Teething and Changing From Baby to Adult Teeth

Teething usually occurs between the age of six and eight months, with new teeth continuing to erupt until all twenty baby teeth are in place by two-and-a-half years of age. Teething can be accompanied by such symptoms as mild pain and itching gums, as well as increased salivation and drooling that occurs around this period. Teething never causes prolonged high fever.

Baby (or milk) teeth play an important role, allowing your child to chew foods that later stimulate bone and muscle formation. Moreover, growth of the lower part of the face also depends to some extent on the use of jaws. Baby teeth occupy the space where adult teeth will come through in the future, and children also need healthy front teeth in order to be able to pronounce the s, f, v, and ð sounds correctly.

Transition from baby to adult teeth occurs between the age of six and twelve years. First adult teeth arrive at six, when six-year molars appear behind baby molars. Then permanent front teeth (1,2), eye teeth (3) and pre-molars (4,5) push through to replace the baby teeth. By the end of this period, twelve-year molars (7) appear behind the six-year molars (6).

Dentist Check-ups

It is advisable to take your child to the first dental appointment before the child has sprouted all the twenty baby teeth between the age of two and three years. During the first visit to the dentist the child will be introduced to the dentist’s clinic environment, the child’s teeth will be examined, while the parents will receive instructions on care for their child’s teeth, diet and the use of fluoride. Regular dental check-ups once a year are an important part of preventive care for your child’s teeth.

Tooth Trauma

Tooth traumas are common, especially among children who are literally making their first steps in life. Excessive bleeding occurs in wounds in the mouth’s mucus membrane, but healing is also rapid and often leaves no marks. It is also common that teeth become loose, especially teeth in the middle front row on the upper gum, while enamel can chip or a tooth/teeth break. It is important to have your dentist assess the trauma and observe the child for some time there after.

Take your baby to the dentist’s not later than at the age of two to three years

Diet

Breast milk is the best nutrition for infants, as it contains all nutrients that children need in order to grow and develop during the first six months of their life. It is advised that you use breast milk and/or special infant milk formulas as a part of nutrition during the first year of your baby’s life or longer. Once teething occurred, it is recommended to cut down bedtime feeds and give the child some water if the child wakes up thirsty at night. Avoid putting fruit juices in the bottle and NEVER give your child fruit juice at bedtime.

We all need varied diets, and healthy eating habits form the foundation of good oral health. Let us accustom our children to consuming nutritious foods at meal times and offer the teeth-friendly snacks in between – if needed. We should also limit the intake of sweets between meals, and restrict the use of sodas and fruit juices to certain meal times. Remember that cold water is the best thirst-quencher.

Bacteria in the oral cavity sticking to teeth surface, or the so-called dental germs, convert sugar contained in food into milk acids. These acids dislodge minerals in the tooth enamel, starting their decay-causing work approximately half an hour after sugar consumption. Saliva, which plays the key role in the body’s defence system against tooth decay, usually manages to neutralise acids during this half-hour period, so that teeth recover dissolved minerals from saliva and re-calcify. If normal time elapses between meals, the body’s defence system wins the fight against acids, and tooth decay is kept at bay. Constant snacking, on the other hand, is more than the defence system can cope with. A bite of cheese after meal is a good protection against decay, and so is sugar-free chewing gum, as they increase saliva flow in the mouth, and, consequently, accelerate acid neutralisation. If oral hygiene is lacking and dental germs manage to accumulate, they hinder access to teeth surface for saliva, and the defence system does not cope.

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Caring for Children’s Teeth

Oral Hygiene

We should brush baby’s teeth twice a day with a sufficient amount of fluoride toothpaste of 0.1% F- strength from the time the first tooth has erupted. Before teething starts it is advised to rub the infant’s gums and tongue with a moist cloth. Bear in mind that fluoride content varies from one baby toothpaste to another and is sometimes not sufficient. Moreover, markings on toothpaste can be unclear, but 0.1% F- or 1mg F-/ml corresponds to 1000 ppm. Children cannot take care of their teeth by themselves until they reach ten years of age, and even after that they can do it only under parental supervision.

In order to reduce the probability of tooth decay it is necessary to brush teeth with fluoride toothpaste twice a day – after breakfast and before going to bed. For brushing the teeth of a child who is cutting his first teeth and until the child is two, use the amount of fluoride toothpaste that corresponds to one fourth of the nail on the baby’s pinkie. From the time when all baby teeth have arrived and until the age of six, use the amount of fluoride that corresponds to the size of the nail on the baby’s pinkie. It is not recommended to rinse the mouth after tooth brushing: it will do to let the child spit out. This way fluoride in the toothpaste is believed to work longer to prevent decay.

Fluoride

It is believed that stable fluoride content in the oral cavity is necessary to keep teeth healthy. Fluoride takes part in the constantly ongoing repair process on the tooth surface, and also has a disruptive effect on the functioning of decay-causing bacteria. Fluoride’s impact is localized on the tooth surface, and has the same preventive influence for all age groups.

Brushing a baby’s teeth with fluoride toothpaste of 0.1% F- strength twice a day maintains minimal fluoride content in the mouth cavity, therefore playing an important role in routine protection against tooth decay. Please keep in mind that because children under six usually swallow a large part of toothpaste put in their mouths, it is important not to allow them to portion toothpaste themselves, and it is safest to keep toothpaste out of children’s reach.

Although general use of fluoride pills for children’s teeth protection is no longer recommended, certain children who are at risk of tooth decay need more fluoride protection than brushing teeth twice a day can provide. Your dentist should advise you on additional fluoride intake, and it is important to follow his/her instructions on the correct use of fluoride.

Children between six and fifteen years of age who are sprouting new adult teeth need an increased intake of fluoride in the form of fluoride varnish and rinse, and bad eating habits also call for additional fluoride.

Sucking Need

The sucking need is inborn in infants, and it is more desirable to accustom them to pacifiers (dummies) than to have them suck their fingers. Never put any sweets on the pacifier. Honey can cause stomach and intestinal infections in little babies, and there is nothing as damaging to child’s delicate teeth after teething as sweets.

It is necessary to accustom children to doing without a pacifier before they are three years old in a gap opening up between front teeth when molars are brought together. These changes often revert automatically when the child stops using the pacifier or stops sucking a finger before the age of three. It can be difficult to break the habit of finger sucking in children, and it is important to seek the dentist’s assistance in time if the need persists.