

# A head start against tooth decay

January 7 2015, by Helene Ragovin

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Massachusetts public health advocates have developed oral health guidelines to ensure the well-being of the 70,000 babies born in the state each year as well as that of their mothers.

The perinatal oral health [guidelines](#) come out of a Massachusetts Department of Public Health [task force](#), which included, among others, representatives from Tufts School of Dental Medicine. While many organizations, including the American Academy of Pediatric Dentistry, and some other states have similar guidelines, these are the first specifically crafted for Massachusetts. They were distributed in print and online to dentists, physicians and community health workers in the late fall.

"We wanted to make this a useful document that will be easy for all health-care providers to use," says David Leader, D85, MPH13, an associate clinical professor of diagnosis and health promotion, who represented both Tufts and the Massachusetts Dental Society on the task force. The goal of the guidelines is to promote collaboration among dentists and physicians who care for pregnant women and young children.

The guidelines take into account changes in fluoride concentrations in public water supplies and in the FDA's drug-safety classification system for expectant mothers, among other recent developments, Leader says. They also address the question of when children should first visit the dentist and the use of fluoride for toddlers, says Hubert Park, D11, DG14, MPH14, a [pediatric dentist](#) who sat on the task force while a

postgraduate student.

"Some of these changes are not getting communicated to the broader public, even if dentists have the updated information," Park says.

It has been established that a [pregnant woman](#)'s oral health status can affect her newborn's future well-being—for instance, mothers can pass on cavity-causing bacteria to their babies. Yet not enough expectant mothers receive dental care. Data from the federal Centers for Disease Control and Prevention from 2010 show only about half of [pregnant women](#) in Massachusetts had their teeth cleaned during their pregnancies.

For too long, Leader says, there has been a misconception that dental treatment is risky during pregnancy.

"Women who are pregnant should get complete [oral health](#) care," he says. In fact, he notes, "not only is going to the dentist while pregnant a good idea; it's a great idea—because if you wait until after the baby is born, who's got the time?"

Provided by Tufts University

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