

# Words OF MOUTH

A SEMIANNUAL PUBLICATION OF THE MASSACHUSETTS DENTAL SOCIETY

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A photograph of a man and a young girl brushing their teeth together in a bathroom. The man is smiling and looking at the girl, who is also smiling. They are both holding toothbrushes. The background is a bright, green-tinted bathroom.

**Kids' Oral Health:  
Who's the BOSS?**



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The Massachusetts Dental Society (MDS) is pleased to make this publication available to our member dentists as a way of communicating important oral health information to their patients.

Information in **WORD OF MOUTH** articles comes from dental health care professionals of the MDS and other leading professional dental organizations, including the American Dental Association. If you have any questions about specific content that may affect your oral health, please contact your dentist. For news regarding oral health, please visit the Public Resources section of the MDS website at [massdental.org](http://massdental.org).

Your comments and suggestions regarding **WORD OF MOUTH** are always welcome. All correspondence and requests for additional copies may be sent to:

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# Kids' Oral Health: Who's the **BOSS?**

Parents of young children know how difficult it can be to get them to do anything. Whether it's making sure they pick up their toys, eat at least half of what's on their plate, or take a nap—parents often have their work cut out for them. When pushed to do something they don't want to do, kids may say "You're not the boss of me!" But given their age, children are not always capable of knowing what is best for them to help them lead happier and healthier lives, and so parents must steer their youngsters down the right path. And that includes helping them to develop good oral hygiene skills, such as brushing their teeth twice a day. When it comes to your child's oral health, you are indeed the boss.





It may come as a surprise, but good brushing habits should begin at birth. Parents can use a wet washcloth or gauze to wipe the baby's gums. An infant's primary, or baby, teeth typically come in anywhere from six months to one year of age, and a pattern of regular oral cleansing in the morning and before bedtime should be established. Children are creatures of habit: Just like the bedtime rituals that help them nod off, adopting a regular toothbrushing routine from an early age will accustom children to expect their teeth to be brushed at these times.

The recommended goal of a two-minute brushing routine may be more challenging with a younger child, so parents need to set a good example. If children see Mom and Dad regularly brushing and flossing, they are more likely to emulate this behavior. For the more stubborn preschooler, a "team" approach might be helpful. Using this method, the child brushes his or her own teeth first, followed by a parental once-over. This way, the child's need for independence can be acknowledged but Mom or Dad can still be the "brushing boss." This guidance is crucial because not many young children know how to brush their teeth properly.

What about flossing? Removing food particles from between the teeth is also important for preventive oral care, and flossing should be introduced to young children; however, it should be performed by the parent, preferably before brushing. The parent can sit on a chair or the toilet seat and have the child face forward, which allows for better control of the child's head and increased visibility.

Parents will also want to make sure that their child visits the dentist twice yearly for routine checkups. These dental visits—which are not unlike wellness visits to the pediatrician—should start within six months of the eruption of the baby's first tooth and no later than the child's first birthday, according to the Massachusetts Dental Society, the American Dental Association, the American Academy of Pediatric Dentistry, and the Massachusetts Academy of Pediatric Dentistry. Parents may wonder why they need to schedule dental visits at that age: What sort of dental problems could a baby or toddler have? These early dental visits allow the dentist to check for tooth decay and other things that may adversely affect the teeth and gums, including habits like thumb sucking, which can cause the teeth to misalign. Another bonus: Routine dental checkups teach children that there's nothing to fear at the dentist's office.

When dealing with young children, it takes persistence and patience to help lay the foundation for a lifetime habit of regular oral care.





# Stay in the Game: WEAR A MOUTHGUARD

Team sports are a great way for children to learn the value of working well with others, get the health benefits of exercise, and have some good-old fun. But when it comes to kids playing contact sports, it's not all fun and games when someone suffers an orofacial injury or concussion. For this reason, the Massachusetts Dental Society (MDS), the Massachusetts Medical Society (MMS), and the Massachusetts Chapter of the American Academy of Pediatrics (MCAAP) have teamed up in support of the *Grin and Wear It*® program, which aims to teach players, parents, and coaches to recognize that mouthguards are an easy way to protect an athlete's smile from serious injury. No one wants to be sidelined with an injury, so wear a mouthguard to stay in the game if you're playing contact sports.



