Preventing Early Childhood Cavities

In the mouths of babes.

Lyra W. Ng, MD/MPH
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San Francisco Children’s Oral Health Collaborative
Pediatrics, Gellert Health Services,
Chinese Community Health Services
Lyra W. Ng, MD, MPH

- Advocate: SF Children’s Oral Health Integration Team.
- Pediatrician since 2003, the last 6 years with Chinese Hospital.
- First cavity—6 years old.
- Total lifetime caries x 2.
- One postpartum root canal.
- Too many family photos ahead.
- I have nothing else to disclose
Learning Objectives

- Recognize early childhood caries.
- The balance between healthy teeth and caries.
- How to integrate children’s oral health into primary care. Apply it to your practice and community.
- Recognize what is happening in SF. It could be happening to your community, too.
- What SF is doing about it? SF HIP COH
The perfect beginning

• Healthy gummy pre-dental baby

• healthy toddler teeth.
Baby Teeth

From Amarilis San Vicente, DDS, MS, CPH

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**Upper teeth**
- Central incisor: 8-12 mos. to 6-7 yrs.
- Lateral incisor: 9-13 mos. to 7-8 yrs.
- Canine (cuspids): 16-22 mos. to 10-12 yrs.
- First molar: 13-19 mos. to 9-11 yrs.
- Second molar: 25-33 mos. to 10-12 yrs.

**Lower teeth**
- Second molar: 23-31 mos. to 10-12 yrs.
- First molar: 14-18 mos. to 9-11 yrs.
- Canine (cuspids): 17-23 mos. to 9-12 yrs.
- Lateral incisor: 10-16 mos. to 7-8 yrs.
- Central incisor: 6-10 mos. to 6-7 yrs.

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Who cares about baby teeth?

- Function of baby teeth
  1. Biologic—nutrition, mastication, space holders for adult teeth,
  2. Social—smile factor and self esteem, appearance, first impressions

- Loss of baby teeth means loss of nutrition, loss of self esteem, increased dental and medical health expenditures for the community.
The Mouth-Body Connection

From Amarilis San Vicente, DDS, MS, CPH
The dirty truth of bacteria and the mouth

• Pathology of plaque and bacteria on teeth

From Amarilis San Vicente, DDS, MS, CPH
How do we preserve perfection?

• Care about the health of the adult and child mouth.
• Avoid colonization of Strep mutans.
• Brush, brush, brush away retained food, cariogenic materials and “plaque”.
• Embrace fluoride-toothpaste, fluoridated water, fluoride varnish.
• Avoid sugar sweetened beverages.
Care about the health of the adult and child mouth.

• Mother’s oral health status can predict the oral health status of the kids.

• Baby teeth are priceless and they are free.

• Value baby teeth. Protect baby teeth.
Avoid colonization of Strep mutans.

- Avoid saliva exchange between adults and baby.
- Avoid saliva exchange between elder children and baby.
- Fomites?: eating utensils, sharing chopsticks, using the adult mouth to “rinse” a fallen pacifier,
- Do people still do this? Premasticating solid foods for baby.
What about Dentists?

- Age of first dental visit-
- Recommended vs reality
- Pediatric dentists vs family dentists
- Dental insurance-Private vs public vs none
The dental home starts at home.

- Oral care needs to be an ingrained series of daily home habits, overseen and enforced by the parent or guardian.
- Barriers and myths.
- Identify the champion in the family.
- Encourage, acknowledge
Brush, Floss and Brush

• Brush, brush, brush away retained food, cariogenic trash and plaque.
• Use floss once a day, find the time that fits best with the busy home schedule.
• It does not have to happen in the bathroom. Do it during book and or screen time.
• Brush-Book-Bed—give families a bedtime plan.
• (We interrupt this children’s oral health discussion with a plug for limiting screen time for all children. Aim for no more than 1 hour of screen time a day, thank you. Unplug yourself first, your kids are watching and learning from you.)
Ways to get fluoride on the teeth

• Fluoridated Tooth paste twice a day from the first tooth (AAP, AAPD Pediatric Dentists)
• Under 3 yo-rice size or a smear
• Over 3 yo-pea sized
• Drink Fluoridated faucet water
• Fluoride varnish applications 3-4 times per year.
The Professional Dental Home

