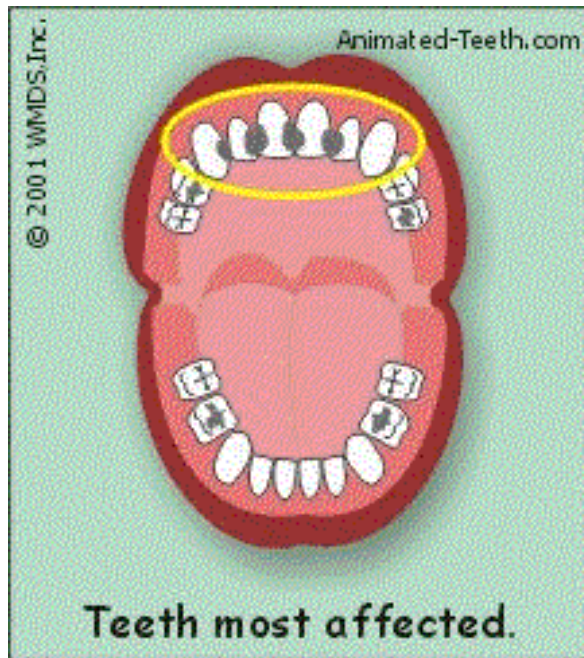


Early Childhood Caries and Rampant Caries



By

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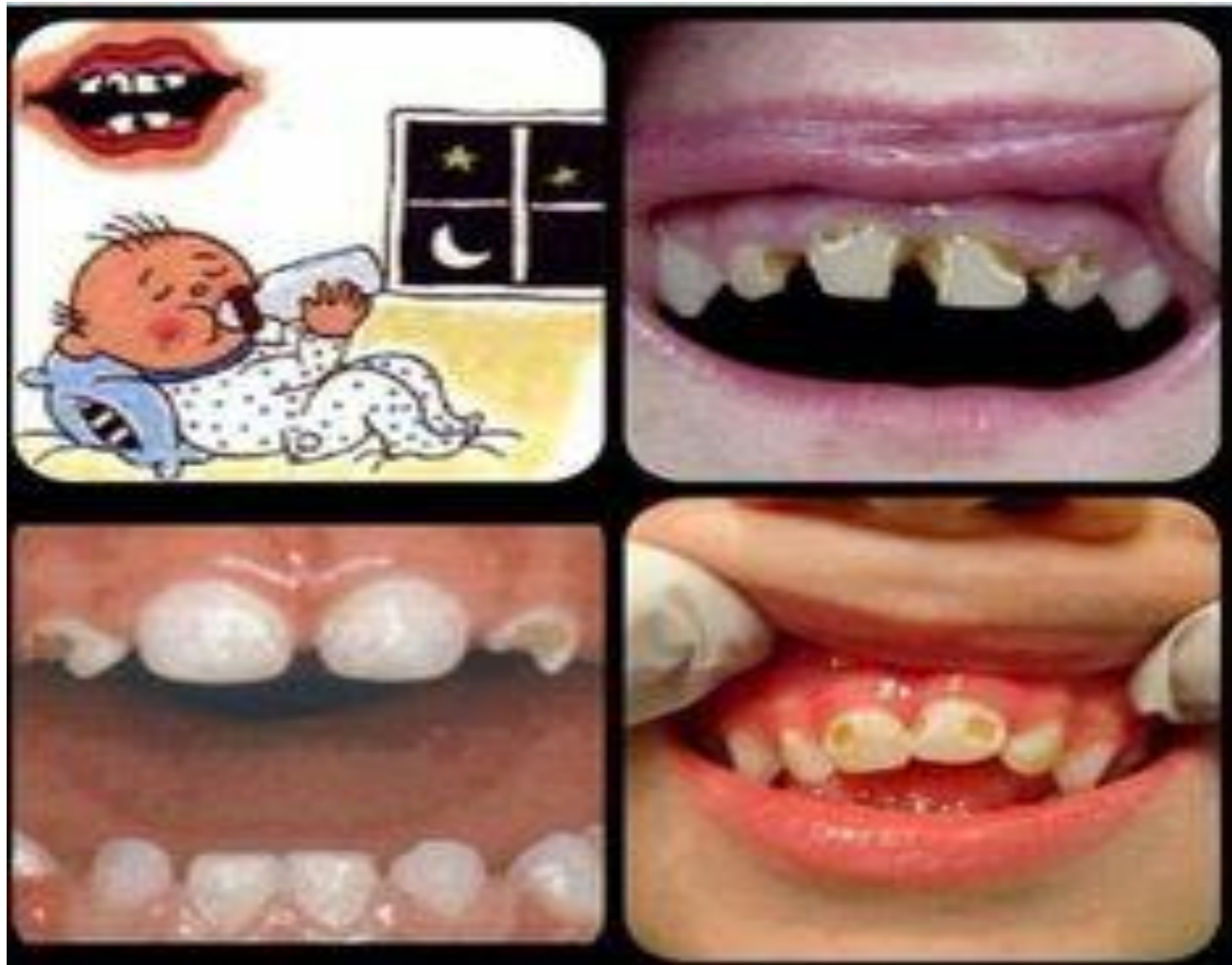
Early Childhood Caries

