



Talasila DENTAL

Orthodontic & Implant Centre



Child Dental Care



Tooth Decay

What is tooth decay?

Tooth decay starts as small white spots that grow to large holes over a period of time. If tooth decay is not treated it may lead to infection, pain and swelling and eventually to tooth loss.

How do teeth decay?

Germs (bacteria) in your mouth grow on teeth every day. They form a sticky layer over the teeth called dental plaque. The bacteria in plaque use sugars in the things we drink and eat, and make acids. The acid attacks the tooth's outer layers (enamel and dentine) and dissolves them away. If acid continues to attack, then a hole will appear in the tooth's outer layer. This is called tooth decay. Tooth decay may be painful or you may not even know it is there. Saliva (spit) neutralises the acid in plaque. If the plaque is brushed off and saliva surrounds the tooth, the enamel surface can harden again. Fluoride helps the enamel to be repaired."

What causes tooth decay?

- Not brushing teeth everyday with fluoride toothpaste.
- Sugary food and drinks consumed frequently throughout the day.

What are some foods that can cause tooth decay?

Sugary and sticky foods like lollies, biscuits, cakes, chocolate. Any food that sticks to tooth surfaces and dissolves slowly increases the risk of tooth decay.

What are some drinks that can cause tooth decay?

Soft drink, juice, cordial, sports drinks, sweetened tea or coffee, flavoured milk. The risk of tooth decay increases if the sugary drinks are sipped slowly, or when they are swished and swilled before swallowing.

How can you prevent tooth decay?

- Eat healthy food and snacks.
- Limit sugary food and drinks.
- Drink tap water throughout the day.
- Brush your teeth morning and night with fluoride toothpaste.
- Have regular dental check-ups.



DANGERS OF TOOTH DECAY TO YOUNG CHILDREN

ORAL HEALTH

- * Loss of baby teeth
- * pain
- * damage to permanent teeth
- * Crooked teeth
- * Vulnerable to caries and gum disease throughout life



INTELLECTUAL DEVELOPMENT

- * Poor speech articulation
- * Poor school performance
- * Missed school
- * Inattention in school

GENERAL HEALTH

- * Infections to ears, sinuses, cuts, brain
- * Life-threatening infections
- * Poor sleep habits
- * Chewing difficulty / Malnutrition / Insufficient Growth
- * Disability

SOCIAL DEVELOPMENT

- * Reluctance to speak, smile, play
- * Teasing from others
- * Low self-esteem
- * Social ostracism



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Tooth brushing tips for parents and caregivers



Your role as a parent includes keeping your child's teeth clean and healthy and free from tooth decay. It can be challenging to brush infants' and toddlers' teeth, but it's important to do because decay can start easily and develop very quickly in children's teeth.

Brushing your baby's teeth

- Begin brushing your child's teeth as soon as their first tooth appears.
- Use a soft, baby-size toothbrush. Do not share toothbrushes among family members.
- Use a tiny smear of fluoride toothpaste, the size of a grain of rice.
- Brush twice a day; before bed is especially important.
- Brush where the teeth and gums meet.
- Lift your child's lip regularly. Look closely along the gum line. Call your dentist if you notice any white or brown spots, or anything unusual.
- Take your baby to see a dentist once their first tooth comes in or by the time they are one year old.



How to position your child for tooth brushing



Find a comfortable position. It is often easiest to brush your child's teeth when the child is lying down. You will see better and do a better job. It may be helpful to have another adult hold the child's hands, or swaddle younger children to keep them from grabbing hands or moving around too much.

Try these positions:

- Lay your child on a change table, making sure they cannot fall off.
- Place your child on a couch or bed, with their head in your lap.
- Lay your child on the floor with their head placed between your legs.

Cleaning your toddler's teeth



- Use a child-size toothbrush with soft bristles. Do not share toothbrushes.
- Use a tiny smear of fluoride toothpaste and gradually increase to a small pea-sized amount by age three.
 - Brush twice a day; before bed is especially important.
 - Brush the tongue, the top of the tooth and both sides of the tooth; remember to brush where the teeth and gums meet.
 - Brush for at least two minutes.
 - Gums that bleed need to be brushed more often—not harder.
- Gently floss between teeth that are touching.

Children should get dental checkups every 6 months

Remember!

- Young children cannot clean their own teeth. Brush **for** them when they are very young and brush **with** them as they grow older.
- Children over age eight can brush on their own with your supervision.
- Always use toothpaste with fluoride. Fluoride strengthens tooth enamel and helps prevent tooth decay.
- Encourage children to spit out toothpaste and keep it out of their reach.
- Offer water when your child is thirsty. Discourage grazing on foods and sipping on sugary drinks between meals and snacks. This causes ongoing acid attacks on teeth, which can cause teeth to decay.
- Make sure you look after your own teeth and gums. Adults with decay or infection in their mouth can pass bacteria to children by sharing toothbrushes or spoons and by cleaning soothers in their own mouths.
- Be a great role model: children want to brush their teeth when they see you brushing your own.



PREVENTION OF ORAL HABITS IN CHILDREN

Oral Habits commonly encountered in children



Thumb Sucking
Nail Biting



Lip Biting



Mouth Breathing



Tongue Thrusting

The harmful effects of these habits



Mal-occlusion of teeth
due to
Thumb Sucking



Soft tissue injury
due to Lip Biting



Protruded teeth due to
Mouth breathing.



Mal occlusion of teeth
(open bite)
due to Tongue Thrusting

Habit Breaking Appliances

Habit breaking appliances help to correct the above mentioned habits in children. They can be either a fixed or removable type.



