

MetLife



Equipping Parents with Important Information About Children's Oral Health

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Introduction

Despite tremendous advancements in dental care and treatment over the past 50 years, dental caries (tooth decay) remains a serious issue for our nation's children. It is important for parents to instill good oral health habits in their children at a young age by first equipping themselves with the latest insights about oral care, treatment options and recommendations.

To better understand and help address this issue, MetLife conducted a study — *Parental Oral Health Literacy*, surveying 500 parents of children ages five and under with dental benefits coverage — to assess parents' knowledge and behaviors related to their children's oral health. The results of this study revealed areas parents need to improve upon for the sake of their children's oral health.

When it comes to rating their children's oral health, parents who responded to the survey had a rosy outlook. Almost all (97%) of the respondents rated their children's overall oral health as positive, with more than half (54%) rating it excellent and 43% rating it good. Yet 23% of respondents in this study have been told by a dentist or hygienist that their child was at risk for tooth decay.

While being at risk of tooth decay is not indicative of overall oral health, it does show that parents need to be diligent in relation to their children's oral care. Parents should have a good understanding of dental disease to help their children avoid it, if possible.

As parents, ensuring healthy oral habits while children are infants and instilling these habits in their preschoolers as they develop may help them avoid dental problems as they become school-age children, adolescents, teens and even young adults. According to *Oral Health in America: A Report of the Surgeon General*:

- Tooth decay is the single most common chronic childhood disease. It's five times more common than asthma and seven times more common than hay fever.¹
- More than 50% of five- to nine-year-old children have at least one cavity or filling, and that proportion increases to 78% among 17-year-olds.¹

While these statistics may seem discouraging, they represent improvements in the oral health of children compared to generations ago.¹ And more can be done.

¹ U.S. Dept. of Health and Human Services. *Oral Health in America: A Report of the Surgeon General — Executive Summary*. Rockville, MD: U.S. Dept. of Health and Human Services, National Institute of Dental and Craniofacial Research, National Institutes of Health, 2000. Available at: <http://www.nidcr.nih.gov/datastatistics/surgeongeneral/report/executivesummary.htm> Accessed January 6, 2012



The importance of oral health extends beyond the mouth

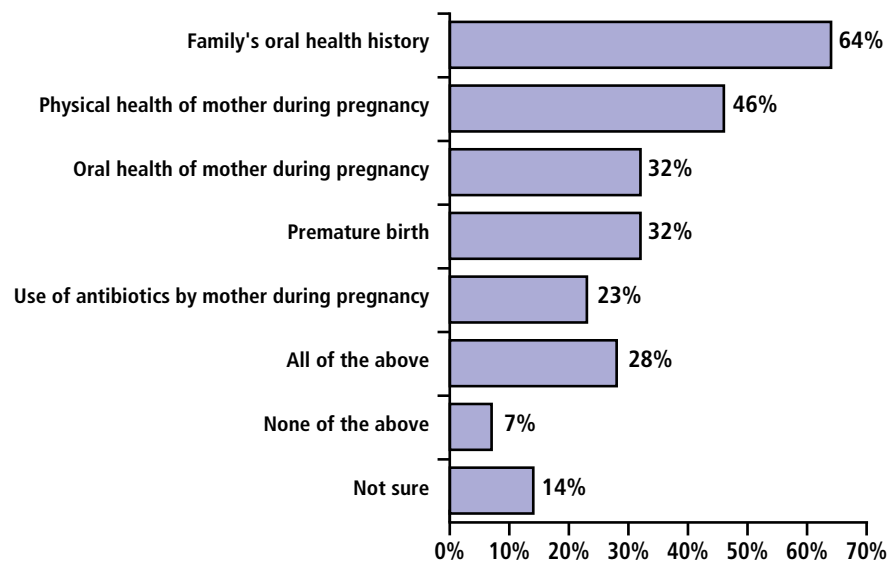
In addition to helping children avoid dental problems, instilling healthy oral habits may also benefit their overall health later in life.