- ***Baby Bottle Tooth Decay.***

- ✓ *Form of rampant caries*
- ✓ *Found in very young children who routinely have been given a nursing bottle when going to sleep*
- ✓ *Or who have experienced prolonged at – will breast – feeding.*
- ✓ *Other names: nursing bottle mouth, baby bottle syndrome, baby bottle caries, prolonged nursing habit*



Early Childhood Caries



Early Childhood Caries



Early Childhood Caries (Etiology)



- **Microbiology**
- **Risk Factors:** *use of sugar – containing liquid in a nursing bottle, child put to bed and to sleep with a bottle, baby falling a sleep while feeding, and oral hygiene measures not implemented by time of eruption of first tooth.*
- **Predisposing Factors:**
 - ✓ *Nursing bottle that contains sweetened milk or other fluid sweetened with sucrose*
 - ✓ *Pacifier dipped or filled with a sweet agent, such as honey*
 - ✓ *Prolonged at – will breast-feeding*



Early Childhood Caries (Effects)

- *Maxillary anterior teeth and primary molars are the first to be affected*
- *As the baby falls a sleep, pools of sweet liquid can collect about the teeth*
- *While the sucking is active, the liquid passes beyond the teeth*





Early Childhood Caries (Recognition)

- *Children should be seen for an examination no later than 6 months after eruption of the first tooth*
- *Demineralization may be noted along the cervical third of the maxillary anterior*
- *A later stage of the lesions appear dark brown, and the crown may be destroyed to the gum line, abscesses may develop, and the child may suffer pain and discomfort*



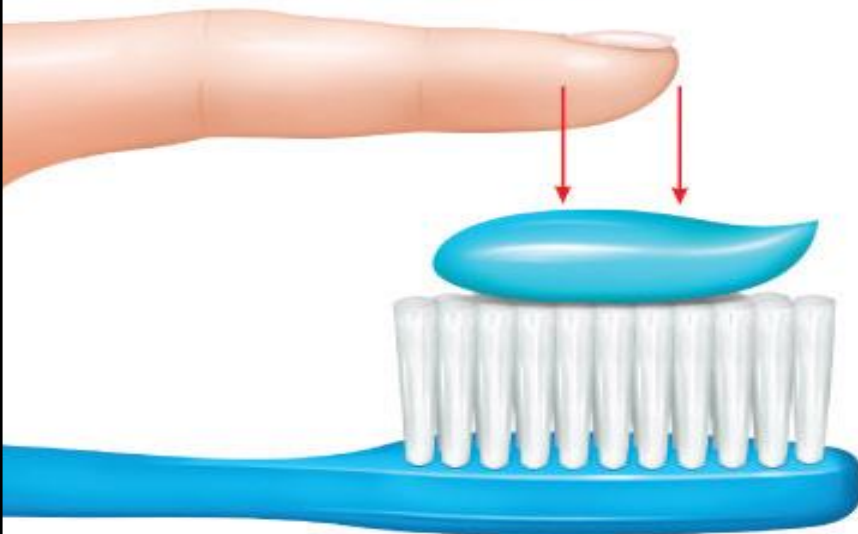
Prevention Method....!!



Correct Amount of Toothpaste for Children

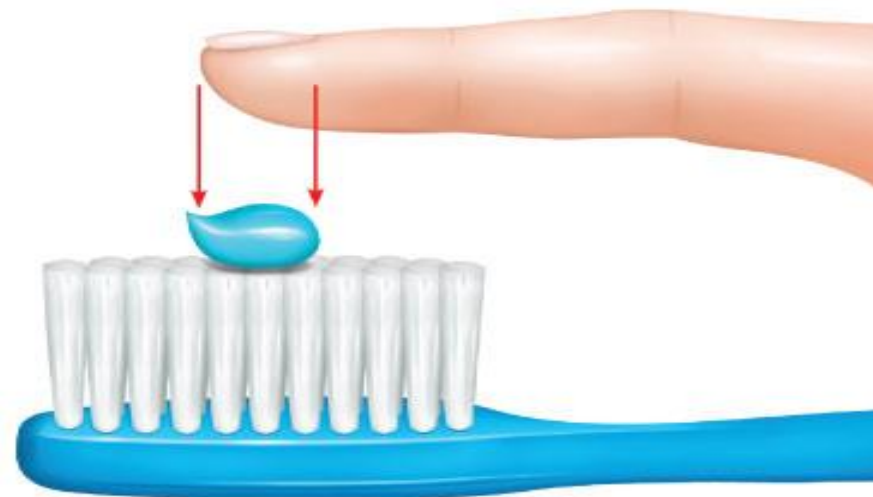
It is common for children to use more toothpaste on the toothbrush than what is needed or what is in the child's best interests. Too much toothpaste increases the chances of your child consuming too much fluoride.