External Habit breaking appliance
to prevent Thumb Sucking



Intra - oral
Habit breaking appliance
to prevent Thumb Sucking



LIP-BUMPER

Intra - oral Habit breaking appliance
to prevent Lip Biting.



Intra - oral Habit breaking appliance
to prevent Mouth Breathing



Intra - oral Habit breaking appliance
to prevent Tongue Thrusting

Problems to Watch for in Growing Children

Malocclusions (“bad bites”) like those illustrated below, may benefit from early diagnosis and referral to an orthodontic specialist for a full evaluation.

CROSSBITE OF FRONT TEETH



Top teeth are behind bottom teeth

CROSSBITE OF BACK TEETH



Top teeth are to the inside of bottom teeth

CROWDING



OPEN BITE



Front teeth do not meet when back teeth are closed

PROTRUSION



DEEP BITE



UNDERBITE



The lower teeth sit in front of upper teeth when back teeth are closed

SPACING



ORAL HABITS



Sucking on thumb, fingers

In addition, if you notice any of the following in your child, check with your orthodontist:

- early or late loss of baby teeth
- difficulty in chewing or biting
- mouth breathing
- jaws that shift or make sounds
- speech difficulties
- biting the cheek or the roof of the mouth
- facial imbalance
- grinding or clenching of the teeth

Final treatment decisions should be made among the parent, and orthodontist.

The Right Time for an Orthodontic Check-Up: No Later than Age 7

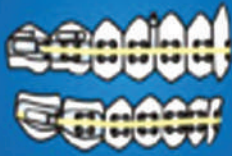
Here's Why:

- Orthodontists can spot subtle problems with jaw growth and emerging teeth while some baby teeth are still present.
- While your child's teeth may appear to be straight, there could be a problem that only an orthodontist can detect.
- A check-up may reveal that your child's bite is fine. Or, the orthodontist may identify a developing problem but recommend monitoring the child's growth and development, and then, if indicated, begin treatment at the appropriate time for the child. In other cases, the orthodontist might find a problem that can benefit from early treatment.
- Early treatment may prevent or intercept more serious problems from developing and may make treatment at a later age shorter and less complicated. In some cases, the orthodontist will be able to achieve results that may not be possible once the face and jaws have finished growing.
- Early treatment may give your orthodontist the chance to:
 - Guide jaw growth
 - Lower the risk of trauma to protruded front teeth
 - Correct harmful oral habits
 - Improve appearance
 - Guide permanent teeth into a more favorable position
 - Create a more pleasing arrangement of teeth, lips and face
- Through an early orthodontic evaluation, you'll be giving your child the best opportunity for a healthy, beautiful smile.



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If your child is older than 7, it's certainly not too late for a check-up.



Orthodontic Treatment

Classic Case Records



Before Treatment



Teeth after orthodontic correction.



Before Treatment



Teeth after orthodontic correction.

The Perfect
Correction
of
mal-occlusion



Before Treatment



Teeth after orthodontic correction.



Before Treatment



Teeth after orthodontic correction.



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TREATMENT OPTIONS IN TEENS & ADULTS



BRIGHTENING CONTOURING AND POLISHING

can smooth out your teeth's rough edges and provide that beautiful symmetrical look!

**REVOLUTIONARY
TREATMENT ALTERNATIVES
CAN CHANGE YOUR SMILE
QUICKLY, EASILY, AND
PERMANENTLY!**



BONDING

uses a natural-looking material to beautifully fill in chipped edges and gaps between teeth!



NATURAL-COLOR FILLINGS

are not only as attractive as porcelain fillings, but they are stronger and more solid!



CROWNS

With new, natural-looking, all porcelain crowns, there's no more unsightly metal margins at the gumline!



VENEERS
using thin layers of porcelain bonded directly to your teeth, give you an overall "white lift" and a whole new improved look that will last for years!

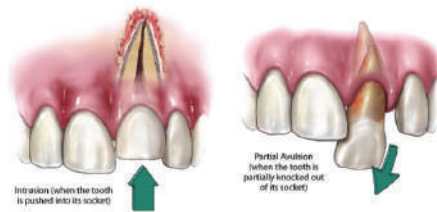


Knocked-Out Teeth

More than 5 million teeth are knocked out every year in children and adults. With proper emergency action, a tooth that has been knocked out of its socket can be successfully replanted and last for years. It's important to see a dentist as soon as possible after the tooth is knocked out. Quick action will increase the likelihood of saving the tooth.

Saving a Knocked-Out Tooth

1. Pick up tooth by the crown (the chewing surface) not the root.
Locate the tooth immediately;
do not leave it at the site of the accident.
The tooth should be handled carefully -- touch only the crown -- to minimize injury to the root.
2. If dirty, gently rinse tooth with water.
Do not use soap or chemicals.
Do not scrub the tooth.
Do not dry the tooth.
Do not wrap it in a tissue or cloth.
3. Reposition tooth in socket immediately, if possible.
The sooner the tooth is replaced, the greater the likelihood it will survive.
To reinsert, carefully push the tooth into the socket with fingers, or position above the socket and close mouth slowly. Hold the tooth in place with fingers or by gently biting down on it.
4. Keep tooth moist at all times.
The tooth must not be left outside the mouth to dry. If it cannot be replaced in the socket, put it in one of the following:
Milk
Mouth (next to cheek)
Regular tap water is not recommended for long-term storage because the root surface cells do not tolerate water for long periods of time.
5. See a dentist within 30 minutes.
Bring the tooth to a dentist as soon as possible -- ideally, within 30 minutes. However, it is possible to save the tooth even if it has been outside the mouth for an hour or more.





“ Every child deserves a beautiful

Smile...”



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Timings : 10 A.M to 2 P.M - 5 P.M TO 9 P.M

* Sunday holiday