

YOUR ORAL HEALTH

WINTER 2013

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Is your teen
smoking?

How your dentist can help

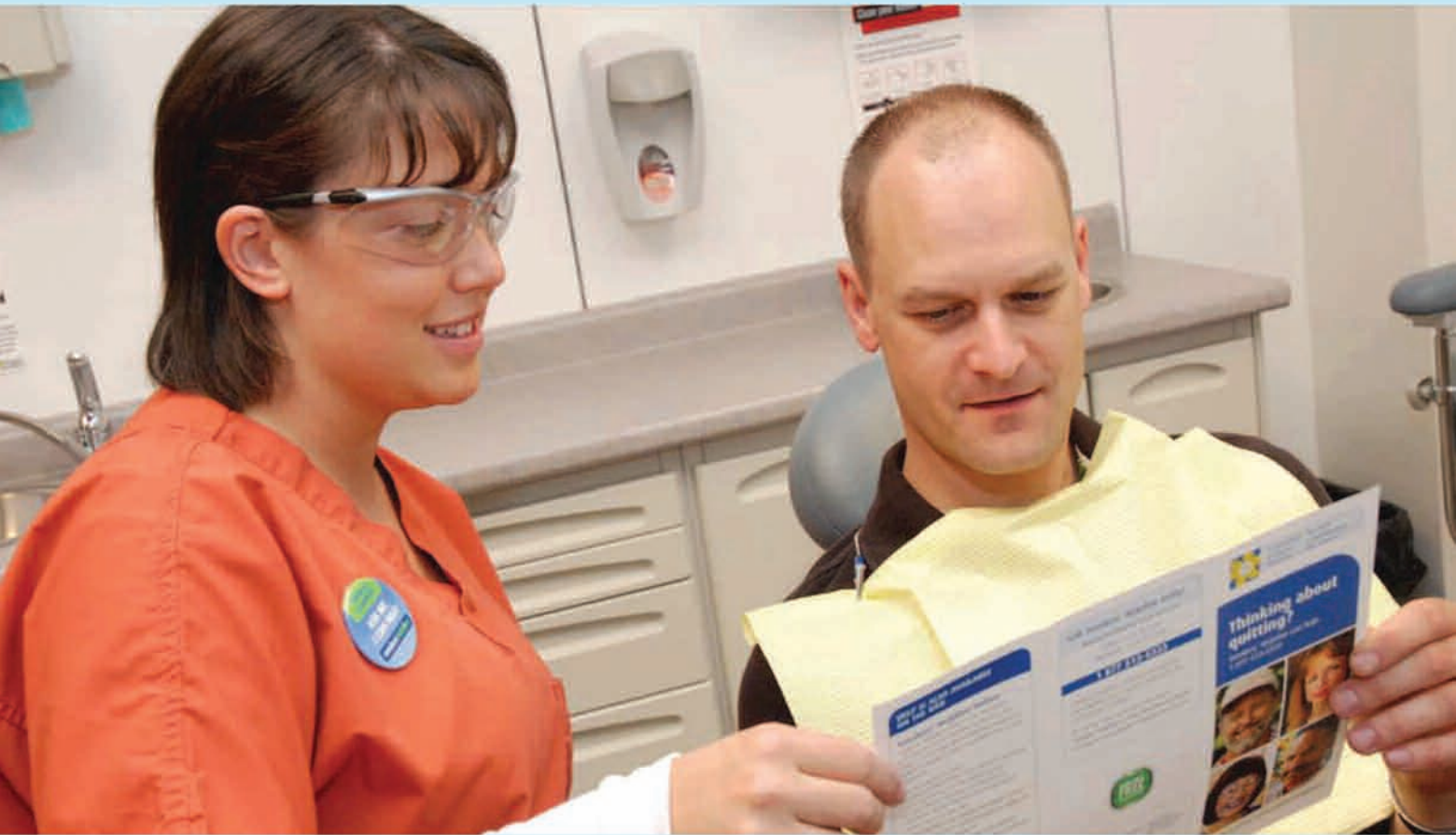
FRUIT JUICES

Sugar + Acid
What you need to know

MOUTHGUARDS

A must – for kids – and adults

The majority of people who use tobacco want to quit.



Thinking about quitting?

Ask your dentist, or call
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Welcome from Dr. Deborah Saunders, Editor-in-Chief



With summer now a distant memory, and the colder weather upon us, we are looking for ways to make our daily routines work for our families — and ourselves. That may include packing heartier (and healthier) lunches for the kids, signing up for much-needed exercise classes or finding time for winter events. We know that every day is jam-packed for you. Welcome to our second issue of *Your Oral Health* in which we answer your oral health-care questions — while you are in your dentist's office — and try to make your daily tasks easier to tackle.

I am a Medical Director, Department of Dental Oncology, in a Sudbury hospital, and I am also a very busy and active mom. I talk to patients every day, and we always end up discussing more than just flossing and brushing (although those are important topics too!) They know that I have three kids — and my questions are often the same as theirs when it comes to the oral health of my family.

In this issue, we have included more answers to your questions on pregnancy and oral health, fruit juices and their risks and the latest on mouthguard use, as well as helpful advice on teenagers and smoking. This year, our ODA Oral Health Strategy is focusing on tobacco cessation. Did you know that your dentist can help you — or a member of your family — quit smoking? An alarming statistic is that most smokers start in their teens, and every day, between 82,000 and 99,000 young people around the world start smoking¹. For more information, read “Helping Your Teen Butt Out” on page 8.

All of our content is reviewed and vetted by our member dentists. Our Consulting Editor is Dr. Ian McConnachie, a Past President of the ODA, and a pediatric dentist with a practice in Ottawa. Our Advisory Board consists of ODA President Dr. Arthur Worth; President-Elect Dr. Rick Caldwell; Vice-President Dr. Gerald Smith and Past President Dr. Harry Höediono, all dentists with busy practices, who are concerned that every patient receives the best oral health care and information possible.

