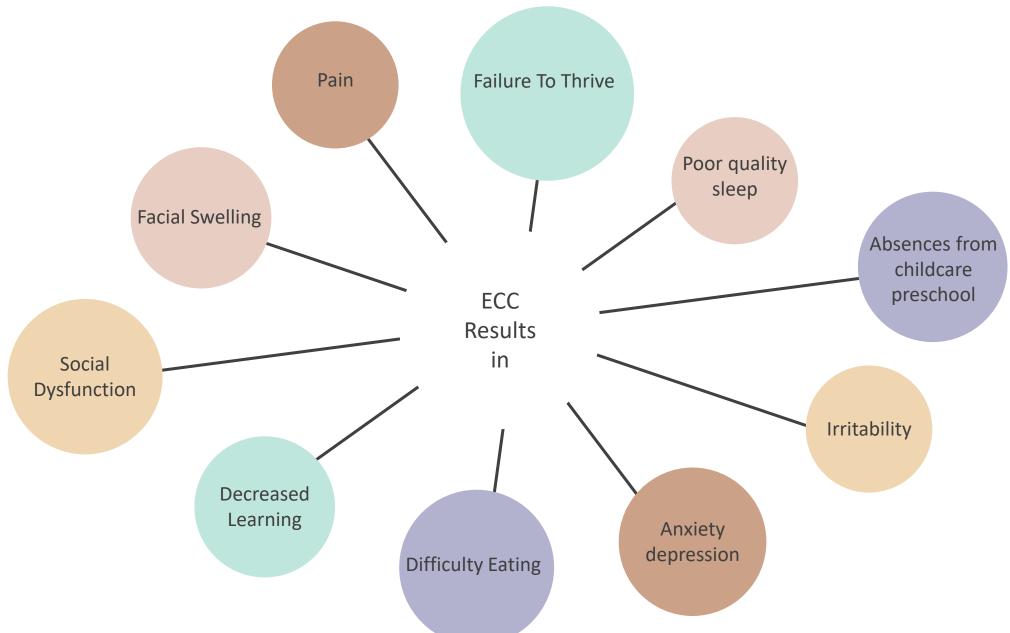
High parental level of bacteria

Oral hygiene routine

Susceptible tooth

Baby to bed with a bottle







Oral Health Advice for Parents



0-4 months

Before baby teeth starts to come through advise parents to clean their Childs gums using a clean, damp cloth.



4-18 months

or as soon as first teeth appear, clean teeth using a child-sized soft toothbrush, without toothpaste



18 months of age

Advise parents to brush their child's teeth twice a day with a small (smear) amount of fluoride toothpaste



Oral Health Advice for Parents



Advise to not rinse their Childs mouth with water after brushing, this will allow the fluoride from the toothpaste to better protect their teeth.



Children need help with brushing until they reach approx. 8 years old



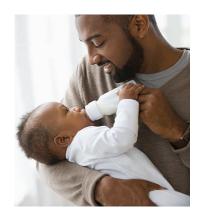
Make tooth brushing fun - play a song, use a timer or tooth brushing app. Children often go through stages of not wanting to brush. Establishing a routine will help them later in life.



Breastfeeding and Bottle Feeding

Health professionals should support current Australian Paediatric Association recommendations for breastfeeding, which align with the World Health Organisation. Children who use a bottle, not only at mealtimes, but also to go to sleep and for comfort at other times during the day, have a significantly higher risk of developing ECC.

Good oral hygiene practices, including reducing the frequency and consumption of sugarcontaining foods and drinks, should be promoted from the time of eruption of the first tooth.



Prolonged tooth contact with milk, juice or any other carbohydrate- containing beverage while children are sleeping is one of the major causes of ECC.





