

# The Dental Home

## It's Never Too Early to Start



A Joint Project of The American Academy of Pediatric Dentistry Foundation,  
The Dental Trade Alliance Foundation and The American Dental Association



### The Dental Home

The American Academy of Pediatric Dentistry (AAPD) and the American Dental Association (ADA) support the concept of a “Dental Home,” which is the ongoing relationship between the dentist who is the Primary Dental Care Provider and the patient, and includes comprehensive oral health care, beginning no later than age one.

Establishing a Dental Home means that a child’s oral health care is managed in a comprehensive, continuously accessible, coordinated and family-centered way by a licensed dentist. The concept of the Dental Home reflects AAPD and ADA policies and best principles for the proper delivery of oral health care to all, with an emphasis on initiating preventive strategies during infancy. An infant oral health exam is simple, easy and effective.

The Dental Home enhances the dental professional’s ability to provide optimal oral health care, beginning with the age one dental visit for successful preventive care and treatment as part of an overall oral health care foundation for life. Additionally, the establishment of the Dental Home assures appropriate referral to dental specialists when care cannot directly be provided within the Dental Home.



### American Academy of Pediatric Dentistry Foundation

211 East Chicago Ave., Suite 1700  
Chicago, IL 60611

[www.aapdfoundation.org](http://www.aapdfoundation.org)

The AAPD Foundation supports education, research, service and policy development that advance the oral health of infants and children through adolescence, including those with special health care needs.

### Dental Trade Alliance Foundation

2300 Clarendon Blvd.  
Arlington, VA 22201

[www.dentaltradealliance.org](http://www.dentaltradealliance.org)

[www.dtafoundation.org](http://www.dtafoundation.org)

The DTA Foundation funds and leverages promising initiatives that will make the practice of dentistry more productive, improve access to oral health care and grow the dental marketplace.

### American Dental Association

211 East Chicago Ave.  
Chicago, IL 60611

[www.ada.org](http://www.ada.org)

The American Dental Association represents more than 153,000 members. It advocates for the public’s health and promotes the art and science of dentistry.

### How You Can Make a Difference

Tooth decay, if left untreated even in the earliest stages of life, can have serious implications for a child’s long-term health and well-being.

Early preventive care is a sound health and economic investment. Parents may not take young children to the dentist for a variety of reasons and yet an October 2004 study in the journal *Pediatrics* showed that the dental costs for children who have their first dental visit before age one are 40 percent lower in the first five years than for those who do not see a dentist before their first birthday.



*Pediatrics* also reported that early childhood caries can be prevented through early professional dental care complemented with caries-risk assessment, anticipatory guidance, and periodic supervision. In addition, without preventive care, the impact of tooth decay on child development can be significant. Childhood cavities have been linked to lower than ideal body weight and lost time in school. The effects of poor oral health may be felt for a lifetime.

How can dentists make a difference? By incorporating the age one visit/infant oral health exam into your practice, you will help prevent early childhood caries and go a long way toward assuring optimal oral health care for a lifetime.

1. Parents and other care providers should establish a dental home for every child by 12 months of age.
2. A dental home should provide:
  - a. Comprehensive oral health care, including acute care and preventive services;
  - b. Comprehensive assessment for oral diseases and conditions;
  - c. An individualized preventive dental health program based upon a caries-risk assessment and a periodontal disease risk assessment;
  - d. Anticipatory guidance about growth and development issues (i.e., teething, digit or pacifier habits);
  - e. A plan for acute dental trauma;
  - f. Information about proper care of the child's teeth and gingivae. This would include the prevention, diagnosis, and treatment of disease of the supporting and surrounding tissues and the maintenance of health, function, and esthetics of those structures and tissues;
  - g. Dietary counseling;
  - h. Referrals to dental specialists when care cannot directly be provided within the dental home.
3. The AAPD advocates interaction with early intervention programs, schools, early childhood education and child care programs, members of the medical and dental communities, and other public and private community agencies to ensure awareness of age-specific oral health issues.

1. First visit by the first birthday. A child should visit the dentist within six months of the eruption of the first tooth or by age one. Early examination and preventive care will protect your child's smile now and in the future.
2. Dental problems can begin early. A big concern is Early Childhood Caries (also known as baby bottle tooth decay or nursing caries). Children risk severe decay from using a bottle during naps or at night or when they nurse continuously from the breast.
3. The earlier the dental visit, the better the chance of preventing dental problems. Children with healthy teeth chew food easily, are better able to learn to speak clearly, and smile with confidence. Start children now on a lifetime of good dental habits.
4. Encourage children to drink from a cup as they approach their first birthday. Children should not fall asleep with a bottle. At-will nighttime breast-feeding should be avoided after the first primary teeth begin to erupt. Drinking juice from a bottle should be avoided. When juice is offered, it should be in a cup.
5. Children should be weaned from the bottle at 12-14 months of age.
6. Thumb sucking is perfectly normal for infants; most stop by age 2 and it should be discouraged after age 4. Prolonged thumb sucking can create crowded, crooked teeth or bite problems. Dentists can suggest ways to address a prolonged thumb sucking habit.
7. Never dip a pacifier into honey or anything sweet before giving it to a baby.
8. Limit frequency of snacking, which can increase a child's risk of developing cavities.
9. Parents should ensure that young children use an appropriate size toothbrush with a small brushing surface and only a pea-sized amount of fluoride toothpaste at each brushing. Young children should always be supervised while brushing and taught to spit out rather than swallow toothpaste. Unless advised to do so by a dentist or other health professional, parents should not use fluoride toothpaste for children less than two years of age.
10. Children who drink primarily bottled water may not be getting the fluoride they need.
11. From six months to age 3, children may have sore gums when teeth erupt. Many children like a clean teething ring, cool spoon, or cold wet washcloth. Some parents prefer a chilled ring; others simply rub the baby's gums with a clean finger.
12. Parents and caregivers need to take care of their own teeth so that cavity-causing bacteria are not as easily transmitted to children. Don't clean pacifiers and eating utensils with your own mouth before giving them to children. That can also transmit adults' bacteria to children.