We hope that you enjoy *Your Oral Health* — and, as always, if you want to tell us what you like (or dislike) about YOH, email us at jkuipers@oda.ca.



1 Canadian Lung Association

Our Contributors



Julia Aitken (“Putting the Squeeze on Fruit Juice”) has written three cookbooks and writes regularly for *Food and Drink* and *Diabetes Dialogue*. She is Food Editor of *My Advantage* and *Expressions* magazines. Julia started writing professionally at the age of eight when she fashioned a “magazine” in crayon, and sold copies to her neighbours in northwest England. Her mother made her give the money back.



Heather Buchan (“Mouthguards”) is a freelance journalist who has worked at *Homemakers*, *House & Home*, *Metro* and *Hello!* Her son Nathan has just turned two and is too young to play sports but once he does, he will definitely be wearing a mouthguard. Heather, husband Mike and Nathan live in Toronto.



Bonnie Dean (“How to Pack a Healthy School Lunch”) is the ODA's Communication Specialist. Bonnie lives in downtown Toronto. She tries to pack — and eat — a healthy lunch every day and succeeds most of the time.



Cheryl Embrett (“Helping Your Teen Butt Out”) has written and edited for many national magazines, including *Canadian Living*, *Today's Parent*, *Homemaker's* and *Best Health*. Toronto-based Cheryl is glad that so many kids today, including her 12-year-old daughter, Scotia, are being taught the dangers of smoking from an early age.



Jennifer D. Foster (“Expecting a Baby”) has written for *Homemakers*, *Canadian Living*, *Today's Parent* and *Canadian Health*. When Jen was pregnant with her son, Darius, who is now 10, she craved BLT sandwiches and chocolate milk. She is still a big fan — and so is Darius. They live in Toronto and both brush and floss daily.

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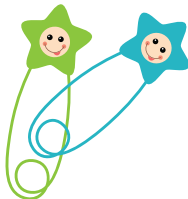
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The ODA is the voluntary professional organization which represents the dentists of Ontario, supports its members, is dedicated to the provision of exemplary oral health care and promotes the attainment of optimal health for the people of Ontario.

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Did you know?

We have more information
about many oral health topics
on youroralhealth.ca



— the ODA's
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it's all ODA-
approved!

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Expecting a baby?



What you need to know
about your oral health care.

PART TWO

By Jennifer D. Foster

In Part One, (YOH Spring 2012) we explored some of the questions that pregnant women may ask their dentists. In Part Two, we answer more of these questions, including ones that you may never have thought of asking!



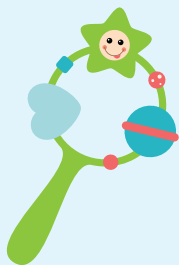
Experiencing morning sickness?

Q: I am experiencing morning sickness and acid reflux — and am scared to eat what I normally would. Do I have to live on crackers?

Not only are nausea and acid reflux annoying (to put it mildly), they also pose a significant risk to the mother's mouth. Dr. Isabel Teijeiro advises her pregnant patients to eat bland foods and drink plenty of liquids — water is always a good choice. The following tips from the New York State's Department of Health¹, which Dr. Ian McConnachie provides for his patients in his Ottawa-based pediatric practice, may also help:

To reduce tooth decay in pregnant women experiencing frequent nausea and vomiting, try this:

- Eat small amounts of nutritious foods throughout the day.
- Use a teaspoon of baking soda (sodium bicarbonate) in a cup of water as a rinse after vomiting to neutralize stomach acid.
- Chew sugarless or xylitol-containing gum after eating.
- Use gentle toothbrushing and fluoride toothpaste to prevent damage to demineralized tooth surfaces.



¹ Oral Health Care During Pregnancy and Early Childhood Practice Guidelines, New York State Department of Health, August 2006

Q: How does my oral health affect my baby's?

A pregnancy is a time of great joy and expectation for new parents. It is also a time of significant changes to a woman's body. Equally, some of these changes may affect the health of the pregnant patient's mouth. Evidence suggests a strong need to protect against gingivitis and gum disease, as well as decay problems. These problems can also affect the health of the baby, including having preterm and low birth-weight babies. Sudbury-based Dr. Isabel Teijeiro, who, along with husband Russell, welcomed baby Andrew in August, says: "The oral health of the mom definitely affects baby. I actually just had my family physician ask me this question at one of my prenatal appointments (before I had Andrew), since some of his prenatal patients had come in with dental neglect and he wanted to provide them with some good advice."

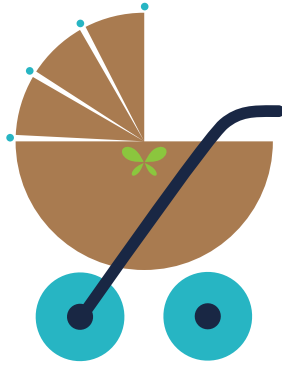


Q: When is the best time for dental work during my pregnancy?

Says Dr. Teijeiro: "The safest time for dental treatment is in the second trimester, and after that we prefer to postpone any elective work for after the baby is born. Our team also always reinforces extra care with oral hygiene during pregnancy and discusses symptoms such as pregnancy gingivitis due to increased hormone levels."

Q: I've heard preventative dental work is essential to avoid oral health infections, such as gum disease, which has been linked to preterm births. Is this true?

Absolutely, says Dr. Teijeiro. "In recent years, maternal periodontal disease/poor oral hygiene has been implicated as a risk factor for adverse pregnancy outcomes, such as preterm (premature) births and low birth weight, as well as even miscarriage and stillbirth."

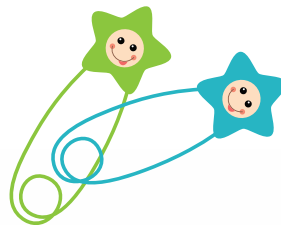


Q: I have a major gag reflex and it has worsened while pregnant. What can be done about this while I'm at the dentist?