• First visit by first tooth or 12 mos old
• Screening, identify risks, focused education, reassurance.
• Cleaning-removing tartar
• Prevention –fluoride treatments
• Treatment-treat gingivitis, caries, abscesses, root canals, caps, extraction. Everything else!
The Medical Home

• Wait a minute, WHAT??
• That’s not my job! See a dentist...
• I’m already doing too much! There isn’t enough time to add anything else.
• And I have to do EMR notes!!!
• Pediatricians don’t get paid enough to do so much...nickeled and dimed. I got school loans.
• Gripe, gripe, gripe.
Oral Health Messages and Fluoride Varnish

• All it takes is a few comments about preserving oral health and 30 seconds to paint fluoride on to the teeth to Make a Difference in your patient’s life.
Workflow Preservation

- Greeting
- HPI
- ROS
- PE-screen for cavities and FV.
- Assessment
- Plan
Screening for Poor Oral Health

• White spots, Grey Spots, Black spots, Holes!

Oh, my!!!

From Amarilis San Vicente, DDS, MS, CPH and AAP Section on Oral Health
Screening for gum disease

• Normal gums (photos)
• Pink, edematous gums
• Red, edematous, friable gums
Fluoride Varnish Prep

- Varnish packet
- FV is $154 for a box of 200, $0.77 ea.
- Gloves
- 2x2 gauze
Gifts to preserve oral health

• Age appropriate tooth brush
• Fluoride toothpaste
• Dental Floss

• Thank you to Margaret Fisher of SFDPH and Abby Wolf, RN—health nurse of SFHP for your generous gift of FV and gift supplies.
The Return

• Lifetime oral health habits
• Reimbursement from some insurances
• $18 from Health Plan of San Mateo
• 3 times per year
• 99188 or D1206

• Not yet by SFHP, CCHP, AAMG—to date.
• (I am working on them-check back next year)
Is there a down side?

- Nay sayers who insist oral health care is the jurisdiction of dentists.
- The specter of fluoridosis. How to reassure.
- Toddler behavior impediment—what if they cry?
- There’s no time for this.
- More paperwork—procedure note within the WCC note, logging Brand, Lot number, etc.
- Purchasing Fluoride Varnish.
“Now I understand it’s important, but how can I fit another thing in?

- The provider can do it (99188).
- An MA can do it, too (D1206).
- The provider or MA can do it during a Fluoride varnish “clinic”. (Think of a Flu shot clinic).
- CHDP reimbursement for VACCINE administration is $9.
- HPSM reimbursement for FV is $18. Twice as much income for your coffers.
How long does it take?

• Watch me
What is happening in the mouths of babes in SF?

Children in some SF neighborhoods have experienced 2-3x more caries

- Chinatown
- North Beach
- Nob Hill/Russian Hill/Polk
- Tenderloin
- South of Market
- Bayview/Hunter’s Point
- Visitation Valley
- Excelsior
- Portola
What are we doing about it?

- SF Children’s Oral Health Collaborative

Overarching strategic priority areas

- Increase access to oral health care services for San Francisco children and pregnant women
- Increase awareness and practice of optimal children’s oral health behaviors among diverse communities
- Integrate oral health with overall health
- Develop and establish an ongoing oral health population-based surveillance system to address the oral health of San Francisco children

Access  Integration
Coordination
Promotion  Evaluation
Communities taking care of their own:

The Chinatown Children’s Oral Health Taskforce
• NICOS and Chinatown Public Health Centers
• Created independently
• Cultural and language specific community intervention at elementary schools, preschools, and community health fairs.
• Volunteer based
The trends despite our efforts


Our goal is a Caries Free SF.
SFUSD kindergarteners caries experience by ethnicity, 2007–2016

Data source: SFDPH-SFUSD-SFDS Kindergarten Oral Health Screening Program.
The Need is Real

- You can make a difference with this preventable health problem one family at a time. The statistics can change within 5 years.
- It’s not a pie in the sky goal.
- You can effect change with this gross health disparity.
- Only you can make the time to address it in your office with your patients.
OK, I will do it.

Do or Do Not, there is no try—YODA

Your patients and their families thank you...