

Dr. Deborah Stymiest

In a nation as prosperous as ours, adequate dental care should be a priority and available to all children.

## Spreading the Message on Childhood Caries

fter 25 years in dentistry, I am witnessing a disturbing trend in my practice. The rate of dental decay is rising among young patients, from preschoolers to adolescents. We are regularly seeing children with up to 50% of their deciduous teeth decayed, suffering from pain, poor nutrition, sleep deprivation and diminished self-image. Sadly, all of this can be attributed to a wholly preventable disease.

In talking with other dentists across Canada and internationally, I realize that my practice is not unique and that many practitioners are acutely aware of this disturbing development. Although national tooth decay rates have not been accurately measured in this country since 1972, we should begin to see preliminary results of the Canadian Health Measures Survey in 2009 that will help quantify these trends.

Identifying some of the probable causes for increased decay is not difficult. Poor nutrition, regular consumption of juices and sodas with high sugar content, a preference for bottled water rather than tap water containing fluoride, readily available and inexpensive junk food, poor oral hygiene and lack of regular oral care all come to mind. What I find surprising is that the parents of many children we see are unaware of the possible factors that could lead to their child's poor oral health, or if they have knowledge, they seem incapable of doing much about it. Somehow, the profession's preventive messages are getting lost.

I recently examined a 3-year-old girl during her first dental visit who had 19 perfect teeth and one seriously decayed lower molar. Her parents claimed that her brushing was regular and that her diet was excellent. However, it seems this girl always carried a little box of crunchy little sugar rocks given by her grandmother. We now have a young patient unable to cooperate long enough to undergo the necessary pulpotomy and restoration under local anesthetic. To date, one visit where nitrous oxide sedation was to be administered has been unsuccessful and if the next attempt fails, the little girl will require general anesthesia to restore one tooth, at great expense and risk.

In July, I attended a symposium sponsored by the Ontario Dental Association on designing dental programs for high-risk children in Toronto during the International Association for Dental Research general session. The consensus among the international panel of experts was that the severity of childhood tooth decay needs to be highlighted, while also stressing to the public that it can be prevented. Although the rate of decay among the children we see in our practices is worrying, there are so many others who never even make it to a dental office. Many Canadian children suffer as a result of poverty, intermittent homelessness and the inability to access basic care. In a nation as prosperous as ours, adequate dental care should be a priority and available to all children.

I believe it is time to refocus our efforts on spreading the message of prevention. We cannot allow a reversal of the progress made by the profession against preventing tooth decay. We need to look at our past successes and be open to new ways of delivering our messages. We need a grassroots approach built on collaboration with members of our communities, other health care professionals and government policy-makers. Success may require incorporating oral health into other public health initiatives such as immunization and preschool screening programs. We should not accept systems that would rather pay for the cost of treating a disease than the cost of preventing it in the first place.

No doubt there is much work to be done on this complex issue. Under the new CDA strategic priority "A Healthy Public," early childhood caries has been identified as a priority issue tasked to the Committee on Clinical and Scientific Affairs. With the support and input of our corporate members, we hope to catalogue existing programs across Canada, share our stories of success and challenges, and arrive at solutions that will make a difference for all of our children. I know we all agree on one thing — our kids are worth it.

Deborah Stymiest, BSc, DDS president@cda-adc.ca