Explains Dr. Lynn Tomkins, a Toronto-based dentist and an ODA Past President: "The gag reflex is something a few of my patients experience, and we just work around it, such as not having the chair back too far, avoiding trigger spots like the back of the tongue or the posterior roof of the mouth, not leaving the saliva ejector in the mouth, and for home we usually recommend that patients use a minimal amount of toothpaste, not brushing right after they eat."

Q: What about my oral health and my baby's, post-delivery?

"It's important for the new mom to have a routine dental visit, and for baby to be introduced to the dental office setting. Good oral health habits start at birth with good nutrition, mouth cleaning (even before the teeth start to erupt) and regular visits to the dentist," stresses Dr. Tomkins. Also, comments Ottawa-based pediatric dentist Dr. McConnachie, as the decay-causing bacteria is transmitted to most infants from their mother early in infancy, it is important to discuss with her dentist different strategies to delay or prevent this. Changes made can dramatically alter the decay risk to the child. ■



Visit youroralhealth.ca
for more information
about your baby's oral health.





Helping Your Teen Butt Out

– with your dentist’s help

By Cheryl Embrett

Kids are attracted to smoking for any number of reasons — to feel grown-up, combat stress, look cool and, most importantly, fit in with their peers. According to the Canadian Lung Association, while the risks of tobacco use are well-known, almost 20 percent of Canadian teens age 12 to 19 still light up — either daily or occasionally. And while the Canadian Lung Association states that smoking rates for youth have slowly declined

since the 1990s, Dr. Deborah Saunders, Medical Director of a dental oncology program at the Health Sciences North, North East Cancer Centre in Sudbury, says teen smoking is still prevalent. And, most people who become smokers, according to the Lung Association, start in their teens. “Evidence from a 2008 report shows that tobacco dependence is now widely accepted as a pediatric disease that carries over into adulthood” says Dr. Saunders.¹

“That’s why prevention is the best cure,” says Dr. Arthur Worth, President of the Ontario Dental Association. But cigarette advertising and peer pressure can be very convincing. “It’s important to have a frank discussion about the issues with your teen,” says Dr. Worth. And a trusted health-care professional like your dentist or physician can help.

"I need to lose weight."

"My friends
smoke."

to look cool."

According to the Canadian Lung Association, almost 20 percent of Canadian teens age 12 to 19 light up – either daily or occasionally.

"We're obviously at the forefront for identifying and discussing the risks and hazards of lip and tongue piercings," adds Dr. Saunders. "We can extend this knowledge and our recommendations to the effects of smoking in the teen population too."

The good news is that youth smokers make more attempts to quit smoking than adult smokers, according to the Canadian Lung Association. Whether your teen is trying to kick

the habit or you want to prevent him from taking that first puff, these strategies from health-care experts can help.

Avoid scare tactics

"These tend not to work with teens," says Dr. Saunders, "and may even have the opposite effect. Focusing on your teens' appearance tends to be more effective than telling them

they'll die of heart disease or cancer." Talk to your kids about the immediate downsides to smoking: shortness of breath (especially relevant for young athletes) bad breath, yellow teeth, smelly clothes.



Do the math

While teens may not relate to the toll smoking takes on their health, they may relate to the toll it takes on their finances. “If you smoke a pack of cigarettes at \$10 a day, that’s \$70 a week, \$300 a month, \$3,600 a year,” says Dr. Worth. “That’s a very significant amount of money.”

Discuss ways to respond to peer pressure

Never negate the importance of peer pressure, advises Dr. Marilyn Herie, Director of the Teaching Enhancement in Applied Cessation Counselling project (TEACH) at Toronto’s Centre for Addiction and Mental Health (CAMH). “When kids are younger, they look up to their parents, but when they’re older, they look up to their peer group. Their developmental task is to rebel against authority.” While some kids may feel confident simply saying “no” to lighting up with friends, others may need to rehearse alternative responses such as, “I hate the way cigarettes make my clothes smell.”

Be aware of tobacco and media influences

“I don’t think that youth really appreciate that the cigarette is the most sophisticated drug delivery system ever invented,” says Dr. Herie. “It’s designed to induce addiction, right from that first puff.” Moreover, there’s evidence that tobacco companies have used product placement in movies often seen by a teen audience, and this role modelling can impact smoking initiation.³ The more that teens see actors smoking on TV shows and in movies, the more likely they’ll try it themselves, says Dr. Herie. Nearly all of the cartoon characters seen on the popular TV show *The Simpsons*, (including the children) have been seen smoking.

Stay involved

Know who your children’s friends are, where they’re going and what they’re doing. Look for opportunities to have the “smoking talk,” asking questions like, “Why do you think so many kids smoke, knowing it’s so dangerous?” Or “What do you find appealing (or unappealing) about smoking?” Try to avoid lecturing or nagging. Nothing turns teens off faster.

Get a plan in place

Arrange a meeting with your teen’s dentist or physician who can offer support and a treatment plan such as nicotine replacement (gum, patches, inhalers or nasal sprays). “One of the methodologies I’ve used is simply encouraging patients to slowly reduce their cigarette intake without setting a cut-off date,” says Dr. Worth. “I find if you set a deadline for quitting and the patient doesn’t meet it, they feel like they’ve failed. And it’s not a failure because anything they do to reduce their consumption is certainly a step in the right direction.”

Most importantly, take a positive approach to helping your teen quit smoking, advise the experts. Offer information and resources (CAMH has a great online storybook to open the conversation with younger children in grades one to five called *Smoking and Quitting: Clean Air for All*²) — and always look for every opportunity to offer praise and reinforcement. ■

1. Fiore, M.C., Jaen, C.R., Baker, T.B., et al. *Clinical practice guideline: Treating tobacco use and dependence: 2008 update*. Rockville, MD: Department of Health and Human Services.
2. http://knowledgex.camh.net/educators/elementary/Documents/smoking_cleanair.pdf
3. Pardun, Brittain, McKee and Karrh 2003, in Isabelle Golmier, Jean-Charles Chebat, and Claire Gélinas-Chebat. *CAN CIGARETTE WARNINGS COUNTER BALANCE EFFECTS OF SMOKING SCENES IN MOVIES?* Psychological Reports: Volume 100 (2007)



Do the math

\$10 for 1 pack of cigarettes per day

X 30 days per month

= \$300 per month

OR \$3,600 per year!



