

CPG on Oral Health Care for Children - prevention and treatment of dental caries

Version 1.0 - December 2020

Summary

1. Justification

These clinical practice guidelines are intended for oral health care professionals, i.e. paediatric and general dentists, dental specialists, and oral hygienists. Other care professionals, including dental care professionals, may also benefit from these guidelines. The guidelines have been developed on the initiative of the oral care institution Kennisinstituut Mondzorg (KIMO) and were managed by a Guidelines Development Committee (GDC), chaired by Em. Prof. A.M. Kuijpers-Jagtman, Emeritus Professor of Orthodontics at the Radboud University Nijmegen Medical Center (RUNMC).

2. Introduction

In practice, diagnosis and treatment of primary caries lesions appears to be unclear. Until now, identifying dental caries as a behavioural disorder and its relationship with the effect of non-invasive treatments and tailored care have not yet found a role in standard daily practice. It is unclear what the most effective prophylactic or curative treatments are, depending on the type of caries lesion. These guidelines recognise that treatment should primarily focus on the encouragement and training of children to practise good oral hygiene. Treatment should follow the principles of minimally invasive dentistry.

3. Recommendations

Question 1. How can an oral health care professional encourage children up to the age of 18 and their parents/carers to keep their teeth sound?

- Identify unhealthy behaviour and encourage children and parents/carers to change unhealthy, risky behaviour using motivational interviewing (MI).
- Develop motivational interviewing skills, assess them routinely in practice by recording and analysing conversations and developing these skills in training and CPD.
- Encourage children up to the age of 18 to lead a healthy lifestyle, including regular visits to an oral health care professional and following the [Advies Cariëspreventie \[Caries Prevention Advice\]](#).
- Encourage parents/carers to take their child with them when they visit an oral health care professional before or just after the first elements start to appear, because good oral hygiene begins with the first milk teeth.

Question 2. Prophylactic and curative treatment for children with deciduous teeth. There are four subsections here:

- 2.1 How should dental caries be prevented in children with milk elements?
- 2.2 How should enamel lesions in milk elements be treated?
- 2.3 How should non-cavitated dentine lesions in milk elements be treated?
- 2.4 How should cavitated dentine lesions in milk elements be treated?

Answers to these questions can be found using the flow chart at the end of this summary.

Question 3. Prophylactic and curative treatment for children with permanent teeth. There are four subsections here:

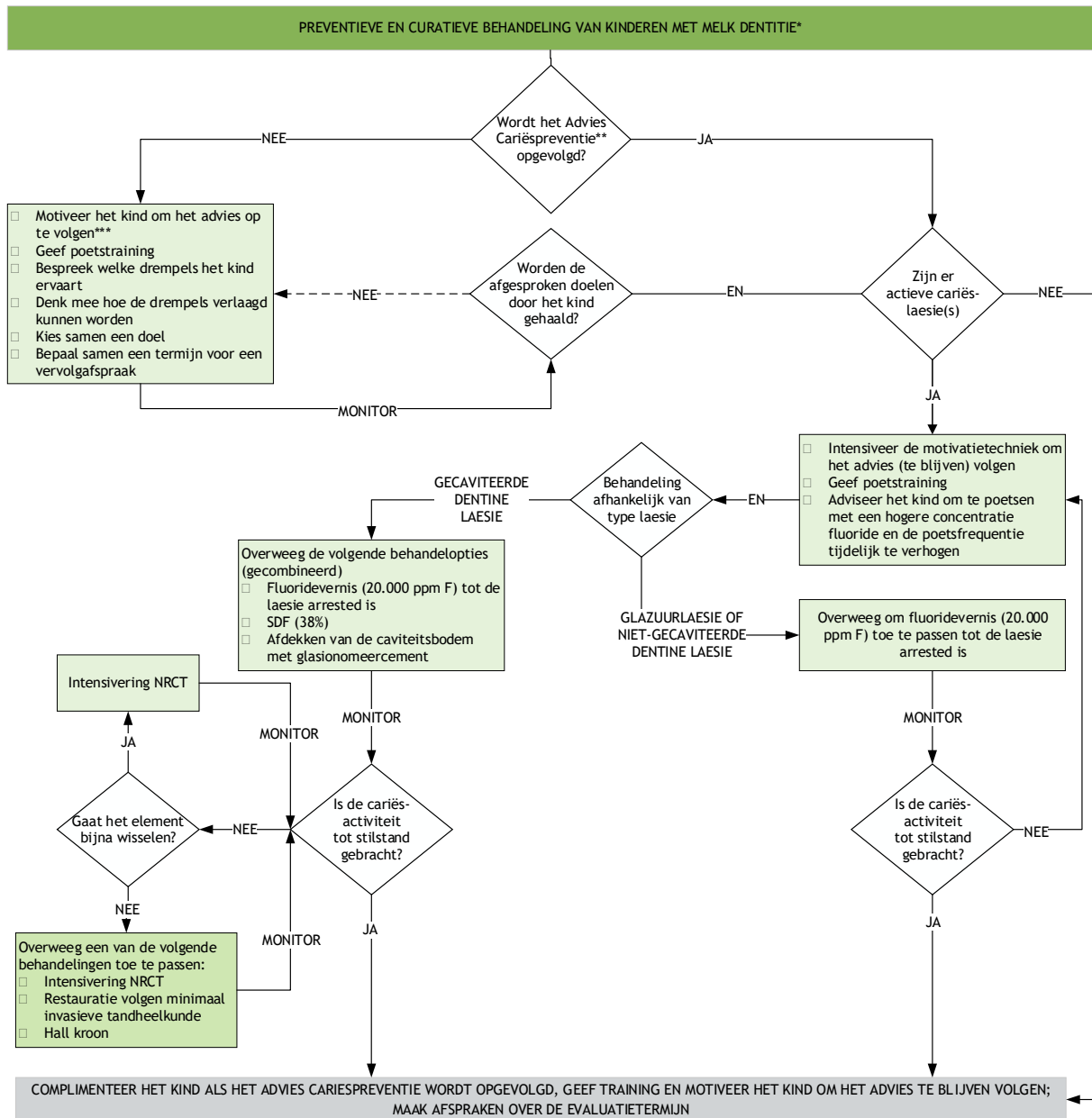
- 3.1 How should dental caries be prevented in children with permanent elements?
- 3.2 How should enamel lesions in permanent elements be treated?
- 3.3 How should non-cavitated dentine lesions in permanent elements be treated?
- 3.4 How should cavitated dentine lesions in permanent elements be treated?

