

An Apple a Day Keeps the Dentist Away

Healthy Baby Teeth

Ask the Orthodontist

Walk to Defeat ALS

February 2012

Nothing but the Tooth



"Smile at each other, smile at your wife, smile at your husband, smile at your children, smile at each other -- it doesn't matter who it is -- and that will help you to grow up in greater love for each other."

-Mother Theresa

An Apple a Day Keeps the Dentist Away

Regular dental visits and brushing teeth twice a day are good ways to keep your children cavity-free, but your child's diet and snack choices have just as much of an impact on his smile.

Tooth decay occurs when plaque (a thin film of bacteria on the tooth) comes in contact with sugar, which causes acid to form. The tooth is then exposed to the acid for more than 20 minutes. The interaction between the tooth and acid results in tooth decay. Tooth decay contributes to cavities, gum disease, and even tooth loss.

Limiting exposure to sugar is one way to decrease your child's risk of tooth decay. Snacks that are high in added sugar or stick to the teeth should be avoided when possible. Foods that contribute to tooth decay include soft drinks, sticky and sugary candies, and high carbohydrate foods that stick to the tooth. Here are some tips on snacking to help prevent tooth decay:

Limit these snacks:

- Crackers, chips, and cookies; high starch foods tend to stick to teeth long after the snack is consumed.
- Fruit juice, carbonated beverages, sport drinks, and soda; these beverages essentially bathe teeth in sugar.
- Dried fruits such as raisins or apricots.

- Peanut butter; this sticky food tends to have large amounts of added sugars. Opt for natural peanut butter that lists only peanuts or peanut and salt as the ingredients.

Eat more of this:

- Sugar free chewing gum; increases saliva production, which washes away acids and balances pH in the mouth. It also removes food particles in between teeth.
- Crunchy fruits and vegetables such as apples, carrots, and celery; biting into these foods helps scrape off plaque and starchy residue from the tooth's surface.
- Water; prevents prolonged exposure to acids.
- If your child enjoys candy once in a while, chocolate is a better choice because it doesn't stick to the tooth like chewy candy, and doesn't take long to eat like hard candy or lollipops.

Other ways to prevent decay:

- Limit the number of snacks throughout the day.
- Rinse mouth with water after all meals.
- Brush at least twice a day, and floss teeth regularly.

Healthy Baby Teeth

Ensuring your child grows up to have a perfect, healthy smile starts just a few days after they're born -- long before teeth erupt. Your child's baby, or primary, teeth are as important as their permanent adult teeth. Primary teeth help little ones to chew and speak, and they also hold space in the jaw for permanent teeth that are growing under the gums. If they're not cared for properly baby teeth can decay, leading to a gum infection called gingivitis, which can also harm their permanent teeth.

The most common cause of childhood tooth decay is from the frequent, prolonged exposure of a baby's teeth to liquids that contain sugar (fruit juice, breast milk and formula). Tooth decay can occur when babies are put to bed with a bottle, or when a bottle is used as a pacifier for a fussy baby. The sugary liquids pool around the teeth while sleeping. Bacteria in the mouth use these sugars as food. They then produce acids that attack the teeth. This type of decay, called baby bottle caries, results in severe damage to the primary tooth, gums and overall health and appearance of teeth.

The good news is that tooth decay is almost completely preventable. You can help prevent tooth decay for your child by following the tips below:

- Infants should always finish their bottles before being put to bed.
- Place only formula or breast milk in bottles. Avoid sugar water, juice or soft drinks.

- If your child uses a pacifier, provide one that is clean — don't dip it in sugar or honey, or put it in your mouth before giving it to the child.
- Encourage children to drink from a cup by their first birthday and discourage frequent or prolonged use of a sippy cup.
- After each feeding, wipe your infant's gums with a clean, damp washcloth. After 6 months of age, offer a cup of water after meals. This will remove plaque and bits of food that can harm erupting teeth.
- When your child's teeth begin to erupt, brush them gently with a child's size toothbrush and water.
- When your child can be counted on to spit and not swallow toothpaste (usually not before age two), begin brushing the teeth with a pea-sized amount of toothpaste with fluoride.
- Brush your child's teeth for him until he is at least six years old.
- Schedule regular dental visits. The American Dental Association (ADA) recommends that a dentist examine a child within six months after the first tooth comes in and no later than the first birthday.
- Ensure that your child has adequate exposure to fluoride. If the tap water in your area does not contain fluoride, your child may need to start fluoride supplements at 6 months old.