Putting the **Squeeze** on Fruit Juice



It may not be the best choice for your kids.

By Julia Aitken

Feeling thirsty, but want a healthier choice than pop? You reach for fruit juice, right? Truth is, while fruit juices provide healthy vitamin C, their sugar and acid content strikes a double whammy to your dental health, says Dr. Arthur Worth, a general practitioner in Thamesville, Ont., and President of the ODA.

“Fruit juice bathes the teeth in acid which softens their structure, then the sugar feeds the bacteria in your mouth which, in turn, produce even more acid,” explains Dr. Worth.

If you must drink fruit juice, says Dr. Worth, it’s best enjoyed as part of a meal because food buffers some of the acids in the juice and those acids will work on the food rather than your teeth.





Drinking juice quickly rather than sipping it is better, too, so you reduce your teeth's exposure, explains Dr. Jody Zajacz, a family dentist with a busy practice in Etobicoke, Ont. For the same reason, when giving juice to a child, always provide a straw and avoid putting fruit juice in a young child's sippy cup.

Says Dr. Zajacz: "A bottle or sippy cup encourages children to sip rather than drink which means smaller amounts over longer periods of time. This increases the time that the acid and sugar is on the young child's teeth which in turn increases the likelihood of cavities in the baby teeth. If they are going to have fruit juice it is better to decrease the contact time on the teeth."

Vegetable juices may be a better choice as they contain less sugar, but avoid acidic vegetable juices, such as tomato and V8, and check the label as some vegetable juices can be high in sodium.

Alas, juice is no substitute for fresh fruits and vegetables, explains consulting dietician Cathy Pearson, who is based in Richmond Hill: "Fresh fruits and vegetables are always a better option. Juice doesn't contain fibre and is a significant source of calories."

Dr. Worth agrees and adds that the action of chewing fresh fruits and vegetables produces saliva which helps protect the teeth from the natural sugars and acids they contain.

For fussy eaters, Pearson suggests sneaking fresh fruits and veggies into meals by adding fresh berries to a bowl of cereal, blending fruit and yogurt into a smoothie, stirring finely chopped vegetables into a pasta sauce, or puréeing vegetables to make soup.

The best tooth-friendly thirst-quencher for all ages? Good old water, of course. Bottled and tap, they're both good, says Dr. Worth, but head for the tap if your municipality fluoridates the water as it can protect your teeth from potential decay. ■



Sugar + Acid = Double Trouble

	Acid* Low = Bad	Sugar** Per 12 oz serving
Pure Water	7.0 (neutral)	0 tsp
Barq's Root Beer	4.0	11 tsp
Minute Maid (R) Orange Juice	3.8	9 tsp
Propel (R) Fitness Water	3.4	1 tsp
Red Bull (R)	3.3	10 tsp
Sprite (R)	3.3	10 tsp
Mountain Dew (R)	3.3	12 tsp
Diet Coke (R)	3.1	0 tsp
Sierra Mist	3.1	10 tsp
Full Throttle Energy Drink	3.0	11 tsp
Diet Pepsi (R)	3.0	0 tsp
Gatorade (R)	2.9	5 tsp
Sunkist (R) Orange Soda	2.9	13 tsp
Dr. Pepper (R)	2.9	10 tsp
Vault Energy Soda	2.9	12 tsp
Amp—Mountain Dew (R)	2.8	11 tsp
SoBe (R) Energy Citrus	2.6	12 tsp
Minute Maid (R) Lemonade	2.6	10 tsp
Pepsi (R)	2.5	11 tsp
Diet Schweppes Tonic Water	2.5	0 tsp
Coca-Cola (R) Classic	2.4	10 tsp
Battery Acid	1.0	0 tsp

** 4.0 grams = 1 teaspoon sugar

* Laboratory tests, Dr. John Ruby, University of Alabama, Birmingham School of Dentistry, 2007.

Minnesota Dental Association, Sip All Day, Get Decay, © 2002.



Fruit Juice Primer

If you want to give your child fruit juice, here are Drs. Worth's and Zajacz's tips on how to lessen the potential damage to her teeth:

- Give your child a straw so the juice doesn't come in direct contact with her teeth.
- Make sure the juice is consumed as part of a meal because food buffers the teeth against some of the acids in the juice.
- Wait for about one hour before brushing your child's teeth after she's had juice because saliva is very protective and it will actually help to reconstitute the tooth structure.

Drink Up!

Cathy Pearson recommends shelving fruit juice in favour of these tooth-friendly thirst-quenchers:

- Water
- Milk
- Drinkable yogurt
- Unsweetened soy beverage
- Low-sodium vegetable juice

Visit youroralhealth.ca

for more information
about tooth-friendly snacks



Safety First

Unlike most commercially produced juices, homemade juices aren't pasteurized to kill bacteria.

On its website, Health Canada says that, while most healthy adults can safely consumer unpasteurized juice, it's not recommended for children, pregnant women, older adults and people with a weakened immune system. If you do make your own juice, the Canadian Partnership for Consumer Food Safety Education has the following safety tips:

- Wash fruits and vegetables under cool, running water before juicing them, even if you're discarding the peel.
- Use a brush on fruit with creviced skin, like melons.
- Ensure your juicer, knives and work surface are spotlessly clean.
- Refrigerate fresh juice promptly and consume it within 24 hours.