Healthy Eating







- •Advise to only put breast milk, infant formula or water in feeding bottles and take the bottle away once the child has finished feeding.
- Advise to teach children to go to bed without a bottle.
- •Child should start to drink from a cup at around 6 months of age.
- •Offer tap water as this is the best drink for healthy teeth.
- •Provide healthy snacks like cheese, vegetables sticks, fresh fruit, low fat yogurt.
- •Discuss any changes the families can make using 8 healthy Habits



8 Healthy Habits Conversation Staters

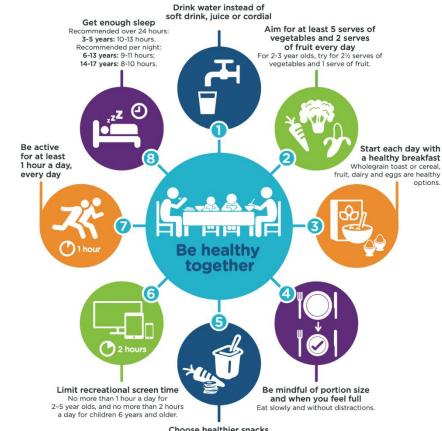
"There are some simple things that you and your family can do to support the whole family to be healthy."

"Which of these habits do you do well?"

"Are there any of these habits you could work on?"

"What are some things you feel you could do as a family?"

"Diet and overall health is closely linked with oral health. Reducing sugar sweetened drinks and drinking water instead of soft drink, juice or cordial can benefit both your dental health and overall health."^{2,3}













Thumb/finger sucking and dummies

- •Thumb/finger sucking and using dummies by a baby is not usually a problem. It may be a concern if the habit is not stopped prior to 4-5 years.
- •Advise to not to dip dummies in anything sweet like honey, jam or condensed milk. This can cause dental decay.
- •Dummies need to be cleaned with water. Dummies should not be cleaned in the parent or carer's mouth.
- Children should never share dummies.

When should my child first visit a dentist?

FIRST DENTAL VISITS

FOR CHILDREN



First dental visits are recommended when the first tooth appears or at one year of age; whichever comes first.





We need your help!

If children lose their baby teeth too early there can be an adverse effect on selfesteem, eating and the position of the adult teeth.

Oral health clinicians have limited access to children under five years of age apart from seeing them once dental problems are already apparent, and often quite severe.

Child Health Professionals, such as Paediatricians, Child and Family Health and Community Nurses, Aboriginal Health Workers and General Practitioners, are often better placed than oral health professionals to access, engage with, and guide new parents about the importance of oral health.

This reinforcement will help children and their families improve their oral health and gain appropriate early referral and access to dental care.

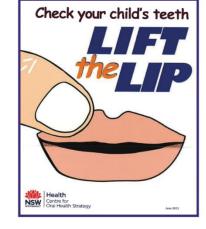


Lift the Lip or See My Smile

'Lifting the Lip' regularly to check for signs of ECC will have significant benefits for young children. Before conducting a mouth examination explain to the parent/caregiver that:

- Baby teeth are important.
- Preventing dental decay is easier and less costly than treating it.
- The earlier that decay is detected the better the outcomes will be for the child.

Give every parent a Lift the Lip brochure at child health check and encourage them to 'Lift the Lip' regularly at home to look for early signs of decay.





Recognising Early Childhood Caries





Oral Health Assessment

To examine the child, sit on chairs in a 'knee to knee' position with the child on your lap.

Look for:

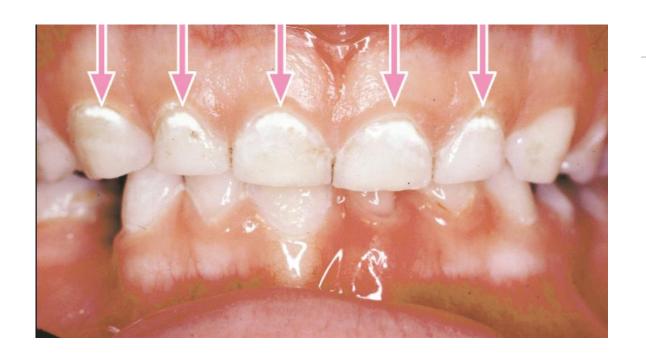
- •The presence of plaque
- •White spot lesions (especially on the upper front teeth) gross cavities (holes) in any teeth. (Gloves are required for this method).
- •Alternatively, ask a parent to 'lift the lip' while the child is having their length measured at the child health check (No gloves are required for this method; however, gloves may be offered to parent).



