

# facts on

## Improving the Oral Health of Pregnant Women and Young Children

### Opportunities for Oral Care and Prenatal Care Providers

#### **Oral Health during Pregnancy Affects Both Women's and Children's Health**

Oral disease during pregnancy may affect not only the health of a pregnant woman, but may also affect the health of her pregnancy and potentially, the health of her baby.

Oral health is not only important for our appearance and sense of well-being, but also for our overall health. Cavities and gum disease may contribute to many serious conditions, such as diabetes and respiratory diseases. Studies are also currently examining whether there is a link between poor oral health and heart disease. Further, untreated cavities can be painful and lead to serious infections.

There is ongoing research exploring whether pregnant women with poor oral health may be at a higher risk of delivering pre-term, low birth weight babies than women with good oral health. Women's oral health also has the potential to impact their children's downstream oral health, as mothers are the most common source of transmission of tooth decay causing bacteria to their babies after birth. Good oral health during and after pregnancy may decrease the amount of oral bacteria transmitted to the baby during common parenting behaviour, such as sharing spoons and cleaning soothers by mouth. The earlier a baby is infected with these bacteria, the more at risk the baby is for early childhood caries, which can have many health and developmental consequences for a child.

#### **Increased Risk of Oral Disease during Pregnancy**

Pregnancy places women at higher risk for oral conditions such as tooth erosion and periodontal disease due to physiologic changes in the mouth that occur during pregnancy, combined with the lack of routine exams and delays in treatment for oral disease.

Prevalence of gingivitis during pregnancy ranges from 30% to 100% (depending on the study), an estimated 5% to 20% of pregnant women have periodontitis (severe gum disease), and about 25% of women of childbearing age have at least one untreated cavity. Therefore, a sizable number of women may enter pregnancy with active oral disease, or pregnancy may trigger progression of the disease.

#### **Most Women Do Not Receive Dental Care during Pregnancy**

Most women are unaware of the potential consequences of their poor oral health for themselves or their babies. Although dental care during pregnancy is both safe and can prevent long-term health problems for both mother and child, a significant number of women do not seek - and are not advised to seek - dental care during pregnancy.

Only about one-quarter to one-half of women receive any dental care during their pregnancies. The likelihood of low-income, uninsured, and cultural minority women receiving such care is even lower.

#### **For More Information**

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#### **The Saskatchewan Prevention Institute is supported by:**

Government of Saskatchewan  
Kinsmen Telemiracle Foundation  
Saskatchewan Abilities Council  
University of Saskatchewan  
Community-At-Large

## Barriers to Oral Health Care

Primary reasons for women not seeking dental care are lack of perceived need for care and financial barriers.

Factors related to the health care system also present barriers. Some prenatal and oral care providers may lack understanding of the impact and safety of oral care during pregnancy. Some oral care providers may be needlessly reluctant to see pregnant patients due to concerns regarding the safety of the woman and/or fetus. In addition, because prenatal care providers generally have received limited training to understand the relationship between oral health and overall health, they may not provide anticipatory guidance on oral health or refer their patients regularly to dental providers. A lack of coordination between the oral care and prenatal care communities is another barrier.

## Dental Care during Pregnancy is Safe

Oral health care in pregnancy is often avoided and misunderstood by oral care and prenatal care providers because of lack of information or misconceptions about the safety of dental treatment during pregnancy. However, research shows that the prevention, diagnosis, and treatment of oral diseases, including needed dental X-rays and use of local anesthesia (when necessary for the care of the patient), are acceptable and can be safely undertaken. Any risk is minimal when compared to the risk of not receiving appropriate care.

## Oral Health: Part of Routine Prenatal Care in Saskatchewan

Key to integrating oral health into routine prenatal care in Saskatchewan is increasing understanding, skills, and motivation in oral care providers, prenatal care providers, and women themselves.

Oral care and prenatal care providers are encouraged to take the following actions to promote oral health among pregnant women:

- Encourage women to learn more about oral health during pregnancy and early childhood.
- Provide health education or anticipatory guidance about oral health practices for her children to prevent early childhood caries.

Recommend strategies to decrease maternal cariogenic bacterial load (i.e., tooth brushing, flossing, treating caries, mouth rinses, fluoridated water, healthy diet, regular dental visits).

- Discuss the importance of nutrition for good oral health.
- *Prenatal Care Providers:* Conduct and document an oral health assessment of the teeth, gums, tongue, palate, and mucosa. Refer women to a dental office as needed.
- *Oral Care Providers:* Perform a comprehensive examination and develop a treatment plan that includes preventive, treatment, and maintenance care throughout pregnancy. Discuss the benefits, risks, and alternatives to treatments. Provide emergency/acute care at any time during pregnancy as needed by oral condition.
- Support the development of provincial guidelines on oral care during pregnancy.
- Engage in training and continuing education opportunities on oral health during pregnancy.
- Engage in interprofessional learning and practice opportunities involving oral care and prenatal care providers.
- Develop collaborative relationships between oral care and prenatal care providers, including case management and a dental referral network.
- Given the important role of healthy eating for oral health, develop collaborative relationships with dietitians to address nutrition and access to resources on healthy eating.

## Pregnancy: A Key Time for Oral Health Promotion

Pregnant women are increasingly being viewed as an important group for enhanced, targeted oral health promotion. During pregnancy, women are often more receptive to changing health behaviours that may negatively affect their babies. Providing every pregnant woman with oral health education and intervention should be part of standard prenatal care.

Given that prenatal care providers are more likely to see pregnant women than oral care providers, physicians, nurses, and other allied care providers are key partners to advocate for and support oral health during pregnancy.

## References

Further detail and full references are available in *Improving the Oral Health of Pregnant Women and Young Children: Opportunities for Oral Care and Prenatal Care Providers. A Saskatchewan Consensus Document (2014)* available at [www.skprevention.ca/oral-health](http://www.skprevention.ca/oral-health).