Mouthguards

*Why they are
a must for
kids in sports*



By Heather Buchan

You wouldn't dream of letting your child play hockey without a helmet, so why would you send him (or her) onto the ice without a mouthguard? After all, a properly fitted mouthguard can prevent far more than just chipped or broken teeth. "Mouthguards also protect the soft tissues around the mouth and, in more serious injuries, can reduce the risk of jaw fracture by absorbing much of a blow to the jaw," explains Dr. Ian McConnachie, an Ottawa-based pediatric dentist. "It is further believed that there can be reduction of risk of concussion or severity of concussion."

Dr. McConnachie points to the wide-ranging extent of oral injuries sustained in contact sports such as

hockey and football from lost teeth, to fractured jaws, to tooth fragments embedded in lips, to bone loss. "The long-term considerations [of not wearing a mouthguard], including costs and future additional treatment, can be significant and involve thousands of dollars," he says.

According to Dr. Arthur Worth, President of the ODA and a Thamesville, Ont.-based dentist, athletes are much more likely to suffer an oral injury when not wearing a mouthguard. "Even hockey players who currently wear both helmets and face masks should wear a mouthguard to protect against head and neck injuries by absorbing trauma or blows that could otherwise cause jaw fractures or concussions," says Dr. Worth.

Caring for mouthguards

- Like anything else that goes into the mouth, a mouthguard will attract bacteria and should be cleaned and disinfected regularly. Rinse a mouthguard under cold water after every use and air dry.
- Occasionally clean it with an antiseptic mouthwash. You can also clean it with a toothbrush and toothpaste or cleaning tablets.
- Store a mouthguard in a firm, perforated plastic container and away from extreme heat, as heat can distort it.
- Check a mouthguard regularly for tears or holes (these can irritate the mouth and weaken the mouthguard). If you notice any, replace it immediately.

Choosing a mouthguard

There are three main types of athletic mouthguards, and they vary in cost, comfort and effectiveness. Ideally, you want a mouthguard that's resilient, durable and comfortable — (one that fits properly, is easy to clean and doesn't impede breathing or speech).



"A well-made and properly cared-for mouthguard can last several years, if the bite of the athlete is fully developed," says Dr. McConnachie. "For an athlete with a changing bite, a mouthguard can last up to a year, but will need to be changed and/or adjusted more frequently." Some dental offices offer reduced fees on custom-made mouthguards or participate in mouthguard clinics that provide reduced fees for sports teams.

HERE'S WHAT TO CONSIDER BEFORE YOU BUY:

CUSTOM-MADE	BOIL-AND-BITE	READY-MADE
<p>DESCRIPTION: A dentist makes an impression of the patient's mouth and then creates an exact-fitting mouthguard from a cast model of the teeth impression using vacuum-formed thermoplastic material.</p> <p>ADVANTAGES: Although they are the most expensive type, custom-made mouthguards provide the best fit, protection and comfort, and are the most durable. Dr. McConnachie also recommends them for children with braces, as these mouthguards will give the best fit and are adjustable.</p> <p>It is vital to ensure that the mouthguard is properly fitted. "Each patient's specific needs must be addressed for maximum comfort and protection," says Dr. Worth. "A dentist will consider a number of factors including the size of his or her mouth and the type of sport played."</p> <p>COST: Approximately \$85 to \$115, plus lab costs (between \$50 and \$75).</p>	<p>DESCRIPTION: This mouthguard, generally made of thermoplastic material, must be warmed in very hot water to soften it, so the user can bite into it to create an impression. When moulded within the mouth (or "bitten"), the plastic takes on the shape of the wearer's mouth; however, the fit is not as precise as that of custom-made mouthguards — and it may be somewhat bulkier. Boil-and-bites come in three sizes: small, medium and large, and are also sized by age.</p> <p>ADVANTAGES: This type of mouthguard can work very well, says Dr. McConnachie, especially when the athlete is in the process of losing teeth (naturally) or having new teeth erupt.</p> <p>COST: Approximately \$10 to \$40.</p>	<p>DESCRIPTION: Made of rubber or polyvinyl, these mouthguards are held in place by clenching teeth together. As a result, they offer the least amount of comfort, protection and durability, and are often bulky and loose.</p> <p>ADVANTAGES: These are the cheapest type of mouthguard and can be bought at most sports stores and worn immediately.</p> <p>COST: Approximately \$5 to \$30.</p>



Mouthguards aren't just for children.

One of the most common causes of dental injury in adults, aged 18 to 50, is sports. Mouthguards are necessary in any sport where there might be a strong chance of contact with other participants or hard surfaces. Players who participate in sports such as football, hockey, basketball, ski racing, baseball, soccer, wrestling, lacrosse, rugby, gymnastics and martial arts should wear mouthguards when practising or competing. Mouthguards are also a good idea for recreational activities such as skateboarding, in-line skating and cycling.



Did you know?

Between 10 and 39 percent of children's dental injuries result from sports accidents.

Mouthguards are proven to reduce the incidence of these injuries.¹

1. American Association of Pediatric Dentistry





How to pack a Healthy School Lunch

– and get your kids to eat it!

By Bonnie Dean



There's the old adage, "You can lead a horse to water, but you can't make it drink." By the same token, you can send your children to school with a healthy and nutritious lunch, but can you make them eat it?

Lunches and snacks provide the energy and nutrients to help kids get through the school day, as well as aid in their growth and development. Teeth and gums need a wide range of essential vitamins and minerals for growth, development and good health, just like your child's body.

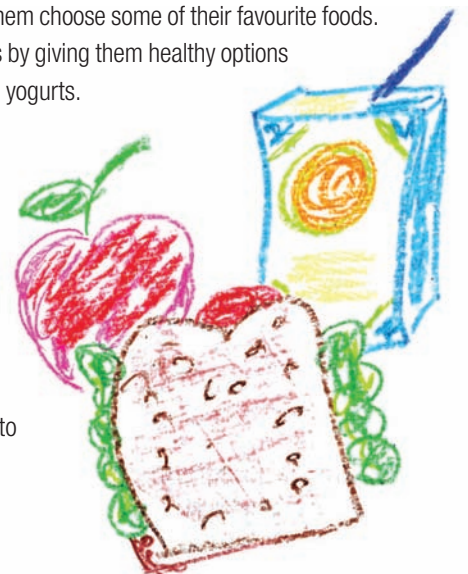
If you get your children involved with preparing their own lunches, they may be more likely to eat them.

