

Policy Statement 2.3.8 – Delivery of Oral Health: Special groups: Infants & Pre-School Children

Position Summary

All children should have a dental check-up by the time that their first tooth appears or by their first birthday and be regularly seen by a dentist from that age onwards.

All health professionals involved in treating children and pregnant women should be aware of the importance of oral health for general health and wellbeing. They should be able to identify risk factors for poor oral health and refer to dentists as required. There must be adequate access to general anaesthesia facilities where required.

1. Background

- 1.1. Primary teeth, also known as baby teeth or deciduous teeth, begin to form five weeks after conception and, by the time a baby is born, all 20 primary teeth are usually present but un-erupted. These teeth begin to erupt at about six to nine months of age and it is important that healthy dietary habits are established before this age. A coordinated effort from all involved in the care of the infant and pre-school child is needed to ensure that optimal oral health is achieved for them.
- 1.2. Children with good oral health can chew food comfortably, learn to speak clearly and smile with confidence.
- 1.3. Healthy primary teeth are essential in the development of permanent teeth, as well as the maintenance of space for the eruption of permanent teeth and to promote good occlusion.
- 1.4. Oral health outcomes are improved by early assessment and intervention.
- 1.5. Establishing a dental visit routine where positive early interactions with the dental team occur will encourage a lifetime of good dental habits and a positive attitude towards maintaining oral health.
- 1.6. Studies show that tooth decay rates are increasing in Australia with potentially preventable hospitalisations due to dental conditions also increasing.
- 1.7. There are significant numbers of potentially preventable hospitalisations of pre-school children for dental treatment.

Definition

- 1.8. DENTAL PRACTITIONER is a person registered by the Australian Health Practitioner Regulation Agency via the Board to provide dental care.

2. Position

- 2.1. All children should have a dental examination by the time their first tooth appears or by their first birthday and be regularly seen by a dentist from that age onwards.
- 2.2. Dental practitioners can advise parents and carers on issues such as:
 - oral hygiene;
 - diet;
 - appropriate breast feeding and bottle feeding practices;
 - symptomatic care during help with teething problems;
 - prevention and management of dental injuries;
 - habits (including non-nutritive sucking – e.g. fingers or dummies/pacifiers) which may influence

normal growth and development of the teeth and jaws.

- 2.3. Information on the appropriate use of fluorides should be discussed with parents/carers.
- 2.4. From the time that teeth first erupt (about six months of age) to the age of 17 months, children's teeth should be cleaned by a responsible adult, but not with toothpaste unless the tooth decay risk is deemed as high as assessed by a dentist (or other appropriately trained dental practitioners).
- 2.5. For children aged 18 months to five years (inclusive), the teeth should be cleaned twice a day with toothpaste containing 0.5–0.55 mg/g of fluoride (500–550 ppm). Toothpaste should always be used under supervision of a responsible adult: a small pea-sized amount should be applied to a child-sized soft toothbrush and children should spit out, not swallow, and not rinse. Young children should not be permitted to lick or eat toothpaste. If risk of tooth decay is increased, concentrations of fluoride greater than 550 ppm may be used as recommended by a dentist (or other appropriately trained dental practitioners).
- 2.6. All professionals involved in the care of infants and pre-school children should be aware of the importance of oral health for general health and wellbeing and actively involved in oral health promotion.
- 2.7. Maternity and early childhood nurses should have access to information regarding oral hygiene, teething remedies, appropriate feeding practices, avoidance of disruption to normal growth patterns, prevention and management of dental trauma and the appropriate use of fluorides.
- 2.8. Day care, child-care centre and pre-school staff should be informed on all issues related to the development and maintenance of appropriate dietary and oral health guidelines for their facilities.
- 2.9. All health professionals involved in the care of infants and pre-school children should possess knowledge regarding their appropriate referral for oral care when required. Governments, hospitals, public health centres and day procedure centres should ensure dentist access for children to behavioural management modalities including access to treatment under relative analgesia and general anaesthesia.

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