Dental problems involve more than tooth decay or losing a tooth. Although researchers continue to explore the connection between oral health and overall health, it is generally accepted that oral infections have a profound effect on an individual's overall health — making dental care important to overall wellness in addition to better oral health. With only 47% of survey respondents stating that their pediatrician has talked to them about their children's teeth, the survey revealed an area of improvement for physicians as well.

When asked about some of the external factors that may influence a child's oral health, only 46% of parents responded the physical health of the mother during pregnancy, only 32% said premature birth, only 23% said the use of antibiotics by the mother during pregnancy **and almost a quarter (21%) said none of the above or they were not sure.**

Parents lack knowledge of factors that can influence a child's oral health

Q. Which of the following factors can influence a child's oral health?





Establishing good oral health starts at birth

While most respondents correctly disagree with the statements that babies whose teeth have not erupted do not need oral health care (67%) and baby teeth don't need as much care as adult teeth because they fall out (77%), there are still a significant number of respondents who incorrectly agree with these statements.

In fact, parents should be diligent with respect to their children's oral health, starting at birth. Parents should use a moist washcloth or gauze pad to wipe an infant's gums and, later, teeth. Optimally, this should be done after each feeding, however, twice a day is sufficient — in fact, every bit helps.

After the first tooth appears, parents should begin:

- Brushing their child's teeth with a children's toothbrush and water.²
(Unless it is advised by a dentist, do not use fluoridated toothpaste until age two.)
- Using the Lift-the-Lip technique at least once a month.
 - After cleaning your child's teeth, set your baby in a secure, prone position on a floor or your lap. Then, gently lift your baby's upper lip. Examine each tooth (front and back) for white and/or light brown spots. Repeat with your baby's lower lip.³

When the child is two years old, parents should start using a small smear of fluoride toothpaste (about the size of the fingernail on the child's little finger) to brush the child's teeth. Before children learn to spit excess toothpaste into the sink, they may swallow it, and swallowing too much fluoride toothpaste may cause permanent stains on their permanent teeth.²

² *Baby's First Teeth*, American Dental Association, Chicago, 2002. Available at: http://c9.go2dental.com/ml_content/article_detail.php?art_id=4&subcat=15&cat=5 Accessed January 6, 2012.

³ Learn to Lift the Lip and Prevent Tooth Decay, *University of Washington, School of Dentistry, Pediatric Dentistry, Seattle*, 2008. Available at: <http://www.dcdclinic.org/uploads/2/1/1/7/2117140/english.pdf> Accessed January 6, 2012.



The first dental visit is typically far later than recommended

Two-thirds of respondents (66%) reported that their child was two to three years old when they had their first dental check-up. However, the American Dental Association (ADA) and the American Academy of Pediatric Dentistry (AAPD) recommend taking children for a dental check-up within approximately six months of when a child’s first tooth erupts, but no later than the child’s first birthday.²

Today, this can be a challenge for parents. Some general dentists prefer not to see children before the age of three, so parents of young children may have to seek services elsewhere — for example, from a pediatric dentist.

Interestingly, 72% of respondents added their child to their dental benefits program between birth and 24 months, yet only 16% took their child in for a dental check-up during that time. So, many of these children may be covered under their parents’ policy for a year or more before they see a dentist.

Parents add their children to their dental plans well before taking them to the dentist

	Years			
	0-1	2-3	4-5	Later than 5
Q. At what age was your child added to your dental insurance policy, or when do you plan to do so?	72%	23%	3%	1%
Q. At what age did your child have his or her first dental check-up, or when do you plan to do so?	16%	66%	9%	3%
Q. At what age do you think children should have their first dental check-up?	15%	69%	11%	2%

Pediatric dentists receive an additional two to three years of specialty training after dental school and they limit their practices to children only, according to the American Academy of Pediatric Dentistry.⁴

⁴ Pediatric Oral Health Information, American Academy of Pediatric Dentistry, Chicago. Available at: <http://www.aapd.org/pediatricinformation/faq.asp> Accessed January 6, 2012.