Ask the Orthodontist

This month's column is contributed by Dr. Jim Wortham, an orthodontist with offices in Orlando, Winter Garden, and Clermont.

As an orthodontist, I often hear some common questions that many moms, dads, and children have. Below are some answers to a number of those questions. Although there are some generalities that are true for most patients, the only way to give guidance that is specific to your child is to see an orthodontist. The good news is that most orthodontists will see your child for a complimentary initial exam in order to let you know what may be needed.

Question 1: When should I take my child in to see an orthodontist?

The American Association of Orthodontists recommends children be evaluated around the age of 7. Most kids do not need any treatment at this point, and most will simply be followed yearly as they mature and their adult teeth continue to erupt. There are a small number of kids (about 10%) that have a significant bite problem that should be addressed at an early age to prevent the need for more extensive treatment later. As an orthodontist, I am looking for the normal development of teeth and jaw relationships. This is best done when the six year molars and several of the permanent front teeth have erupted.

Question 2: Why should I get braces?

Many patients have braces to correct the esthetics of their smile (i.e. crowded and crooked teeth or excessive spacing). Some patients are aware and want their bite problem fixed (i.e. overbite-where the top teeth stick out too far or underbite-where the bottom teeth are in front of the upper teeth). When the bite is correct and the teeth are straight, patients will tend to have healthier teeth in the long run. This is because it is easier to keep straight teeth cleaner, and the teeth are designed to fit together a particular way in order to minimize excessive wear or pressure on certain teeth. Studies have also shown that people perceive a person with an attractive smile as more social and a better student, whether they are or not. I have found that one's personal confidence is often in-

creased when the patient perceives themselves as having a more attractive smile.

Question 3: Do I need to be referred to see an orthodontist?

The simple answer is no. Often your general dentist will refer your child to see an orthodontist if they have a concern they want evaluated. However, you can see an orthodontist without a referral if you or your child has a concern.

Question 4: When will my child need braces?

As noted above, about 10% of the patients we see have a true need for orthodontic treatment at an early age (7-9 years old). There are a number of children that will benefit from an improved self-esteem once the alignment of the teeth is improved at the same age frame (7-9 years old). The remainder of kids are best treated once the majority of the baby teeth have fallen out and the adult teeth have erupted. A general rule is between 11 and 13 years of age.

Question 5: How long do I have to wear braces?

The time is completely dependent on the severity of the case. Again, a general rule is 1 to 2 years. But I have been done with some cases in 6 months and others have been in treatment for 3 years. Often the duration is heavily dependent on how the back teeth fit together more so than how crowded or spaced the front teeth appear to be.

Question 6: Do braces hurt?

No, they don't feel a thing (that's my joke). Your teeth will be a little sore each time you have your braces adjusted. This discomfort lasts about 2-3 days and then is gone. Most patients report the severity to be a 5 on a scale of 1-10. Patients also report that the first adjustment is usually the worst and subsequent appointments are easier. Ibuprofen is recommended to help with the discomfort. Normal daily activities are not affected.

The Tooth Brushing Song

If your children rush through teeth brushing, have them sing this song in their head at least 3 times through to ensure the teeth get cleaned well.

To the tune of "Row, Row, Row Your Boat"

Brush, brush, brush your teeth, gently round your gums.

Merrily, merrily, merrily, merrily, brushing can be fun!!

Brush, brush, brush your teeth, brush them every day.

The front, the sides, the back, the top, to keep decay (or the bugs or germs) away!

Floss, floss, floss your teeth, floss without delay.

You need to do this every day, to keep decay (or the bugs or germs) away!

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March 9, 2012
7:00pm
Lake Eola

Middleton Pediatrics supports Team Fraps and the Walk to Defeat ALS.

On Friday, March 9, 2012, members of the Middleton Pediatrics team will be walking to raise money and awareness for ALS. Check-in begins at 5:30pm and the walk starts at 7:00pm at Lake Eola.

If you would like to learn more about ALS and how you can help, visit <http://www.alsa.org/>

To make a donation and help Christine May reach her goal, you can visit her page at http://web.alsa.org/site/TR?px=3255368&pg=personal&fr_id=7775&et=hyYInpctlei9cnfv8E2arg&s_tafid=152767