

**About this document:** This is an installment of the Massachusetts Oral Health Series (MOHS), developed by the Massachusetts Department of Public Health (MDPH). The series focuses on important issues in oral health in the state through topic-specific installments to be released over time. This issue outlines what patients and families can do to improve the oral health of pregnant women and infants. Please visit [www.mass.gov/orgs/office-of-oral-health](http://www.mass.gov/orgs/office-of-oral-health) for more information.

## FOCUS ON ORAL HEALTH

Practicing good oral hygiene is an important part of keeping everyone in the family healthy but is especially important for pregnant women, infants, and children. The Massachusetts Department of Public Health is helping to improve access to oral health care for pregnant women and infants by working with medical and dental providers and community organizations. It is also important to understand individually what you can do to improve oral health.

**In Massachusetts** in 2019:

**59%**

**of women had their teeth cleaned during pregnancy**



In general, the percent of women who had their teeth cleaned during pregnancy has **increased** from 2011-2016, as state initiatives to address the issue have increased.<sup>1</sup> As of 2016, the prevalence has decreased which may be due to the change in wording of the question in the PRAMS phase 8 survey (2016-2021).

## THE FACTS

### Pregnant Women<sup>2</sup>

**Pregnancy gingivitis:** A common oral condition caused by pregnancy.

**Symptoms:** swollen and bleeding gums

**Dental Caries (Cavities):** Some pregnant women are at a higher risk for developing cavities because of:

- Morning sickness
- Lack of fluoride in water
- High intake of sugary food or beverages
- Lack of access to oral health care

**Symptoms:** tooth pain or sensitivity

### Early Childhood<sup>3</sup>

**Dental Caries (Cavities):** This is the number one chronic condition in children.

**Symptoms:** tooth pain or sensitivity

**Other Issues:** Poor dental health as an infant often leads to other issues including:

- Pain and infections
- Poor eating and growth
- Poor self-esteem
- Financial costs for families
- Missed school days for children and missed work days for parents

**New mothers** with cavities can **transmit** bacteria to their **infants** by sharing utensils or by cleaning pacifiers with their mouth after an infant has dropped it.

# FREQUENTLY ASKED QUESTIONS

## Is it safe for pregnant women to visit the dentist?

**Yes!** It is safe for pregnant women to be seen by dental providers regularly to prevent and treat any oral health problems that develop during pregnancy.<sup>2</sup>

**What about x-rays?** Many patients have concerns about the safety of receiving x-rays but dental x-ray imaging is safe and recommended during pregnancy. The staff at your dental office know how to keep you and your developing child safe during an x-ray.<sup>2</sup>

## When should infants be seen by dental providers for the first time?

Infants should have a “dental home” **by age 1** or by the **time they have their first tooth, whichever comes first.**<sup>3,4</sup>

**What is a dental home?** A child has a dental home when they have a dentist that they see regularly. Prior to their first tooth, medical providers can still provide education, advice, and a brief oral examination for the child.<sup>3,4</sup>

## What can pregnant women do?



**Know:**

It is safe (and important) to visit the dentist and receive x-rays during pregnancy! Pregnant women should visit the dentist regularly to prevent and treat dental issues.



**Ask:**

Ask medical providers for a referral to a dentist if you do not have one.



**Practice:**

Practice good oral hygiene habits at home throughout pregnancy. This includes brushing teeth twice daily with fluoridated toothpaste, flossing once a day, and eating health foods. Also, make sure to drink fluoridated water.

## What can parents do?



**Know:**

It is important to visit the dentist by age 1 or at the time of their first tooth in order to prevent oral health issues during infancy and childhood. A child should visit the dentist regularly thereafter.



**Ask:**

Ask medical providers for a referral to a dentist if you do not have one and your child has developed a tooth or is one year old.



**Practice:**

Practice good oral hygiene habits at home throughout infancy and childhood. Before the first tooth, this means wiping the gums with a soft cloth after feeding and before bed. After the first tooth, this means gently brushing twice a day with a small amount of fluoridated toothpaste. Also, be sure to ask your child’s pediatrician or dentist if your community’s water has optimal levels of fluoride. If not, talk to your child’s provider about fluoride supplements.

### References

1. Data from the Massachusetts PRAMS, 2019
2. Massachusetts Oral Health Practice Guidelines for Pregnancy and Early Childhood: <https://www.mass.gov/files/documents/2016/10/ne/oral-health-guidelines.pdf>
3. CDC Children’s Oral Health: [https://www.cdc.gov/oralhealth/children\\_adults/child.htm](https://www.cdc.gov/oralhealth/children_adults/child.htm)
4. NIH ‘A Healthy Mouth for Your Baby’: <https://www.nidcr.nih.gov/OralHealth/Topics/ToothDecay/AHealthyMouthforYourBaby.htm>