

Your Pregnancy Checklist

- Brush AT LEAST twice a day with FLUORIDE toothpaste and a soft brush spit don't rinse after brushing
- QUIT smoking ,drink tap water, have a healthy diet; snack wisely avoid soft drinks and sugary/sticky snacks
- After vomiting rinse your mouth with water immediately but delay brushing for 30 minutes
- See your dentist early in pregnancy to get your teeth and gums checked
- Fluoride supplements are not recommended in pregnancy
- An electric toothbrush may improve plaque removal and help to keep your gums healthy

Pregnancy and Oral Health



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Creating Smiles with Care

Pregnancy is a special time. When it comes to your oral health, how you look after your teeth and gums now can affect your baby's health as well as your own.

Old wives' tales have linked pregnancy and poor dental health. For example, 'you lose a tooth for each child'. Calcium for the baby is not 'borrowed or stolen' from the mother's bones and teeth. However, recent research has shown that pregnancy does cause changes in the mouth that may put your oral health at risk.



Pregnancy hormones change the blood supply to your gums, and when plaque is present can cause pregnancy gingivitis – swollen red gums that bleed easily when brushing and may be tender.

Morning sickness and some food cravings may cause:

- increased acid attack
- increased risk of dental decay

Tooth decay

- Morning sickness (usually during the second to fourth month) frequently causes nausea and vomiting
- After vomiting:
 - ◇ rinse your mouth immediately with water or mouthrinse
 - ◇ smear a little bit of toothpaste over your teeth with your finger
 - ◇ don't brush your teeth while the enamel surface is softened by the gastric acids; wait for 30 minutes until the tooth surface recovers.
- Frequent snacks and soft drinks/carbonated drinks to alleviate nausea, and cravings for particular foods (often sweet and sticky) can increase your risk for decay
- 'Spit don't rinse' after brushing
- Drink fluoridated tap water – take care of your teeth and prevent dental decay by using fluoridated tap water for drinking and cooking
- Clean teeth with a fluoride toothpaste twice daily

It is important to maintain good oral health during pregnancy:

- To prevent the development of gum diseases
- To decrease decay-causing bacteria in your mouth – you will be less likely to pass on these bacteria to your child. Your child will be less likely to suffer early childhood decay. (Research has shown parents can transfer their particular mouth bacteria, that causes tooth decay, onto their babies.)

Dental visits and pregnancy

A dental check-up early in your pregnancy will help you to make sure that your oral health is at its best. A dental visit before you plan to become pregnant is even better, so that any decay or other problems can be treated beforehand.

Be sure to tell your dentist that you are pregnant, so that some treatments can be avoided.

Dental treatment between the third to sixth month is the best time for both you and your baby.

Meticulous care to brush every tooth, [using toothpaste with fluoride] with special attention to gently clean away plaque along the gum line is necessary

Gum disease – gingivitis and periodontitis

Pregnant women are more likely to develop gingivitis, (gums bleed while brushing) due to pregnancy hormones affecting the way that gums react to plaque. Gingivitis affects up to 70% of pregnant women

Periodontitis

Is a more severe form of gum disease and there is loss of tissues and bone that hold the teeth firm. Smokers and people with diabetes are more likely to get periodontitis. It is also affected by pregnancy hormones. Severe periodontitis may increase the risk of:

- premature (preterm) births and low birth weight
- pre-eclampsia (toxaemia)
- pregnancy diabetes (gestational diabetes)