9L.5: HANDOUTS FOR CAREGIVERS AND COMMUNITIES – DENTAL (ORAL) CARE AND TOOTHBRUSHING^{9,30}

HEALTHY TEETH AND HEALTHY CHILDREN

All children can have problems with their teeth; however, children with disabilities are much more vulnerable. Specific problems may include cavities, tooth decay or rot and diseases of the teeth and gums. Oral health or hygiene is the preventative practice of keeping the mouth (teeth, tongue, cheeks and lips) clean and healthy by using regular routines such as brushing, flossing and rinsing.



A primary health need for every child is having a clean mouth. Children with disabilities or medical needs often rely on others to maintain good oral health. This means caregivers play a critical role in sustaining healthy mouths for the children in their care.

PROBLEMSASSOCIATED WITH UNHEALTHY TEETH AND GUMS

- \Rightarrow Increased risk of cardiac (heart) disease
- \Rightarrow Increased risk of pneumonia and other respiratory illnesses
- \Rightarrow Increased pain or discomfort in the mouth (with or without eating/drinking)
- \Rightarrow Reduced intake of food or liquid due to pain or discomfort
- \Rightarrow Misalignment or loss of teeth

WHY ARE CHILDREN WITH DISABILITIES MORE VULNERABLE?37

Children with disabilities or medical needs are at greater risk of developing poor oral health compared to other children for many reasons. Certain conditions have higher associations such as behavioral, cognitive (thinking) or mobility (movement) challenges or problems with swallowing, gagging or gastroesophageal reflux. These difficulties can be obstacles for maintaining appropriate oral health.



SPECIFIC CONDITIONS THAT PLACE CHILDREN AT RISK

- ⇒Cleft lip and/or palate or other structural differences of the mouth, face or head
- \Rightarrow Cerebral palsy
- \Rightarrow Down syndrome
- ⇒Visual impairments
- \Rightarrow Hearing impairments
- \Rightarrow Seizure disorders
- \Rightarrow Developmental/learning disabilities
- \Rightarrow HIV infection

OTHER FACTORS

When a child ...

- cannot easily move his lips, tongue and cheeks for eating and drinking, he will miss out on the natural cleaning that occurs with these structures.
- cannot move or coordinate her arms and hands, she may have trouble brushing or flossing.
- does not have enough saliva, she may have trouble moving food pieces out of her mouth.
- is on a restricted diet or does not take food or liquid orally, his mouth may be dry and grow unhealthy bacteria that can make him sick.
- is on certain medications, she may experience bleeding or swelling of the gums and tooth decay.
- is using bottles for a prolonged time, he may have excessive rotting of the teeth and/or issues with alignment.
- is given excessive amounts of sticky or sweet food/liquid, she may have rotting and teeth that are falling out.

SIGNS OF ORAL HEALTH PROBLEMS

- \Rightarrow Food or liquid refusals
- \Rightarrow Preference for softer foods over harder, textured foods
- \Rightarrow Teeth grinding
- \Rightarrow Teeth discoloration
- \Rightarrow Bad breath
- \Rightarrow Sensitivity to touch in or around the mouth

BASIC ORAL CARE AND TOOTHBRUSHING

Every child deserves a clean and healthy mouth. Developing a basic oral care plan for each child does not need to take lots



Basic Oral Care and Toothbrushing Directions

BEST FOR: All babies and children

WHEN TO DO:

• Daily, recommended 2-3 times a day. Usually after daily meals/snacks or after waking up and before going to bed.

HOW TO DO:

• Hold the child upright in arms or have them positioned upright in a comfortable seated position.





Introduce oral hygiene and toothbrushing routines as early as possible with babies and children. When the first tooth appears, a child is ready for toothbrushing. Oral hygiene can be taught even sooner.



