EDITORIAL

Prenatal oral health care?

 Γ he importance of an infant oral health program is recognized by the American Academy of Pediatric Dentistry. In the March issue of the Journal Dr. Stephen J. Goepferd described the success experienced in such a program at the University of Iowa. He reported that during the first 18 months of the program the age at which parents sought preventive care for their infants-toddlers decreased to where a majority of the current patients range from 6 to 18 months of age. Dr. Goepferd recommends that the appropriate age for infant dental care to begin is between 6 and 12 months or shortly after eruption of the first primary tooth. An important aspect of the infant oral health program is to discover, intercept, and modify parenting practices that may be potentially hazardous to infants' oral health. An assessment of the infant's fluoride intake and feeding practices, including the prolonged use of the nursing bottle, is an important aspect of the program.

Would it not be appropriate to discuss with expectant mothers the importance of nutrition during pregnancy and practices that can influence the soonto-be-born child's general and dental health? As stated by Dr. James J. McDonald, "At no time is the influence of nutrition upon future health more in evidence than during the period of early development in the mother's womb." The nutritional quality of the diet can influence the maturation process of enamel, the time of tooth eruption, the size and shape of the teeth, and the chemical and physical composition of the teeth. The pregnant mother should not embark on a weight loss diet. If a mother-to-be restricts calories and does not gain the full amount of weight recommended, she may give birth to a lowweight infant—one weighing less than 5.5 pounds. Such a baby often has a poor sucking reflex, underdeveloped swallowing mechanism, and delayed gastric emptying. This failure to thrive is a strong predictor of the infant's future health status. Such a child is often malnourished and has a greater risk of contracting various diseases as well as dying early in life. Low income women and pregnant teenagers are also at higher risk for having low birth-weight infants.

Most authorities feel it is best to avoid alcohol altogether during pregnancy. High levels of alcohol intake can lead to a number of birth defects, collectively known has fetal alcohol syndrome.

The value of prenatal fluoride supplements, although recognized to be safe in recommended amounts, continues to be investigated. In the view of the majority of researchers, the efficacy of fluoride supplements during pregnancy has not been established unequivocally.

Many parents are restricting the amount of the habit-forming drug caffeine that their young children consume. Most researchers agree that caffeine is harmful to children both from a behavior standpoint and a nutritional one. One can of caffeinated soft drink consumed by a young child is comparable to an adult's drinking 4 cups of instant coffee at one sitting. It is now recognized that even unborn children are affected by this drug. The caffeine half-life for a fetus is 16 to 18 hours.

The expectant mother is quite correct to inquire about the medications she is taking. It is a known fact that the prolonged ingestion of tetracyclines may result in discolored, pigmented, and even hypoplastic primary teeth.

The expectant mother should be encouraged to visit her dentist and have all carious lesions restored. The presence of active dental caries and high levels of *S. mutans* can lead to transmission by the mother to the newborn child and may be responsible for the development of carious lesions at a very early age.

It is not intended that the pediatric dentist should usurp the responsibility of the obstetrician in recommending dietary practices for the pregnant mother, but he can reinforce good nutritional recommendations provided by his medical colleagues. Establishing good nutritional practices early in life and then continuing them is essential for optimal health—including optimal dental health—throughout life.

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