Just as helmets, shoulder pads, and knee pads are worn to protect against sports-related injuries, mouthguards are equally important as protective gear. Mouthguards help prevent injury to the oral cavity, especially to the teeth, lips, cheeks, and tongue. Even athletes who wear helmets or face shields—such as football, hockey, and lacrosse players—should wear mouthguards, since they also protect against head-and-neck injuries by helping to cushion blows that otherwise could result in a concussion or worse.



When it comes to choosing a mouthguard, there are three types widely available: custom-made, boil-and-bite, and stock. Both the stock and the boil-and-bite mouthguards are available in most sporting goods stores and are the least expensive option; however, they offer limited protection, can be uncomfortable to wear, and may make breathing and speaking difficult. The custom-made mouthguard is by far the best mouthguard in terms of fit, comfort, and protection because it is made from an impression a dentist takes of the athlete's teeth. By pressure-laminating the mouthguard during its fabrication, the final product is designed to fit the athlete's mouth exactly. The MDS recommends that athletes wear custom-made mouthguards when participating in contact sports, because they offer the best protection from orofacial injury and are considered the most comfortable to wear. Players and parents: Consult with your dentist to determine which mouthguard is best for you.

The MDS, MMS, and MCAAP recommend that adults and children wear mouthguards during all sports in which injury to the mouth may occur. This way, if you end up losing, it will only be a game.



Learn more about mouthguards and the *Grin and Wear It*® program at [massdental.org/mouthguards](https://massdental.org/mouthguards).

A bright future begins with a healthy smile.



# ROOT CANAL: The More You Know

The words “root canal” have been known to strike fear in many a dental patient, and root canal therapy is probably the dental procedure that causes people the most anxiety. The root canal’s reputation is so negative that it’s become a go-to comic cliché for when you want to emphasize something you really don’t want to do (e.g., “I’d rather have a root canal than eat dinner with my in-laws again”). But the truth is that more often than not, the anticipation of a root canal is far worse than the actual procedure. The more you know about a root canal, the less frightened you’ll be if your dentist ever utters those words to you.

Root canal therapy—also known as endodontic treatment—is necessary when the tooth’s pulp becomes inflamed or infected. Pulp is the soft tissue inside teeth that carries the tooth’s nerves, blood vessels, and connective tissues. When the pulp becomes damaged through injury or disease, bacteria can leak into the pulp and cause it to die. If left untreated, the infection can spread, and the bone surrounding the tooth will degenerate until the tooth either falls out or has to be removed. According to the American Dental Association, common causes of infected pulp are:

- ◆ A deep cavity
- ◆ Repeated dental procedures
- ◆ A cracked or broken tooth
- ◆ Injury to the tooth (even if there’s not a visible crack or chip)