Brushing and flossing are fundamental to good oral health

While most respondents (93%) reported that their child’s teeth are brushed at least once or twice a day, a small percentage of respondents said their child’s teeth are brushed less frequently than once a day (5%) or never (2%). This should be concerning to parents because brushing is fundamental to maintaining oral health. Starting oral care early in childhood is important for developing lifelong habits.

While it may be ideal to instill in children the importance of brushing after every meal, it may be unrealistic. Unless your dentist recommends otherwise, brushing twice a day (once in the morning and once before bed) should be enough to establish good oral health practices.²

Not unexpectedly, the study also revealed that almost half of the respondents (45%) reported that their child’s teeth are never flossed, 20% said they are flossed once or twice per week and 17% said less than once a week.

There are mixed opinions on stressing the importance of flossing in preschool children, so you should discuss the value to your child with your dentist. According to the American Dental Association (ADA), parents should start using floss, or interdental cleaners, on their children’s teeth as soon as any two teeth touch.² Cleaning between the teeth is important because it removes plaque where a toothbrush cannot reach.

Brushing and flossing frequencies vary greatly

Q. How frequently are your child’s teeth or gums brushed?

Q. How often are your child’s teeth flossed?

Brushing		Flossing	
After every meal	3%	Once a day	16%
Twice a day	55%	Once or twice a week	20%
Once a day	35%	Less than once a week	17%
Less frequently than once a day	5%	Never	45%
Never	2%		



Poor eating habits create obstacles to achieving good oral health

Approximately one-third of respondents (34%) said that, on average, their children consume foods with high sugar content once per day. Approximately one quarter (26%) said twice a day and another quarter (25%) said a few times a week or less. One in ten parents (10%) reported that their children consume foods with high sugar content three times a day and 4% of respondents stated they have such foods four times a day or more.

So, it is interesting that a vast majority of respondents (85%) said that they **have not** noticed plaque — white or yellow material — on their child's teeth.

Plaque, a film of bacteria on the surface of teeth, develops when foods containing sugars and starches are consumed. Some of these bacteria produce acids that destroy tooth enamel, which can lead to tooth decay.

The fact that children eat so many high-sugar snacks — and eat them frequently — underscores the importance of parents taking a proactive role in their children's oral health, including instilling healthy eating habits.

However, it may not be realistic to eliminate sugary snacks. But when parents choose snacks for children, they should consider how long the sugary food stays in their mouths, the number of times a day they eat sugary snacks and the texture of the sugary snack (for example, is it chewy or sticky?).

- Sugar provides the footing that bacteria use to produce acid, which in turn leads to tooth decay. The more often you feed your kids sugary snacks, the larger the foundation for bacteria to use to produce damaging acids.⁵
- Certain kinds of sweets can do more damage than others. Gooey or chewy sweets spend more time sticking to the surface of teeth. Because these snacks stay in your mouth longer than foods that are quickly chewed and swallowed, they may produce a larger foundation for bacteria to use to produce damaging acid.⁶

Parents shouldn't let their children snack too often. However, when they do, parents should choose healthy snacks instead of sticky foods. If you can't brush your child's teeth after eating a sugary snack, have them rinse their mouth out with water.

⁵ *Diet and Oral Health, American Dental Association, Chicago. Available at: <http://www.ada.org/2984.aspx?currentTab=1> Accessed January 6, 2012.*

⁶ *Ask Your Dentist About: Diet and Snacking, American Academy of Pediatric Dentistry, Chicago. Available at: <http://www.aapd.org/pediatricinformation/brochurelist.asp> Accessed January 6, 2012.*



Too much or too little fluoride can negatively impact a child's oral health

Only 46% of the survey's respondents reported that their children received fluoride treatments from a dentist or dental hygienist within the past year. Sixty-one percent (61%) of respondents said that there is fluoride in their tap water and 39% said there is either no fluoride in their tap water or they are not sure.