INCORRECT

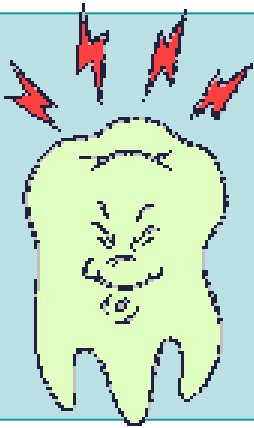


The above illustration shows the incorrect amount of toothpaste for a child. This amount could be swallowed by the child increasing or exceeding the daily amount necessary.

CORRECT



The above illustration shows the proper amount of toothpaste for a child, which is a pea-sized amount or roughly the size of their fingernail.



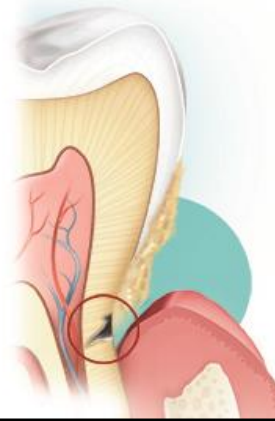
Root Surface Caries

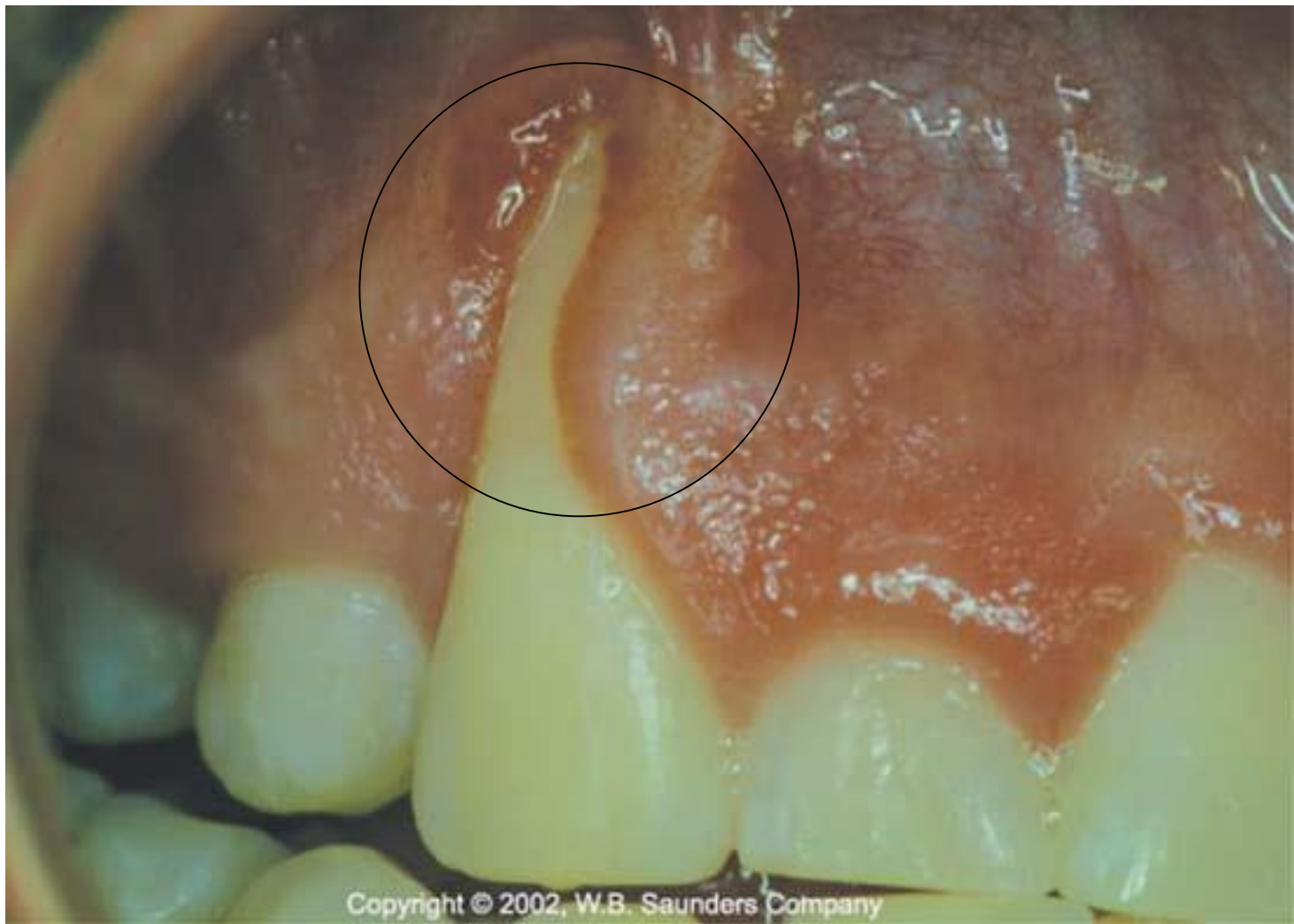


Root Surface Caries



- *A soft, progressive lesion of cementum and dentine which involves bacterial infection and invasion*
- *Also called cemental caries, cervical caries, , or radicular caries*
- *The incidence of root caries increases with age, but not because of age*
- *Gingival recession is necessary for root caries, and gingival recession is related to periodontal conditions which lead to recession*





Example of gingival recession: Because of parafunctional habit

Root Surface Caries

Steps in the Formation of a Cavity

- *Gingival recession exposes the cemental surface.*
- *Caries does not form in the root surface while periodontal fibers are still attached*
- *Dental caries starts near the cementsoenamel junction.*
- *Cementum is very thin and is soon destroyed*
- *Dentine is invaded*
- *Enamel is not involved*
- *Root caries incidences has been shown to be directly related to the fluoride concentration in the drinking water*



