



Pediatric Oral Health: Advances and Challenges

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February is Children's Dental Health Month (CDHM) and an ideal time for reflection on the positive changes related to children's oral health as well as the ongoing challenges impacting both children and women.

Children's oral health behaviors are influenced by behaviors role modeled by the mother, caregiver, or family members. The perinatal period is a sensitive, but ideal time to educate and encourage healthy oral behaviors of the mother for herself and the unborn child. A more focused effort on perinatal and postnatal oral health utilizing an interprofessional approach among dental hygienists, dentists, gynecologists and obstetricians, midwives, nurse practitioners, nurses, primary care providers, and nutritionists and other community health stakeholders is critical. All dental and health professionals who provide clinical care or services to pregnant clients should be familiar with national policies related to oral health during and after pregnancy, particularly those regarding the safety and efficacy of dental care during the prenatal period.¹

Dental visits are an ideal time to discuss oral health behaviors and habits and address concerns, in addition to providing anticipatory guidance for infant oral health. Unfortunately, dental visits during pregnancy have decreased by nearly 20% based on the 2012-2015 and 2016-2020 Pregnancy Risk Assessment Monitoring System (PRAMS) data, respectively (e.g., 50.4% in 2012 to 40.0% in 2020).²⁻³ However states, such as Virginia, that implemented the 2015 Medicaid dental benefit for pregnant women have observed an increase in dental insurance and

dental care utilization.⁴ As of late 2022, all states, including Washington, DC, have instituted the dental Medicaid benefit for pregnant women through three months postpartum.⁵ This broader state dental benefit under Medicaid shows promise to oral health prioritization for pregnant and postpartum women, particular those in lower income groups.

We know that the oral bacteria responsible for dental caries may be transmitted from mother to child,¹ which makes continued dental care during pregnancy and beyond essential for overall health and well-being. Dental caries remains the most chronic disease experienced by children, and it is a complex and multifactorial disease process.⁶ According to national data, the overall prevalence of children aged 2-5 years with dental caries in primary teeth decreased from 28% (1999-2004) to 23% (2011-2016).⁷ However, racial and income disparities continue to persist among certain sociodemographic groups. For example, the same national data in 2011-2016 found that among children aged 2-5 years, Black, non-Hispanic and Mexican American had a higher prevalence of dental caries in primary teeth (28% and 33%, respectively) than their White, non-Hispanic cohorts (18%).⁷

The recent Oral Health in America: Advances and Challenges report further explains that while dental caries has declined in the last 20 years, all children have not benefited in the same way. In addition, nearly half of the children in the United States (US) lack regular oral care due sociodemographic barriers.⁸ Regular and timely dental visits by age one and

throughout the lifespan are essential for the growing child and family. Specifically, dental visits provide an opportunity for the dental hygienist and dentist to offer preventive dental care and age-appropriate anticipatory guidance such as feeding practices, dietary habits, oral hygiene habits, and household safety issues including electrical outlets, cleaners, and detergent pods, to name a few.

Dental hygiene programs offer another opportunity to address oral health disparities among women and children. Studies that have examined Canadian and US dental hygiene program prenatal and pediatric curriculum found varied and limited prenatal clinical experiences for students.⁹⁻¹⁰ Community partnerships with programs such as the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Early Head Start Programs are ideal opportunities to increase perinatal, postnatal, and pediatric patient experiences for students, while also addressing access care barriers.

Children's Dental Health Month is an ideal time to promote, educate, and increase awareness for children's oral health while also recognizing the stark ongoing disparities existing between maternal and children's oral health. Interprofessional collaborations amongst providers and community partners are essential to narrowing the disparity gap. What will you do to make a difference?

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