Get them involved.

Take your children grocery shopping and let them choose some of their favourite foods. Guide your children into making good choices by giving them healthy options to pick from — breads, vegetables, fruit and yogurts.

A child's taste may change from one day to the next. Try new foods regularly and keep them interested with lunches that include a variety of shapes and colours.

Get your kids to pack their own lunches — older children can help make sandwiches, while younger children can place snacks into containers.





Here are a few ideas of what to pack in your child's lunchbox.

Fruits and vegetables

Citrus fruits and kiwi fruit are good sources of vitamin C — important for healthy gums. Celery, carrots and dried apricots contain beta carotene, which helps your body create vitamin A — a nutrient essential for building strong teeth.

Lunch/snack ideas:

- Cut up peppers, celery or carrots into sticks for dipping into yogurt or hummus, or enjoy them on their own
- Grape tomatoes and sliced cucumbers drizzled with low-fat salad dressing
- Non-salted tortilla chips with salsa and guacamole
- A tropical fruit cup, with mangos, kiwi and oranges
- A fruit smoothie, prepared with low-fat plain yogurt and honey, can pack a good nutritional punch without additional fat or sugars

Dairy

Cheese, yogurt and milk all contain calcium, which helps strengthen tooth enamel. Cheese also stimulates saliva production which helps clear away food particles from your teeth.

Lunch/snack ideas:

- Low-fat yogurt (with no added sugar) on its own or for dipping veggies
- Cheese slices on whole-wheat crackers
- A milk-based pudding
- Cheese-filled pasta with tomato sauce



Protein

Protein-rich foods like meat, poultry and fish are good sources of phosphorous, which is needed for tooth development and is instrumental in helping your body balance and absorb calcium and magnesium. Beans, grains and nuts are also rich in protein, magnesium, calcium and phosphorous.

Lunch/snack ideas:

- Tuna on whole-wheat bread or pita with lettuce and cucumber slices
- Small whole-wheat or corn tortillas with baked or refried beans, salsa and shredded cheese
- Whole-wheat pita slices and veggie sticks with hummus
- Slices of turkey or ham with mustard, lettuce and tomatoes in a wrap
- Chicken salad flavoured with curry, onions, light mayo, pickles, apples or dill
- Nut-free trail mix



Drinks

Soda, sports drinks and sweetened fruit juices often contribute to tooth decay because of high sugar and acid content. Opt for water, milk or 100-percent pure fruit juices instead.



It can be difficult to get your child to eat more healthy fare. All it takes is a little patience, knowledge and creativity to establish good eating habits, which can lead your children on the right path to good oral and overall health. ■

Source: EatRight Ontario
(www.eatrightontario.ca)

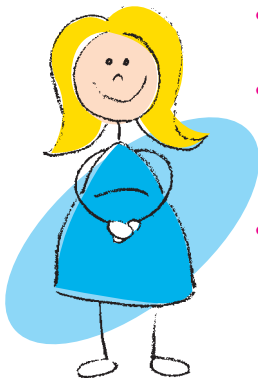


Your Children's Teeth



A healthy mouth is important to your child's overall health. Here are several things as a parent you can do to help.

1 A healthy pregnancy helps the development of healthy teeth.



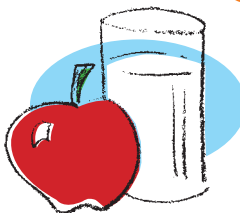
- Teeth start developing in the first three months of pregnancy.
- A mother should eat nutritiously and avoid tobacco, alcohol and non-prescription drugs to ensure a healthy pregnancy.
- Visit your doctor and dentist regularly.

2 Baby teeth are very important.



- The baby teeth start to erupt when a child is about six months old.
- Baby teeth help your child eat and speak, and are important for overall health.
- Baby teeth are also called the primary teeth and help adult teeth come in straight.
- The eight front primary teeth start to fall out after age five, and the rest fall out by age 12.

3 Healthy food makes healthy teeth.



- A well-balanced diet is important for the development of healthy teeth.
- Cheese, yogurt and milk contain calcium that make teeth hard and can help prevent cavities.
- Between meals, choose unsweetened unflavoured milk or water instead of juice or pop.
- Fresh or unsweetened canned fruits and vegetables are excellent snacks.
- Whole grain crackers, bread, nuts and seeds are also good snacks.



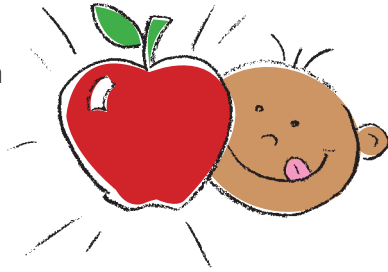
4 Feeding your baby.

- If your baby sleeps with a bottle, fill it with water.

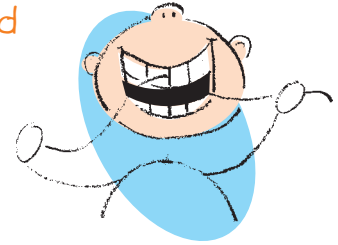
- Clean the baby's mouth and teeth following all feedings.
- Avoid letting your baby sleep at the breast or with a bottle of juice, formula or milk as this can harm your baby's teeth.
- If your baby normally falls asleep while feeding, brush his or her teeth before feeding.

5 Reduce your child's sugar intake.

- Germs in the mouth called bacteria feed on sugar from foods to make an acid that harms teeth.
- Fruit is the best dessert.
- Limit fizzy drinks and natural fruit juices as they may contain sugar and acids that cause tooth decay.
- Avoid feeding your child snacks containing sugar or sweeteners such as honey.
- Save sweets for mealtimes, when they are less likely to harm your child's teeth.



