

Protect Your Child's Smile



Children with Special Needs



Tips for a Healthy Mouth

Brush teeth twice a day.
Floss once a day.
Go to the dentist twice a year.
Limit sugary snacks and drinks.
Drink water with fluoride.

For more information on oral health:

SC DHEC Division of Oral Health
www.scdhec.gov/oralhealth

SC Helpline for Women,
Children & Infants
Care Line Number: 1-800-868-0404

Connecting Smiles: an outreach effort to integrate preventive oral health information and resources into existing systems of care including medical and dental offices and community-based programs



Different Positions for Brushing

There are a number of positions you can use to clean a child's teeth. Remember that supporting the head, being able to see inside the mouth and moving the brush around easily are important. Make sure you have good light and can see what you are doing.

Work with your dentist or dental hygienist to find the safest, most comfortable position for you and your child.

Standing in the Bathroom:

- If your child is standing, have him stand in front of the bathroom mirror with his head tilted slightly against your body.
- Place your hand gently over your child's hand so that you can help with toothbrushing. This will help your child learn how to brush.
- Standing behind the child makes it easier for you to brush the child's teeth.

Sitting on the Floor:

- Sit on a chair with the child sitting on the floor in front of you.
- Have the child lean against your knees.
- You can gently place your legs over the child's legs or arms to keep them still, or a second person can help you.

Lying on the Floor:

- Place the child on the floor.
- Kneel behind the child.
- Place a pillow in your lap.
- Place the child's head on the pillow.
- Use your arm to help hold the child's head still if needed.

* Remember that in any position, it's important to support the child's head. Take care to make sure the child does not choke or gag when head is tilted back. Lying or reclining on the floor can be very difficult for a child with cerebral palsy or any other condition involving muscular control. A sitting position is a better option for these children.



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Make the Dentist a Part of Your Child's Health Team

As the parent of a child with special needs, you know the importance of regular visits with your doctor. It is just as important for your child to visit the dentist regularly.

Suggestions:

- Take your child to the dentist by their first birthday. An early dental exam will help monitor proper growth and development and detect dental decay.
- An early trip to the dentist will also help your child to feel more comfortable going to the dentist throughout their lifetime.
- The dentist can monitor your child's teeth to make sure teeth are developing properly and help prevent bite problems.
- Tell the dentist about your child's eating habits, medications and special conditions that may make taking care of their teeth difficult.
- Share with your dentist the name of your child's physician

Contact your dentist as soon as possible if:

- A dental injury occurs.
- Your child is experiencing pain in their mouth.
- You have questions about the appearance of your child's mouth.
- Your child's baby teeth have not fallen out and their permanent teeth are trying to erupt.
- Your child's teeth are overcrowded. An early orthodontic consultation may be recommended. There are certain procedures that may limit or possibly prevent the need for extensive orthodontic treatment.



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Key Things to Share with Your Child's Dentist

Check the boxes that apply to your child and give to your dentist or hygienist at your child's dental visit.

Special Conditions:

- My child has a physical handicap, developmental problem, or serious medical illness that makes it difficult to clean the mouth.
- My child does things (e.g. struggling, kicking, head turning, refusal to open his/her mouth) that make it difficult to care for their mouth and teeth.
- My child has eating problems that result in foods remaining in the mouth.
- My child is in the hospital and/or suffers from a chronic illness that stops daily oral care.
- My child refuses to have anything put in his/her mouth.
- My child takes medications (anti-seizure or behavior control) that may cause dry mouth, ulcers, or gum swelling.
- My child has a birth defect that makes feeding difficult (e.g. cleft palate) or limits proper chewing.
- My child has a G-Tube for feeding.
- My child goes to special therapy that such as: physical, speech or occupational.

Eating Habits:

- My child eats a lot of starches, and nutritional supplements.
- My child's diet is limited to soft or puréed foods.
- My child eats a lot of sugars and starches in school programs or as behavior control in the home.
- My child takes oral medicines that contain sugars.
- My child uses a nursing bottle (milk, formula) for feeding instead of age appropriate foods.

Mouth and Teeth:

- My child has a condition that makes the mouth tissues sensitive (i.e. cold sore or ulcers).
- My child has crowded teeth that make it more difficult to clean.
- My child drools.
- My child does not go to the dentist regularly.
- My child does not let me brush his teeth.

General Care:

- My child receives care from persons other than parents such as brothers or sisters, grandparents, other relatives, baby-sitter, staff at respite programs or when attending educational programs such as: Head Start, First Steps, child care center, and school.



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The Effect of Diabetes on Oral Health

The term "diabetes" refers to a group of diseases that affect how your body uses blood sugar. If you have diabetes it means you have too much glucose or blood sugar in your blood. Diabetes can also affect a person's mouth and can impact their oral health.