Recognising Early Childhood Caries

If you see this:

- 1. Explain and discuss the importance of regular toothbrushing.
- 2. Reinforce the need to make healthy diet choices, especially low sugar choices and drinking tap water.



Recognising Early Childhood Caries

If you see this:

- 1. Refer to an oral health professional
- 2. Explain the importance of regular toothbrushing and emphasise that early decay can be reversed.
- 3. Reinforce the need to make healthy diet choices, especially low sugar choices and drinking tap water.

Cavitated lesions



Rampant decay



Recognising Early Childhood Caries

If you see this:

- 1. Make an urgent referral to an oral health professional.
- 2. Explain the importance of regular toothbrushing.
- 3. Reinforce the need to make healthy diet choices, especially low sugar choices and drinking tap water.

Case Study



Chantelle was brought into the dental surgery by her parents at 3 years of age because they were becoming worried about the appearance of her front teeth.

She is the third of four children. Her older brother and sister both suffered early loss of primary teeth because they "came through bad". Chantelle's mother thinks that her children have inherited "soft teeth" from their father who had dentures by the age of 25.

This is Chantelle's first visit to the dentist. Clinical examination revealed rampant caries and chronic abscesses on an upper front tooth and a lower back tooth. During interview, her mother revealed that Chantelle was a poor eater and a restless sleeper. At bedtime her mother was busy with her baby brother so she gave Chantelle a bottle of milk in bed to help her settle. She believed that this would assist her "soft" teeth by providing her with more calcium and also give her much needed nutrition since she didn't eat a lot at tea time.

Now Let's think about it...

What are the risk factors?

How would you support this family?





Case Study – Treatment

Chantelle was treated under general anaesthesia; all 10 upper teeth and four lower molar teeth were extracted.



Case Study- Post Operative Management

At the first post-operative appointment the family diet was discussed in depth and the following practical advice was given:

Stop the bottle completely

Referral to the PICNIC project

8 healthy habits resource - "what are some small changes you and your family could make to support lifestyle changes?"

Child (1,000 ppm) fluoride toothpaste

Brush twice a day, morning and evening

Lollies as a rare treat

Reduce soft drinks

Drink tap water between meals.

Once the painful abscessed teeth were removed Chantelle was able to eat a more balanced diet. Within two months she had gained two kilograms. Her younger brother is no longer having a bottle of milk at night.



Policy drivers for oral health



Guideline



Growth Assessment and Dietary Advice in Public Oral Health Services

Summary This Guideline provides direction on the implementation of routine height and weight measurements for children, and associated dietary advice in public oral health services. It complements the NSW Health Guideline Growth Assessment in Children and Weight Status Assessment in Adults (GL2017_021), but provides additional information specific to public oral health services.



NSW Healthy Eating and Active Living Strategy:

Preventing overweight and obesity in New South Wales 2013-2018





Oral Health 2020:

A Strategic Framework for

Dental Health in NSW

2000 DAYS

CONCEPTION TO AGE 5

FRAMEWORK

for the NSW Health sector which supports children and their familiato have healthy and fulfilling live

A STRATEGIC HEALTH PLAN FOR CHILDREN, YOUNG PEOPLE AND FAMILIES

2014-24

MEDIA RELEASE

Wednesday, 15 June 2022

A BRIGHTER BEGINNING FOR ALL NSW CHILDREN

A life-changing package for NSW children and families has been announced today with a \$376.5 million investment over four years in child development and family support as part of the 2022-23 NSW Budget.

Premier of NSW Dominic Perrottet said the Brighter Beginnings package will provide all children with a full suite of developmental checks before they start school and make the baby blue book digital.

"The first 2,000 days of a child's life are critical to their development and success and we want to ensure they get the best start possible," Mr Perrottet said.

