NC Department of Health and Human Services
Dental Public Health
NC Oral Health Section

Perinatal Oral Health Webinar
Barbara Smith, MS, RDH
Perinatal Oral Health Coordinator
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Best Practices and Perinatal Oral Health

Presentation Objectives

Upon completion of this presentation, the participant will be able to:

• Explain how oral health affects overall health
• Describe how maternal oral health impacts the child’s oral health
• Implement new perinatal oral health framework guidelines
• Explain the importance of collaborative practice between medical and dental providers and maternal/child oral health outcomes
• Summarize the perinatal oral health collaborative practice framework for medical and dental providers
• Educate
• Integrate
• Collaborate
• Improve Maternal-Child Outcomes

Oral Health Motto:
• Oral Health for Every Body

People We Serve:
• Children
• Vulnerable Adults
• Caregivers
• Healthcare providers

Oral Health Section Goals and Objectives:
Aims to prevent dental caries by using evidence-based, data-driven decisions to advance oral health, overall health and wellbeing of North Carolina citizens:

• Promote access to dental care
• Train and expand the dental workforce
• Monitor the public’s oral health
• Offer preventive services and education
• Provide professional education

The objectives addressed by:
25 full-time dental hygienists serve the state
Oral epidemiology program
Health programs focused on the lifespan address prevention in early childhood, school health and vulnerable adult populations
Case Report:

"Term Stillbirth caused by Oral Fusobacterium nucleatum"

• 35 year old at 39.5 weeks gestation
• Weakened immune system
• Routine prenatal care, uncomplicated pregnancy
• Lack of movement by the baby
• Autopsy revealed F. nucleatum in lungs and stomach; oral exam found F. nucleatum in mothers subgingival flora and no other locations
• Due to placenta size and weakened immune response, fetus was susceptible to bacteria


National Perinatal Oral Health Data

• 2000 Surgeon General’s report Oral Health Report in America: oral health is mirror for general health and well-being
• American Dental Association affirms importance of oral health during pregnancy
• Maintaining oral health may have positive effect on cardiovascular disease, diabetes and other disorders
• Maternal periodontal infection may be linked to preterm low birth weight babies
• Association between maternal oral health and oral health of her children


National Perinatal Oral Health Data

- 2007-2009, 35% of U.S. women did not have a dental visit within the past year
- 56% of women did not visit a dentist during pregnancy
- 80% of obstetricians did not use oral health screening questions during prenatal visits
- 94% did not routinely refer all patients to a dentist


NC PRAMS 2017 Oral Health Data

- 58% of NC pregnant women did not have a dental prophylaxis during pregnancy
- 50% reported that a health care worker did not talk to them about oral health care during pregnancy

Disparities

Perinatal Oral Health Task Force

Convened in 2016

Responsible for adopting perinatal oral health collaborative practice framework in North Carolina

Continued collaboration on issues impacting perinatal oral health, including policy
Perinatal Oral Health Assessment 2016

• Utilized a questionnaire and visual-only oral screening

• Total of 459 women participated in 68 county health departments across the state offering prenatal care services

NC Perinatal Oral Health Data

• 17% stated they had a dental visit during the current pregnancy
• 39% were asked by a medical provider if they had a dental home
• Less than half (40%) reported having dental insurance
• 54% identified their oral health as Fair to Very Poor

NC Perinatal Oral Health Data

• The cost was the single most common barrier identified
• Based on oral screening, one third of pregnant participants had untreated tooth decay
• Nearly 30% reported experiencing bleeding gums
Concerns Identified

Pregnant Women

• Many do not understand importance of oral health
• Belief that poor oral health status during pregnancy is normal
• Many women do not visit a dentist during pregnancy*

Hurdles to Oral Health Care During Pregnancy

Concerns of Healthcare Providers

• **Physicians**
  • Lack of compensation
  • Unfamiliarity
  • Absence of processes
• **Dentists**
  • Differing opinions on management of pregnant patient
  • Lack of insurance policy knowledge
  • Liability

*NCDHHS, Division of Public Health, Oral Health Section


Is it safe to have dental treatment while I am pregnant?
Oral Health Impacts Total Health

Source: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC88948/

Possible Pregnancy Complications

Source: https://www.adha.org/resources-docs/7838_Periodontal_Diseases_and_Adverse_Pregnancy_Outcomes.pdf