Common problems in the mouth related to diabetes:

- Tooth decay
- Gum disease
- Dry mouth
- Thrush—a fungal infection in the mouth

Tips that will keep your child's mouth healthy:

- Control your child's blood glucose. Good blood glucose control can help prevent mouth problems.
- Brush and floss twice a day.
- Schedule regular dental check-ups to keep a healthy smile.
- Be sure to tell the dentist that your child has diabetes.
- Take time to check your child's mouth once a month for any problems.
- Tell your dentist if you notice that your child's gums are sore, swollen or bleed when the child brushes or flosses.
- Tell your dentist if your child's mouth appears to be dry or has white patches.



Healthy People. Healthy Communities.



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Asthma and Oral Health

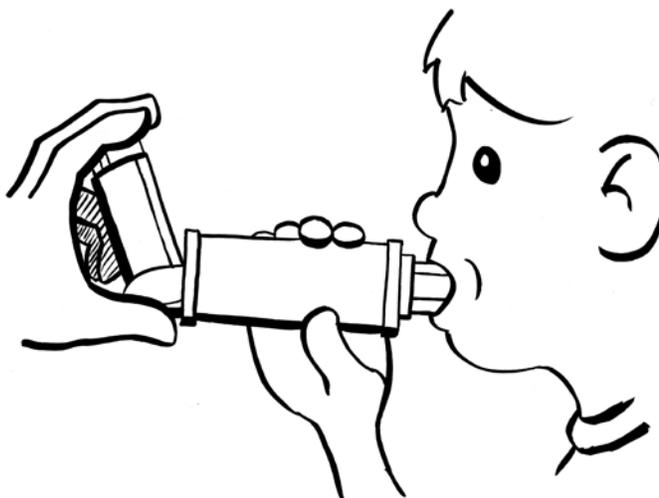
People with asthma may have more cavities, bad breath and gum problems.

Tips:

- The mouth should be rinsed with water after using an inhaler and after taking medicines such as cough syrups.
- Patients with asthma should visit the dentist regularly and follow the suggestions detailed below.

At the Dentist's Office:

- Bring your child's inhaler to their dental appointments.
- Give your dentist information about your child's latest attack, the factors that trigger their attacks and the severity of their condition.
- Let your dentist know if your child is on long-term steroids.
- Be sure to tell your dentist what medicines your child is taking and in what amounts.
- Give your dentist information about the latest asthma attack and the frequency and severity of your child's attacks and what triggers them.
- The dentist should know when or if your child is hospitalized and/or in the emergency room.



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Taking a Child with Autism to the Dentist

Before the appointment:

- Prior to the first appointment, inform the dental staff that your child is autistic.
- Children with autism function best with routine. It may be helpful to allow your child to visit the office before their appointment so they can become familiar with the setting.
- Help your child visualize what the visit to the dentist will be like by providing a picture of the office, the chair and the dentist.
- Set up appointments when the office is not busy. Minimize the number of distractions.

During the appointment:

- Share with the dentist your child's intellectual and functional abilities, including information on the best way to communicate with your child.
- Be aware that oral care may trigger violent and self-injurious behavior such as temper tantrums or head banging.
- Praise and reinforce good behavior after each step of a procedure. Ignore inappropriate behavior as much as you can.
- Discuss with your dental provider any concerns that you may have regarding your child's oral health.



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Oral Health and Children with Down Syndrome

Good home oral care is very important for the patient/child with Down syndrome. There are mental and physical challenges that need to be considered, but providing and teaching oral care to children with Down syndrome can be done with creativity and patience.

Medical problems associated with Down syndrome that directly impact oral health:

- Approximately 50 percent of adults with Down syndrome have Mitral Valve Prolapse (MVP) and may need antibiotics before dental treatment.
- Many people with Down syndrome have weaker immune systems that can lead to a higher rate of infections and gum disease.
- Children with Down syndrome may be mouth-breathers and have dry mouth, causing cracking of the mouth and lips.
- A child or adolescent with Down syndrome may have less muscle tone. This can make chewing and natural cleansing of the mouth less efficient, and food may remain on the teeth longer which can lead to decay.
- Low muscle tone can also lead to problems with swallowing, drooling, and speaking. It makes tooth brushing and flossing more difficult.
- Children with Down syndrome may have delayed and irregular tooth eruption.
- There is a high rate of missing teeth, and some teeth may be overly small or abnormally formed. Diet may need to be altered because there may not be enough teeth to chew certain foods.

Tips for oral care:

- Use the same time, location, and position to brush and floss.
- Try to avoid the back top of the tongue when brushing—this area activates the gag reflex.
- Help your child learn to brush and floss their teeth. As the child gets older, a power brush and a floss holder may help.
- If possible, substitute sugar-free medicines if they are available.
- Do not reward good behavior with sweets, and avoid using candy as incentives. Try to give non-cavity causing foods for snacks such as fruits, vegetables, dairy products and whole grains.
- Offer your child water throughout the day. Medications may cause dry-mouth. Take your child to the dentist regularly and make the dentist a part of your health team.