6 Brush and floss your child's teeth.



- Before the baby has any teeth, the gums should be wiped with a clean soft wet cloth after every feeding.
- Brushing should begin soon after the first teeth come into the mouth, so your child will get used to it.
- Brushing should follow meal and snacks and sweetened medications.
- Use only a small pea-sized amount of toothpaste and be sure it is never swallowed. If your child routinely swallows it, do not use toothpaste.
- Once the sides of the baby teeth touch each other, flossing should take place at least once a day.

7 Lift the lip and look.

- Watch for changes in colour, lines or spots on your child's teeth as these may be signs of a potential problem.
- If your child knocks out a tooth, call your dentist immediately! Gently rinse the tooth — do not brush or scrub. Wrap the tooth in a clean cloth or gauze and put it in a cup of milk and get it to the dentist immediately.

8 Visit the dentist.

- A child should visit a dental office by the age of one year, or when the first teeth appear.
- Bring your child to the dentist for regular checkups to make sure there are no problems.
- Visits should continue from age two and a half when all the primary teeth are in the mouth.



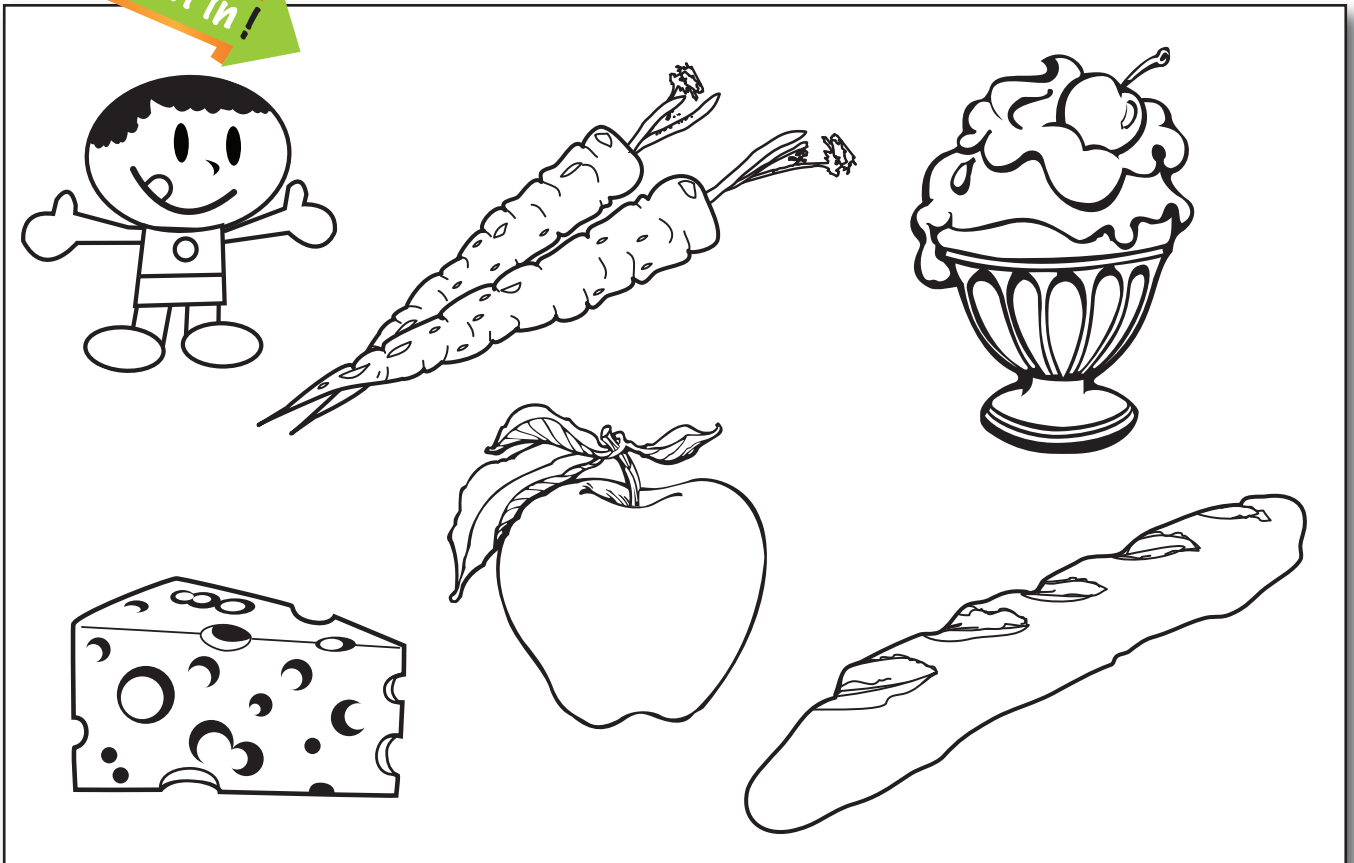
- Baby teeth are very important.
- Healthy food makes healthy teeth.
- If your baby sleeps with a bottle, fill it only with water.
- Reduce your child's sugar intake.
- Brush and floss your child's teeth.
- Check your child's mouth.
- Visit the dentist!
- **Tooth emergency? Call your dentist!**



Tooth-healthy Snacks!

Which snack below isn't the best choice for a tooth-healthy snack?

colour it in!





Tooth Fun Fact

Beavers' front teeth never stop growing!

That's why they chew on wood – to keep them from growing too long!

ANSWERS: tooth; floss; brush; cavity; dentist

Unscramble the letters to find the word!

htoto _____

sfols _____

rbsuh _____

vacyti _____

stindet _____

Did you know?

The hardest thing in your body is the enamel on your teeth.



joke corner

Pam: "Why does a vampire clean his teeth three times a day?"

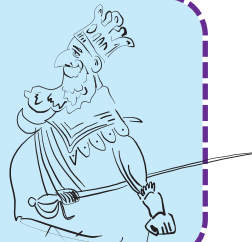
Dan: "I don't know. Why?"