Pregnancy Impacts on Oral Health

Source: Photo credit AAP.org

NC DHHS, Division of Public Health, Oral Health Section
**Periodontal Diseases**

<table>
<thead>
<tr>
<th>Gingivitis</th>
<th>Periodontitis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mildest form of periodontal disease</td>
<td>Untreated gingivitis can lead to periodontitis</td>
</tr>
<tr>
<td>Red, swollen gums that bleed easily</td>
<td>Chronic inflammation, destruction of bone</td>
</tr>
<tr>
<td>Often no discomfort</td>
<td>Squeaking of teeth, tooth loss</td>
</tr>
<tr>
<td>Poor oral hygiene most common cases</td>
<td>Red swollen gums, bleed easily</td>
</tr>
<tr>
<td>Many other contributing factors; diabetes</td>
<td>Plaque between teeth and gums, bad breath</td>
</tr>
<tr>
<td>Reversible</td>
<td>Irreversible</td>
</tr>
</tbody>
</table>

**Maternal-Child Connection**

- Most young children acquire caries-causing bacteria from their mothers
- Mothers with poor oral health likely to have children with poor oral health
- Counseling and dental care may reduce transmission of bacteria, thereby delaying or preventing onset of childhood caries

**Organizations Supporting Perinatal Oral Health**

- ACOG
- AAP
- ADA
- AAPA

Sources:
Oral Health Care During Pregnancy: A National Consensus Statement

- Released in 2012 by the Health Resources and Services Administration in collaboration with the American College of Obstetricians and Gynecologists (ACOG) and the American Dental Association (ADA)

https://www.mchoralhealth.org/materials/consensus_statement.php

https://www.mchoralhealth.org/PDFs/Oralhealthpregnancyconsensusmeetingsummary.pdf

Oral Health Care During Pregnancy: NC Collaborative Practice Framework

Oral Health Care During Pregnancy: North Carolina Collaborative Practice Framework 2018

Quick Reference Guides

Request Form is available at

https://publichealth.nc.gov/oralhe
**Guidance to Share with Pregnant Women**

- Establish a dental home
- Stop use of harmful substances
- Rinse with a teaspoon of baking soda in a cup of water after vomiting or reflux. Do not brush right away.
- Floss and brush with fluoridated toothpaste twice daily
- Breastfeeding your baby is recommended
- Begin brushing your baby's first tooth with a smear of fluoridated toothpaste twice daily

**Perinatal Guidance: Medical Providers**

- Assess pregnant women's oral health status.
- Advise pregnant women about oral health care.
- Work in collaboration with oral health and prenatal care professionals.
- Provide support services/case management.
- Improve health services in the community

**Within Normal Limits**

Source: Dermnetnz.org https://creativecommons.org/licenses/by-nc-nd/3.0/nz/legalcode
Within Normal Limits

Visually Concerning

Advise Pregnant Women About Oral Health Care

- Reassure pregnant women that oral health care is safe:
  - Radiographs
  - Local anesthesia
  - Pain medications

- Encourage women to schedule a dental visit: provide referral, if needed
Perinatal Guidance: Dental Providers

- Assess pregnant women's oral health status.
- Advise pregnant women about oral health care.
- Work in collaboration with prenatal care health professionals.
- Provide oral disease management and treatment.
- Provide support services/case management.
- Improve health services in the community.

Framework Also Includes

- Oral health guidance for pregnant women
- Postpartum oral care
- Infant/Child oral care
- Pharmacological considerations during pregnancy

Provider Resources:

Perinatal Oral Health Program (pOHP):
http://www.prenataloralhealth.org/index.php/dashboard/phcpvideo

Smile for Life: A National Oral Health Curriculum:
http://www.smilesforlifeoralhealth.org

National Maternal & Child Oral Health Resource Center
https://www.mchoralhealth.org

Association of State and Territorial Dental Directors
https://www.astdd.org
OHS Provider Resources:

- Oral Health Section Website
- Oral Health Section landing/home page: https://publichealth.nc.gov/oralhealth/index.htm
- Oral Health Section educational resources page https://publichealth.nc.gov/oralhealth/education/
- Current dental provider list provided by Field Staff
- Training presentation for dental and medical providers provided by Field Staff

Key Points:

- Perinatal oral health is a matter of maternal-child oral health
- Comprehensive dental treatment is essential and safe throughout pregnancy
- Collaborative practice is key to improved maternal-child oral health outcomes

Questions?

If you have any question, please contact:
North Carolina Oral Health Section
919-707-5480