Root Surface Caries (Risk Factor)

- *Periodontal infection*
- *Microorganisms*
- *Local/behavioral: inadequate personal hygiene*
- *Diet: frequent use of cariogenic foods*
- *Low fluoride exposure*
- *Xerostomia: salivary gland dysfunction, radiation to head/neck, or medication with side effects*
- *Prosthetic devices: inadequate plaque removal daily, overdenture, clasps, provided plaque retentive areas*
- *Tobacco use*

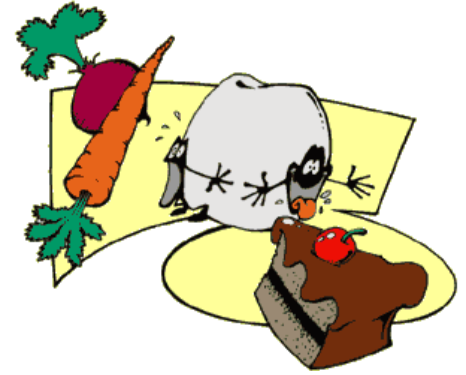


Prevention of Dental Caries



Prevention Methods

- *Balanced food intake*



- *Personal oral hygiene care*

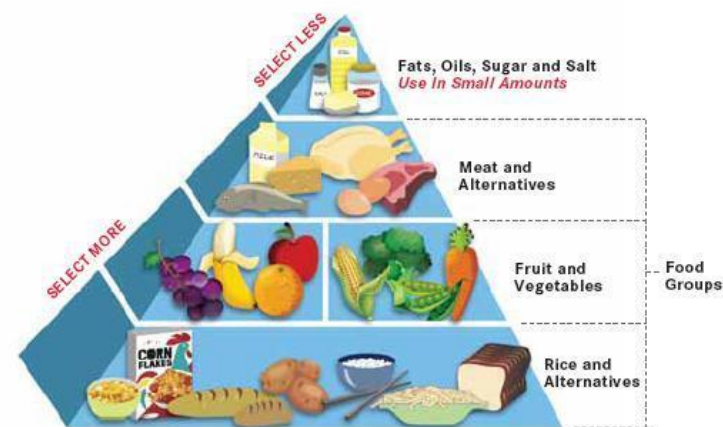


- *Professional oral hygiene care*



Balanced Food Intake

- Sources of cariogenic foodstuff in the diet with advices for control
- Relationship of the frequency of eating cariogenic foods to dental caries



Personal Oral Hygiene Care

- *Regular toothbrushing 2-3 times/ day*



- *Regular dental flossing 1/day*



- *Regular tongue scraping or brushing (after each tooth brushing procedure)*



Professional Oral Hygiene Care

- *Regular visit to the dental office for checking up every (3 – 6) months*
- *Assist in early investigation for a new lesions or any kind of dental diseases which assists to do control over it earlier before it becomes a serious dental problem*



THANK YOU!

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