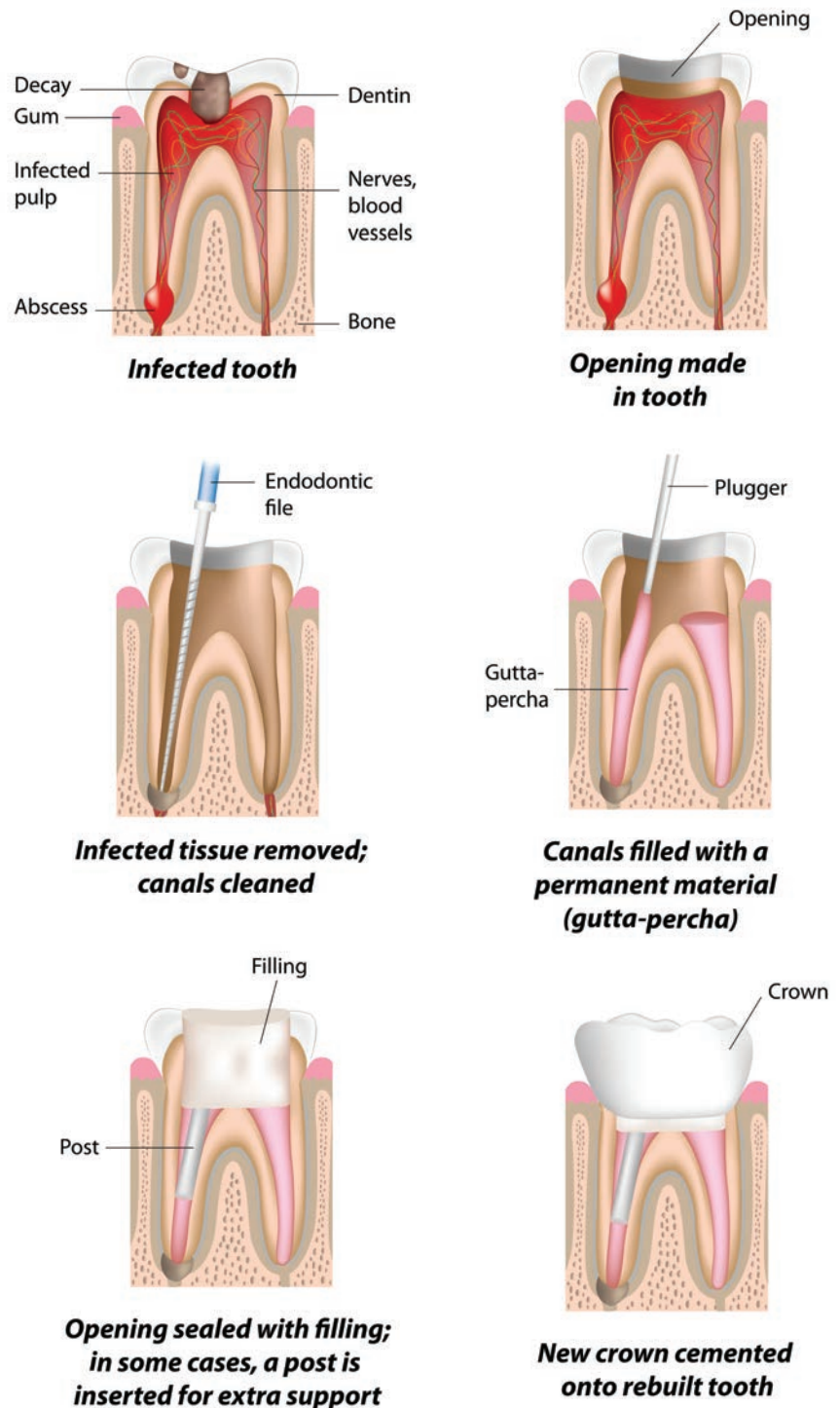
Root canals can be performed by your general dentist; however, your dentist may refer you to an endodontist, who is a dentist trained to treat the insides of teeth. During root canal treatment, your dentist or endodontist will remove the diseased pulp and replace it with a filling material. The pulp chamber and root canal(s) of the tooth are then cleaned and sealed, and the tooth is sealed with a post and/or crown. A crown is important because it protects the tooth from fracture.

In most cases, a root canal is a relatively simple procedure that can be performed in one to two visits with relatively minor discomfort. (Depending on the condition of the tooth, a third visit

may be required.) Most patients report that they’re comfortable during and after the procedure. You can expect to have inflammation of the surrounding tissues and some discomfort, but an over-the-counter analgesic can help alleviate the pain, which should last for only a few days. A follow-up exam will ensure that your tissue is healing properly. Then, if your treatment is being performed by an endodontist,

he or she will send you back to your general dentist to have a permanent crown placed on the tooth.

Now that you know a little bit more about what a root canal is and how it allows you to save not only your tooth but also your smile, maybe you won’t panic if you one day hear those dreaded words from your dentist.





# Halloween Candy

## Can Be Frightening for Kids' Teeth

With Halloween right around the corner, parents will be busy tracking down the highly sought-after Wonder Woman or Spider-Man costume for their child to wear while going out trick-or-treating. In their dash to the costume store, however, moms and dads shouldn't forget about the effect all that sugary candy could have on kids' teeth.