- Use clean water with a toothbrush, finger brush or a soft warm cloth.
- Show the child the brush or cloth and offer it for sucking, mouthing or biting with supervision. (This may need to happen many times before attempting to clean a child's mouth.)
- As the child shows acceptance, gradually begin massaging her lips, tongue, cheek pockets and exposed teeth and gums using the brush or cloth. This may be very brief at first (5-10 seconds) or up to 2 minutes.
- Repeat as necessary before and after meals during the day.
- Repeat following other events when the mouth may need to be cleaned (for example: following illness or vomiting).



Ideally, children should be provided proper oral care at a minimum of three times each day. Children with disabilities or medical needs require care more often. It is recommended to clean their entire mouths before and after every single meal. This can prevent illness and disease as well as aspiration if they are laid down too soon following a meal and have food left in their mouths.

THE 1-2-3 GAME³⁸

This is a helpful method that works well with children with sensitive sensory systems, discomfort with oral care or for those who have had limited oral care experiences. This game helps a child build trust in their caregiver during oral hygiene routines. They learn that the touch, or experience, will never go beyond "3."

Directions:

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- 1 Show the child the brush or cloth.
- (2) Touch the area of the body that the child is most comfortable with (for example: the lips, a hand, a shoulder or inside the mouth).
- ③ For each touch with the brush or cloth, count out loud to the child "1-2-3." Never count to 4!
- (4) At "3" the touching stops and the brush or cloth is removed from the child's body.
- (5) The brush or cloth is placed on the child's body again (same body part or slightly closer to the target inside of the mouth) and the counting starts again "1-2-3."
- 6 Repeat this process as the child allows, moving closer to the inside of the mouth.
- ⑦ Once in the mouth, this process stays the same. Count out loud "1-2-3" while touching or brushing the tongue, cheeks and teeth.





For babies and children with sensitive sensory systems or those who have limited oral care experience, it is important to start with short cleanings in order to keep the experience positive.

TIPS FOR SUPPORTING HEALTHY MOUTHS AND TEETH

- (1) Lend a hand. Children with disabilities will most likely need some type of support (from minimal to total) for oral hygiene (mouth/teeth cleaning) routines. Proper oral care should be provided every day and multiple times for each child.
- (2) Get creative. Choose a toothbrush that fits each child's physical abilities and sensory preferences. For children who may have trouble holding a toothbrush, choose one with a shorter and thicker handle. Modify a brush by making the handle thicker using foam or tape. If a child shows dislike of brushes, try a cloth or finger brush instead.
- (3) Offer lots of practice. Allow lots of opportunities for a child to or participate in oral hygiene routines each day. The more often a child uses a toothbrush, the easier these routines will become and the sooner he will be able to take over this care himself.
- (4) Slow and brief. When first starting to incorporate oral care with a child, offer short experiences and slowly work toward the inside of a child's mouth. A child may not allow touch to the mouth or even the face. Respect what she can tolerate and gradually grow the length and quality of their oral hygiene routine.
- (5) Don't start at the mouth. Some children may not be receptive to touch on or in the mouth. Offering touch/massage to other parts of the body first such as the hands and arms and gradually working toward the face and mouth is a helpful strategy. Respect what a child can tolerate and gradually grow the length and quality of their oral hygiene routine.
- (6) Have fun. Make oral care fun by being playful each time. Going slowly and respecting what a child is able to tolerate in each moment will also keep things positive.
- (7) Offer healthy options. Limit a child's exposure to sweet foods or drinks that may contain lots of ingredients that are harmful for the teeth and gums (for example: sugar).
- (8) Limit bottles. Children who use bottles for a long time are more likely to have tooth decay. If a child needs a bottle for rest, try offering water instead of milk or formula clean her mouth directly after she's finished drinking milk or formula from the bottle.
- (9) Find a dentist. A child should see a dentist (tooth/mouth doctor) as soon as his first tooth appears. After that, every child should receive regular dental care throughout the year. This way, if problems arise, they can be quickly addressed before they become serious.