

## The Dental Health of Your Special Needs Child

A special needs child requires much from those around him - patience, attention and love. Dental health is one more important need. Often dental care is delayed because of the pressures of more immediate health problems.

A healthy mouth is an important part of total health. It can improve eating, speaking, and how the child looks and feels about herself. A diseased mouth can cause the following:

- difficulty in chewing and swallowing which can take the pleasure out of eating, and lead to a poor diet
- decayed teeth and swollen, bleeding gums, which are foul smelling, unhealthy, and often painful to the child
- poor speech which can interfere with school work and making friends.

Dental disease is almost 100% preventable. Preventing dental disease is especially important for individuals with special needs. Getting to the dental office can be more difficult, and restoring the mouth is often more complicated. Dentures are not always possible. People with uncontrolled muscle movements may not be able to learn to keep a partial or complete denture in place.

### Special needs children are at greater risk for dental disease

There are a number of reasons why children with disabilities are more likely to have dental disease. Some of these are:

- **Oral conditions.** Some genetic disorders or very high fevers in young children can

cause defects in tooth enamel that make decay more likely. Congenitally missing teeth and teeth that do not align properly are often seen in children with cleft palates. Gum problems often occur in children with Down's Syndrome.

- **Physical limitations.** Children who can not chew or move their tongues properly do not benefit from the natural cleaning action of the tongue, cheek, and lip muscles. Children with disabilities, especially those with poor motor coordination (such as spinal cord injuries, muscular dystrophy, or cerebral palsy) may not be able to clean their own teeth or use the usual brushing and flossing methods.
- **Special diets.** Children who have difficulty chewing and swallowing may often eat puréed foods, which tend to stick to their teeth. Frequent eating of sugary foods or sleeping with a bottle of formula, milk or juice can increase the chances for tooth decay. Children who need help drinking may drink less fluids than other children, so they do not have enough fluids in their mouth to help wash away food particles.
- **Medications.** Medications using syrup or sugar to sweeten the taste can cause tooth decay if they are taken for a long time. Some anti-seizure medications may cause bleeding or enlarged gums. Excessive gum growth can hamper chewing and speech and lead to gum disease. Sedatives, barbiturates, antihistamines, and drugs used for muscle control may reduce saliva flow. With less saliva, there is less cleansing action to help protect the teeth

against cavities. Aspirin, taken in large doses, and dissolved in the mouth before swallowing, can provide an acidic environment which can cause tooth decay. Antibiotics should be prescribed cautiously because they can stain or discolour newly erupting teeth.

## **Diet**

Plaque is a layer of sticky, almost invisible germs that stick to our teeth, gums and tongue. Plaque causes cavities, gum disease and bad breath. Plaque uses the sugar from the foods we eat and drink to make harmful acids. These acids attack the tooth and cause cavities.

Sugar is a major cause of tooth decay. The more often you eat sugar and the longer it stays in your mouth, the more harm it can do. To prevent decay:

- avoid sweet snacks, including raisins and other dried fruits that are sticky and high in sugar
- avoid serving sugary foods. If you serve sugary foods, serve them with a meal when the acid will do less harm
- read food labels. Look for hidden sugars such as sucrose, dextrose, corn syrup and honey are all sugars
- offer low sugar substitutes such as cheese, hard boiled eggs, pizza, vegetables, and fresh fruits
- offer milk, water or vegetable juices instead of sweetened carbonated beverages and fruit drinks.

## **Fluoride**

Fluoride makes the teeth stronger. Fluoride can be placed on the teeth in a dental office (liquid or gel), and it can be used at home (fluoride toothpastes, fluoride mouth rinses and fluoride drops/tablets). Teeth are protected best when drinking fluoridated water daily.

## **Sealants**

Another way to prevent tooth decay is to have your dentist paint a plastic coating called a dental sealant on the teeth. Sealants are placed on the chewing surfaces of the permanent molar teeth and bicuspids. This seals the chewing surfaces and protects the teeth from decay.

## **The Dental Office**

A dental examination is recommended by age one. Many dentists prefer to work with the medical team as soon as a special needs child is born. Although teeth are not present, this is a good opportunity for the dental staff to provide preventive instruction to the caregiver. Regular dental examinations should continue every year or more often if recommended by the dentist. The dental staff will adapt to the special needs child. For example, the examination area may be modified to accommodate a wheel chair.

Mouth props to help the child hold his mouth open and finger guards to protect the dentist are often used.

Dental care may take place in short time periods. This helps to keep the child's attention and helps her feel less afraid of this new experience. If a child has trouble speaking, seeing or hearing, the dental staff may need to take more time.

Occasionally, it may be necessary to provide dental treatment under general anesthetic in a hospital operating room. Dental treatment done under general anaesthetic has risks. It should be considered carefully before proceeding.

For more information call the  
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