Pam: "To prevent bat breath!"



Q: Why did the king go to the dentist?

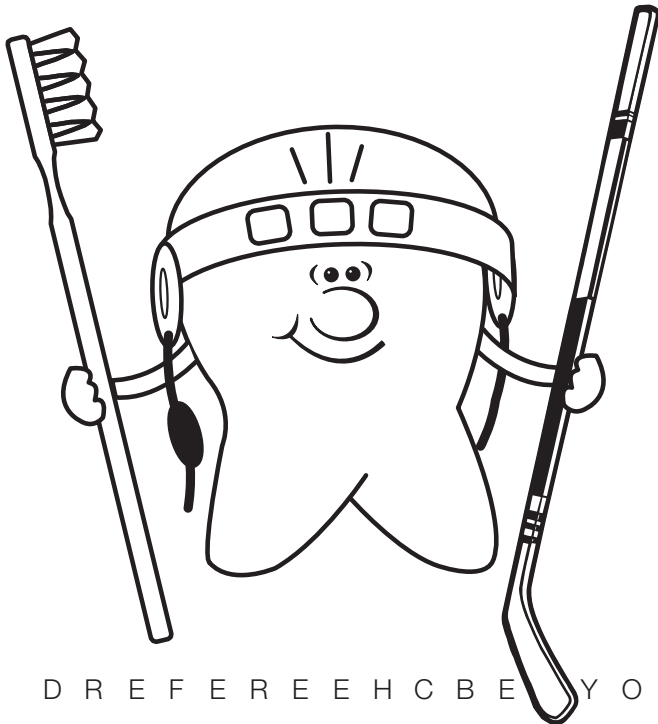
A: To get his teeth crowned!



Visit youroralhealth.ca

Click on Kids' Zone for more games and puzzles!





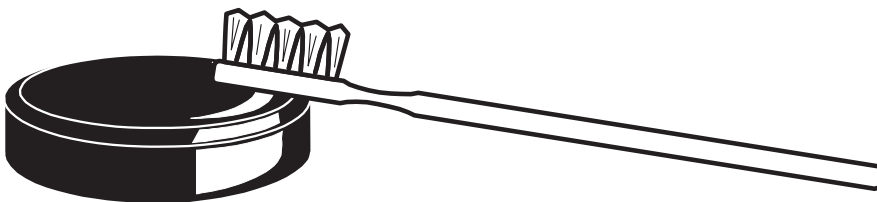
Dental Word Search

Search the puzzle for the words shown in the word list, all about **hockey** and **healthy teeth**. Circle each word that you find until you find all the words in the puzzle!

D R E F E R E E H C B E Y O T A I L L N S
 W E T F G O L R S T D B G C F I N M T H F P
 E B V J K I O L Y G T R Y X F U K L O P L C
 M U H E A L T H Y S N A C K S T Y I O M O N
 O O R A W H L N C E F C W A I D E N T I S T
 L P U T F C B X E A D E P K D T V B H Q S L
 A Y G T A W S F Z F O S P L E M B E B R S C
 R A S B H T S M I L E D F P O U N P R E U P
 U T G J L G K R S U W M D O T O N G U E S C
 Y W U H P O U B G O Y A S E P K L F S C R B
 P L E E M A T A G R P L S D C A S W H M K R
 R F D L P L F C R I K V T O O T H P A S T E
 H Z A M B O N I O D R F I G D C E A S A I L
 P O L E F X C R T E I Y C H E C K U P K T F
 T U Y T G F D C V E S P K T R F C E S H I A

WORD LIST

BRACES
 CHECKUP
 DENTIST
 FLOSS
 FLUORIDE
 GOAL
 HEALTHYSNACK
 HELMET
 MOLAR
 MOUTHGUARD
 OFFSIDE
 PUCK
 REFEREE
 SMILE
 STICK
 TONGUE
 TOOTHBRUSH
 TOOTHPASTE
 ZAMBONI



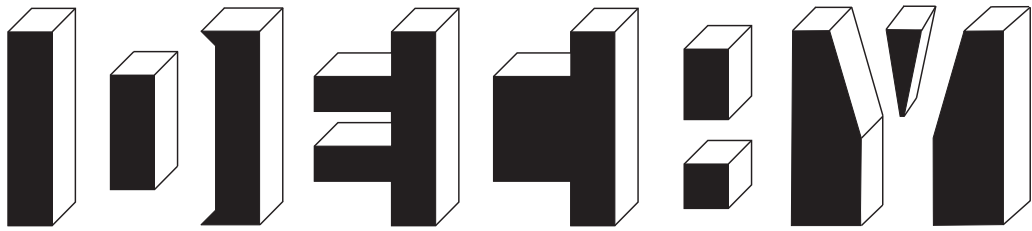
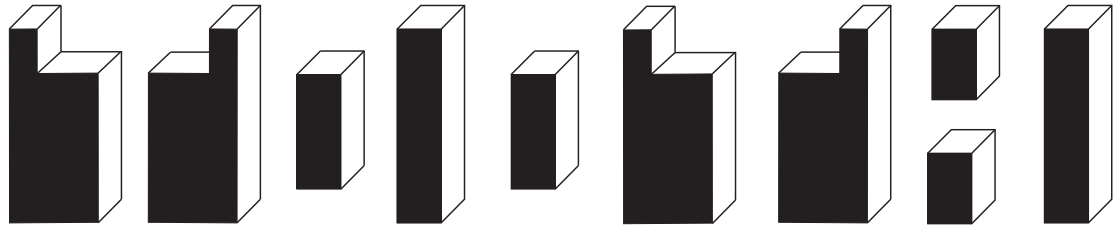
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NOT EVERYBODY
CAN SEE IT, BUT
YOUR DENTIST CAN.
BOOK AN EXAM TODAY.



IS A MEMBER OF THE ONTARIO DENTAL ASSOCIATION