

To Establish Good Oral Health-“Start in the Womb”

Nilesh Deshpande*

Specialist Pedodontist, Sunny Medical Center, UAE

***Corresponding Author:** Nilesh Deshpande, Specialist Pedodontist, Sunny Medical Center, UAE.

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Oral health plays a vital role in the overall health and well-being of expectant women. It is also essential for the health and well-being of their offspring from infancy to adolescence. Many women neglect dental care during their pregnancy. Expectant mothers are unaware of the consequences of deprived oral health, both for themselves as well as the unborn child. Several research articles have shown link between periodontal disease and adverse outcomes in pregnancy including low birth weight babies and preterm deliveries. Furthermore, expectant mothers with deprived oral health and high levels of caries causing bacteria are at high risk for increasing their children’s caries risk.

The primary aim of the prenatal and perinatal oral health care, in context to caries transmission and progression, is to reduce the number of caries causing microorganisms in an expectant mothers’ oral cavity, which can lead to delay in colonization of Mutans Streptococci (MS) in infant as long as possible. Studies show that the same strains of MS were present in both mother and child. MS may be acquired through both vertical and horizontal transmissions. However, several modes of MS transmission have also been reported. The presence of matching genotypes of MS suggests vertical transmission among mother–child pairs.

Prenatal counseling and appropriate preventive therapies to expectant mothers can significantly reduce the incidence of early childhood caries (ECC). Subsequently this would improve the oral health of their children and prevent the need for extensive dental treatment. Health care professionals are far more likely to see expectant or new mothers and their infants than are dentists. Therefore, it is essential that these providers be aware of the etiopathogenesis and associated risk factors of dental caries and ECC. Timely referral of expectant mother and pregnant women to concerned dental specialist can be carried out in effective way.

The perinatal and prenatal period is an appropriate time to educate and carry out dental treatment on expectant mothers. Pregnancy care visits are appropriate moment for physicians, dentists, and nurses to educate women about the following:

1. Diet counseling for the mothers to be and the unborn child. This education should include information regarding the caries process and progression and food cravings that may increase the caries risk of mother.
2. Comprehensive oral examination should be carried out. Dental prophylaxis and preventive procedures should be carried out during pregnancy. Dental radiographs with proper shielding and local anesthetic are safe in all trimesters and optimal in the second trimester. Due to possible patient discomfort, elective procedures sometimes may be postponed until after delivery.
3. Proper oral hygiene instructions should be given. Use of fluoridated toothpaste and eating nutritious food to help minimize their caries risk should be promoted [1-4].

Bibliography

1. National Children’s Oral Health Foundation. Facts about tooth decay (2016).
2. American Academy of Pediatric Dentistry. “Guideline on periodicity of examination, preventive dental services, anticipatory guidance/counseling, and oral treatment for infants, children, and adolescents”. *Pediatric Dentistry* 38.6 (2016): 132-141.
3. Gaffield ML., *et al.* “Oral health during pregnancy: An analysis of information collected by the pregnancy risk assessment monitoring system”. *Journal of the American Dental Association* 132.7 (2001): 1009-1016.
4. Mobley C., *et al.* “The contribution of dietary factors to dental caries and disparities in caries”. *Academic Pediatrics* 9.6 (2009): 410-414.

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