

# Promoting Awareness of Early Childhood Caries

Early Childhood Caries (ECC, early childhood tooth decay) is an infectious disease that can start as soon as an infant's teeth erupt. ECC can progress rapidly and may have a lasting detrimental impact on a child's health and well-being. ECC is a serious health problem.<sup>1</sup>

ECC is defined as the presence of one or more decayed (cavitated or non-cavitated) teeth, one or more missing teeth due to caries, or filled tooth surfaces in any primary tooth in a child 71 months or younger (under 6 years of age).<sup>2</sup> In other words, any caries experience in a child under 6 years of age constitutes Early Childhood Caries.

"The 2010 Basic Screening Survey of 0-5 year-old AI/AN children showed that by age five, 75% of children had experienced dental caries, more than double the general U.S. population. Additionally, by age two, 44% of AI/AN children have experienced dental caries." That is why we say that "2 is too late."<sup>3</sup>



## Goals of the IHS Early Childhood Caries Collaborative

**Overall goal:** Reduce the prevalence of ECC by 25% by the end of FY 2015.

### Objectives to help meet this goal:

- Increase access to dental care by 50% by the end of FY 2015 for 0-5 year-old children.
- Increase the number of 0-5 year-old children who receive fluoride varnish by 25% by the end of FY 2015.
- Increase the number of sealants in 0-5 year-old children by 25% by the end of FY 2015.
- Increase the number of ITRs ("Mighty Mouth" fillings) by 50% by the end of FY 2015 for 0-5 year-old children.

## References

<sup>1</sup> National Maternal and Child Oral Health Resource Center. Promoting Awareness, Preventing Pain: Facts on Early Childhood Caries (ECC). 2004. Available online at [www.mchoralhealth.org](http://www.mchoralhealth.org).

<sup>2</sup> American Academy of Pediatric Dentistry. 2008. Available online at [www.aapd.org](http://www.aapd.org).

<sup>3</sup> Indian Health Service. The 2010 Oral Health Survey of American Indian and Alaska Native Preschool Children. Rockville, MD: U.S. Department of Health and Human Services, Indian Health Service, 2011.

**Together, we CAN  
make a difference!**  
Go to <http://www.doh.ihs.gov/ecc>



# Best Practices

## PREGNANCY

### **COLLABORATE!**

Collaborate with your ECC partners to assure that all pregnant women visit the dental clinic during the early months of pregnancy.

### **EDUCATE!**

Educate mothers about the transmissibility of dental caries and ways to prevent ECC. Provide education and support to promote breastfeeding.

### **COUNSEL!**

Remind pregnant women to eat a healthy diet and avoid sweets and sodas.

### **MAKE RECOMMENDATIONS!**

Recommend that pregnant women stop using tobacco.

### **SET AN APPOINTMENT!**

The dental staff can provide an oral exam, periodontal disease screening, prophylaxis, recommendations for completing any needed dental treatment, caries control, and appropriate recall.

The dental staff can assess the mother's caries risk and prescribe anti-bacterials like chlorhexidine or xylitol for high-risk mothers during the perinatal period.

## BIRTH -TWO YEARS

### **COLLABORATE!**

Collaborate with your ECC partners to assure that children receive oral health assessments and fluoride varnish.

### **ASSESS!**

Provide an oral health assessment soon after the first tooth erupts or by 12 months of age. Consider caries stabilization with glass ionomer sealants and restorations as appropriate.

### **PREVENT!**

Provide topical fluoride varnish treatments 4 or more times between the ages of 9-24 months of age.

### **EDUCATE FAMILIES!**

Educate families about the importance of never putting baby in bed with a bottle, using a cup by 6 months, and weaning off the bottle at 12-14 months of age.

Educate families about the protective qualities of fluoride.

Ideally, every child should be drinking fluoridated water and have their teeth cleaned twice daily with a small smear of fluoride toothpaste.

Teach families to lift the lip and look for chalky white or brown spots, and if they see any signs of dental decay, they should see the dentist.

### **ENCOURAGE!**

Encourage families to provide a healthy diet and to avoid sweets and sodas. Reinforce to families that pop does not belong in a preschooler's diet.

## THREE -FIVE YEARS

### **COLLABORATE!**

Collaborate with your ECC partners to assure that every child has a dental home.

Collaborate with the medical, community health, Head Start, and dental providers to assure that every child has a dental home.

### **ASSESS!**

Consider caries stabilization with glass ionomer sealants and restorations as appropriate.

### **PREVENT!**

Provide topical fluoride varnish treatments 3-4 times a year.

### **EDUCATE FAMILIES!**

Educate families about the protective qualities of fluoride. Ideally, every child should be drinking fluoridated water and have their teeth brushed twice daily with a pea-sized amount of fluoride toothpaste.

Encourage families to provide a healthy diet and to avoid sweets and sodas. Reinforce to families that pop does not belong in a preschooler's diet.

### **HEAD START!**

Head Start standards require daily supervised brushing with a pea-sized amount of fluoride toothpaste.

Through Head Start, consider implementing a fluoride varnish program and provide caries stabilization with glass ionomer sealants and restorations as appropriate.