Answers to these questions can be found using the flow chart at the end of this summary.

Question 4. How should dental care for children be organised?

- Consider seeking cooperation with other relevant partners, such as Youth Health Care Services (JGZ), to reach parents of children who do not visit an oral health care professional through this network.
- If the Caries Prevention Advice is not adequately followed and repeated motivational talks and training do not achieve the desired improvement, consider referring the child to an oral health care professional who has an affinity with children or to Youth Health Care Services (JGZ).

Flow chart for prophylactic and curative treatment for children with deciduous teeth



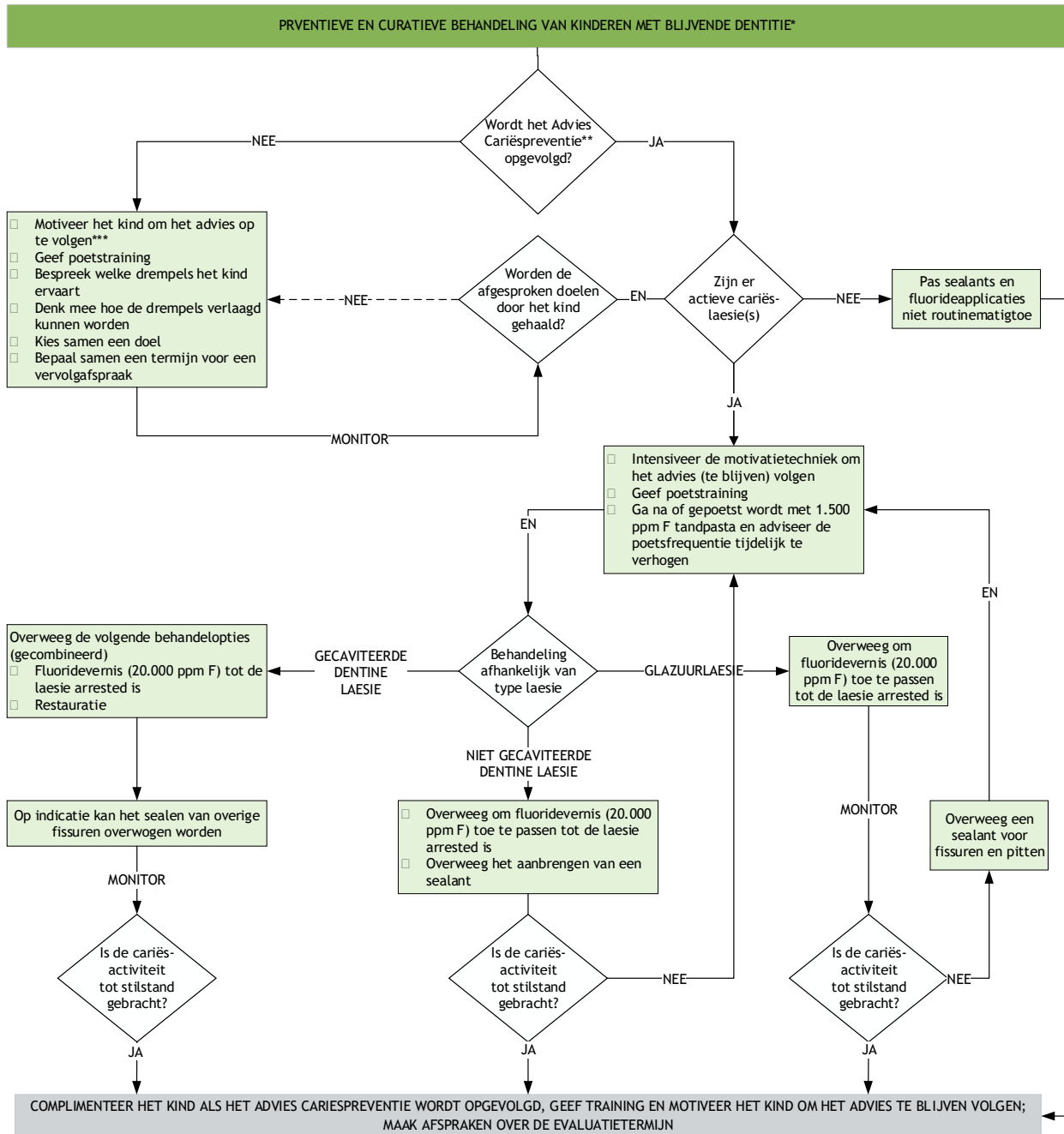
Any mention of ‘child/children’ denotes not only children or adolescents but also parents and/or carers.

* Consider referring to an oral health care professional who has an affinity with children if motivation, instruction and training are ineffective and caries lesions continue to manifest.

** Advies Cariëspreventie, Ivoren Kruis 2011

*** Identify unhealthy behaviour and encourage children and parents/carers to change unhealthy, risky behaviour using motivational interviewing; develop motivational interviewing skills.

Flow chart for prophylactic and curative treatment for children with permanent teeth



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