Policy Directive



Ministry of Health, NOW 73 Miller Street North Systrey NOW 2000 Locked Mail Bag 951 North Systrey NOW 2000 Telephone (02) 9001 9000 Fax (02) 9001 9101 http://www.hasth.nsw.gov.au/bolices/

Early Childhood Oral Health (ECOH) Program: The Role of Public Oral Health Services





Early Childhood Oral Health

What Child Health Professionals need to know

NSW Health



Early Childhood Oral Health (ECOH) online training

Dental decay (caries) is preventable, yet 2 in 5 (42%) children aged 5 -10 have experienced tooth decay in their baby teeth (AIHW 2014), which can lead to pain, difficulty with eating and speech issues. Early detection and intervention is the key. As primary health providers you play an essential role in engaging with new parents and guiding them to make healthy choices in caring for their children's teeth. The Centre for Oral Health Strategy, NSW Ministry of Health, has developed 'free online training' to support you in preventing dental caries.

The training aims to support primary health care providers in identifying, preventing and managing early childhood caries for children 0-5 years of age. It provides practical support for caregivers in improving the oral health of young children.

This training is suitable for medical and dental practitioners, nurses, midwives, Aboriginal health workers, allied health professionals and those working with children services.

Four online learning modules have been developed to increase confidence, knowledge and skills to help deliver better oral health outcomes for young children.

The training takes approximately 45 minutes to complete, attracts 1 CPD point and addresses the following topics:

Module 1- Prevalence of early childhood caries

Module 2-Dental decay process

Module 3-The role of child health professionals

Module 4-Preventive advice

To register:

https://oralhealthlearning.health.nsw.gov.au/

For any queries:

MOH-ECOH-Learning@health.nsw.gov.au

For additional information visit:

NSW Public Dental Service



July 2022 @ NSW Health. SHPN (COHS) 220623.



Resource to support Child Health Professionals

Guideline



Ministry of Health, NSW 73 Miller Street North Sydney NSW 2060 Locked Mail Bag 961 North Sydney NSW 2059 Telephone (02) 9391 9000 Fax (02) 9391 9101 http://www.health.nsw.gov.au/policies/

Early Childhood Oral Health Guidelines for Child Health Professionals, 3rd Edition

Document Number GL2014_020

Publication date 17-Dec-2014

Functional Sub group Clinical/ Patient Services - Dental/Oral

Population Health - Health Promotion

Summary The aims of the Early Childhood Oral Health Guidelines are to improve

the health and well-being of children in NSW by integrating oral health into general health interventions provided by Child Health Professionals. The Guidelines add value to the Child Personal Health Record, which

includes basic oral health information for parents.

https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/GL 2014 020.pdf

How to access resources to support families



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<u>Home</u> > <u>Oral health</u> > Healthy Mouths Healthy Living

Healthy Mouths Healthy Living

https://www.health.nsw.gov.au/oralhealth/prevention/Pages/default.aspx



Mid North Coast Oral Health Service

Our clinic locations are in Coffs Harbour, Nambucca, Port Macquarie and Kempsey, with child only clinics in Wauchope, Laurieton and Galambila Aboriginal Health Service in Coffs Harbour.

The MNCLHD Oral Health service runs projects to manage the oral health needs of targeted population groups such as children and the elderly, lower socio-economic groups, Aboriginal and Torres Strait Islander people and Refugee groups via the following programs across the district:

- Primary School Mobile Dental Program
- Building Brighter Grins Closing the Gap Program
- Spencer Residential Aged Care Program
- •Refugee and Asylum Seeker Oral Health Program



Public Oral Health Services in NSW





https://www.health.nsw.gov.au/oralhealth/Publications/public-dental-services-brochure.pdf



Accessing dental care

The public dental services provide free general and emergency dental care.

All children under the age of 18 years who are NSW residents with a Medicare card are eligible for public dental services in NSW.

Adult NSW residents must be eligible for Medicare and be listed on one of the following Australian Government concession cards:

- Health Care Card
- Pensioner Concession Card
- Commonwealth Seniors Health Card

Private dental clinics

Child Dental Benefit Schedule (CDBS), for more information visit - https://www.servicesaustralia.gov.au/child-dental-benefits-schedule

Questions?

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References

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