While consuming several pieces of candy in celebration of Halloween may not immediately harm one's teeth, excessive and continuous candy consumption can certainly have an effect. Too much exposure to sugary candies and snacks can eventually lead to tooth decay, especially in young children's teeth. Teeth are more susceptible to decay during the first few years after eruption in the mouth, and since children are getting teeth until around age 13, they

have a higher vulnerability for decay. What's more, hard candy can sometimes cause chips or breaks in teeth when bitten down upon, and excessively gummy, sticky, or chewy candies can get lodged in the back molars or between orthodontic appliances, such as braces.

The best advice for parents is to not let Halloween treats hang around the house for too long. Consider allowing your kids to have a few pieces of candy each night for one week, and then throwing the rest out. The frequency of sugar consumption has a lot to do with how cavity-causing decay forms in the mouth.

Be diligent in making sure that children brush and floss their teeth right after eating their candy, and don't let them go to sleep without brushing away the sugary residue from their teeth. (Of course, some of you parents may sneak a few pieces of candy from the trick-or-treat bag on the sly, and the same guidelines apply to you: Brush and floss your teeth after that Milky Way bar.)

Letting your children enjoy their Halloween candy in moderation won't be harmful as long as they have good oral health habits. This will ensure that their smile stays healthy well beyond the most "frightening" time of the year.



# Word Puzzle

Find the missing word in each sentence, then write it in each box.  
Combine the first letter in each word to uncover the hidden word!

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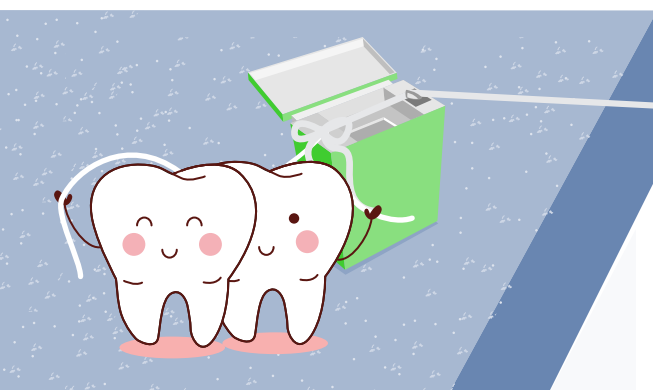
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1. Certain types of bacteria found in some of the \_\_\_\_\_ you eat can stick to the enamel that covers your teeth.
2. \_\_\_\_\_ to floss your teeth takes time and patience. If you're just beginning to floss your teeth, be sure your mom or dad or another adult is there to help you.
3. Floss at least \_\_\_\_\_ a day and take your time to be sure you've flossed in between every tooth.
4. Brushing your teeth at least twice a day helps get rid of some of the plaque on your teeth. Be sure to brush the tops, \_\_\_\_\_, front, and back of your teeth.
5. The dentist puts \_\_\_\_\_ on your teeth to seal out food and plaque to protect you from cavities.
6. It is \_\_\_\_\_ to clean between your teeth in places where your toothbrush can't reach.
7. Brushing alone is \_\_\_\_\_ enough to keep your teeth healthy.
8. Brushing with toothpaste helps remove plaque from your teeth and \_\_\_\_\_.

Answers  
1. Foods  
2. Learning  
3. Once  
4. Sides  
5. Sealants  
6. Important  
7. Not  
8. Gums  
Hidden word: Flossing







# Attention Athletes

Don't pay a penalty for **NOT WEARING** a **MOUTHGUARD**



## A CUSTOM MOUTHGUARD

is the **best** mouthguard in terms of fit, comfort, and protection. Consult your dentist.



Athletes are **60 TIMES** more likely to suffer damage **to the mouth** when **not** wearing a **mouthguard**.



The cost to repair a **knocked-out tooth** and follow-up dental treatment can cost **THOUSANDS OF DOLLARS**—many times greater than the price of a **MOUTHGUARD**.

**DO NOT** wear a **retainer** or other removable appliance while participating in any contact sport.



**More than 5 MILLION TEETH** are **knocked out**

each year through sports injury, accident, or play.



Even athletes who use **HELMETS** or **FACE MASKS** should wear **MOUTHGUARDS**.



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