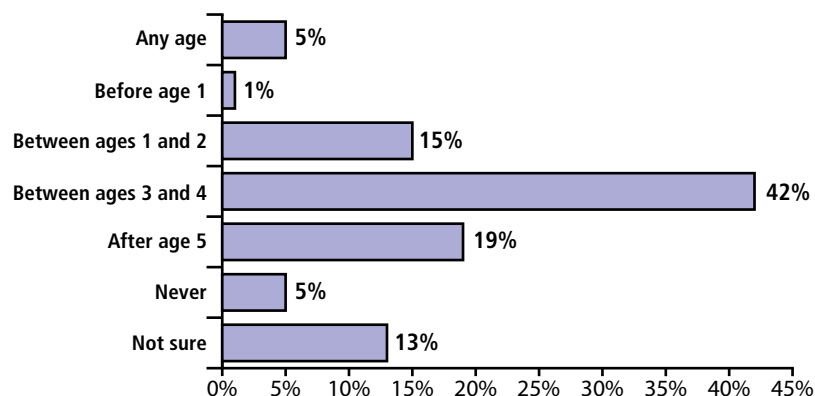
Fluoride is extremely important for the prevention of tooth decay. According to the surgeon general report, people who lived in communities with naturally fluoridated drinking water had far less dental caries (tooth decay) than people in comparable communities without fluoride in their water supply.¹

Parents should discuss the recommended amount of fluoride intake for their children with a dentist or physician. Fluoride of varying amounts can be found in infant formulas, dental products (like toothpaste and mouth rinses), and bottled, filtered and well water. Fluoride may also be added to community water supplies.⁷ However, too much fluoride may lead to fluorosis,⁷ a condition that can lead to discoloration of permanent teeth.

According to the American Dental Association, parents who are considering using toothpaste before the child is two years of age should consult their dentist or physician.²

Parents unsure when their children should start using fluoride toothpaste

Q. When is it OK for children to use toothpaste that contains fluoride?



² Ask Your Dentist About: Fluoride, *American Academy of Pediatric Dentistry, Chicago*. Available at: <http://www.aapd.org/pediatricinformation/brochurelist.asp> Accessed January 6, 2012.



Avoid giving children pacifiers and bottles at bedtime for better oral health

While a strong majority of surveyed respondents (70%) said they do not/have not put their child to bed with a bottle, 20% reported that they have given a child a bottle with milk; while 6% said they have given a bottle with juice at bedtime. These are considered high percentages, given the effects this practice can have on a child's risk for tooth decay.

According to the National Institute of Dental and Craniofacial Research (NIDCR), Baby Bottle Tooth Decay (aka early childhood caries) is caused by prolonged contact with almost any liquid other than water.⁸ Children who drink bottles while lying down also may be more prone to ear infections.⁸

The NIDCR recommends never putting a child to bed with a bottle. By seven or eight months of age, parents note that most children no longer awaken during the nighttime sleeping hours and don't require feedings during the night.⁸

The survey revealed that only 65% of respondents agree with the statement that the use of pacifiers can harm the development of a child's teeth. In fact, long-term use of pacifiers may cause harm specifically to the position of teeth.⁹ So, prolonged use of pacifiers should be avoided.

⁸ Frequently Asked Questions About Preventive Dental Care for Children, *MetLife Oral Health Library*, 2009. Available at: http://c9.go2dental.com/ml_content/article_detail.php?art_id=480&subcat=15&cat=5 Accessed January 6, 2012.

⁹ Pacifiers: Are they good for your baby?, *Mayo Foundation for Medical Education and Research, Rochester, MN*, August 2011. Available at: <http://www.mayoclinic.com/health/pacifiers/PR00067> Accessed January 6, 2012.

Conclusion

Research, advancements in dental care and growing consumer knowledge have contributed to improvements in oral health in the U.S. It may take a concerted effort on the part of parents, dentists and healthcare professionals, but the oral and overall health benefits of starting to teach preschoolers healthy oral habits will be well worth it.

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