
Pregnancy and teeth

Summary

- The demands of pregnancy can lead to particular dental problems in some women.
 - You are less likely to have dental problems during pregnancy if you already have good oral hygiene habits.
 - With proper dental hygiene at home and professional help from your dentist, your teeth should stay healthy during pregnancy.
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Pregnancy can lead to dental problems in some women, including gum disease and increased risk of tooth decay. During pregnancy, your increased hormones can affect your body's response to plaque (the layer of germs on your teeth).

Pregnancy does not automatically damage your teeth. The old wives' tale that warns a woman to expect a lost tooth for every baby is false. If the mother's intake of calcium is inadequate during pregnancy, her bones – not her teeth – will provide the calcium her growing baby needs. This calcium loss is quickly made up after breastfeeding is stopped.

However, the demands of pregnancy can lead to particular dental problems in some women. With proper hygiene at home and professional help from your dentist, your teeth should remain healthy throughout pregnancy.

Dental disease can affect a developing baby

Research has found a link between gum disease in pregnant women and premature birth with low birth weight. Babies who are born prematurely may risk a range of health conditions including cerebral palsy and problems with eyesight and hearing.

Estimates suggest that up to 18 out of every 100 premature births may be triggered by periodontal disease, which is a chronic infection of the gums. Appropriate dental treatment for the expectant mother may reduce the risk of premature birth.

Pre-pregnancy dental health

You are less likely to have dental problems during pregnancy if you already have good oral hygiene habits. Suggestions include:

- Brush your teeth at least twice daily with fluoridated toothpaste.
- Floss between your teeth.
- Visit your dentist regularly.

If you are planning on getting pregnant, but you are also planning on having some elective dental procedures, see your dentist. It is more convenient to have elective procedures done before you conceive. If you require dental treatment during pregnancy, non-urgent procedures are often performed after the first trimester.

Tell your dentist if you are pregnant

Pregnancy may affect your dental care. For example, the dentist may put off taking x-rays until after the birth of your baby. If dental x-rays are unavoidable, the dentist can take precautions to ensure your baby's safety. If your dental condition requires general anaesthesia or medications, talk to your dentist, doctor or obstetrician for advice.

Causes of dental health problems

Common causes of dental health problems during pregnancy can include:

- gum problems
- vomiting
- cravings for sugary foods
- retching while brushing teeth.

Gum problems

The hormones associated with pregnancy can make some women susceptible to gum problems including:

- gingivitis (gum inflammation) – this is more likely to occur during the second trimester. Symptoms include swelling of the gums and bleeding, particularly during brushing and when flossing between teeth
- undiagnosed or untreated periodontal disease – pregnancy may worsen this chronic gum infection, which is caused by untreated gingivitis and can lead to tooth loss
- pregnancy epulis or pyogenic granuloma – a localised enlargement of the gum, which can bleed easily. This may require additional professional cleaning, and rarely excision.

During pregnancy, the gum problems that occur are not due to increased plaque, but a worse response to plaque as a result of increased hormone levels.

Tell your dentist about any gum problems that you might have. Switch to a softer toothbrush and brush your teeth regularly, at least twice every day. Use toothpaste that contains fluoride (if you're not already doing so) to help strengthen your teeth against decay.

If you have gum problems during pregnancy, it is important to get your gums checked by a dentist after you have given birth. While most types of gum problems caused by pregnancy hormones resolve after birth, a small number of women may have developed a deeper level of gum disease that will need treatment to resolve.

Vomiting can damage teeth

Pregnancy hormones soften the ring of muscle that keeps food inside the stomach. Gastric reflux (regurgitating food or drink) or the vomiting associated with morning sickness can coat your teeth with strong stomach acids. Repeated reflux and vomiting can damage tooth enamel and increase the risk of decay.

Suggestions include:

- Avoid brushing your teeth immediately after vomiting. While the teeth are covered in stomach acids, the vigorous action of the toothbrush may scratch the tooth enamel.
- Rinse your mouth thoroughly with plain tap water.
- Follow up with a fluoridated mouthwash.
- If you don't have a fluoridated mouthwash, put a dab of fluoridated toothpaste on your finger and smear it over your teeth. Rinse thoroughly with water.
- Brush your teeth at least an hour after vomiting.

Retching while brushing teeth

Some pregnant women find that brushing their teeth, particularly the molars, provokes retching. However, you risk tooth decay if you don't brush regularly.

Suggestions include:

- Use a brush with a small head, such as a brush made for toddlers.
- Take your time. Slow down your brushing action.
- It may help to close your eyes and concentrate on your breathing.
- Try other distractions, such as listening to music.
- If the taste of the toothpaste seems to provoke your gag reflex, switch to another brand. Alternatively, brush your teeth with water and follow up with a fluoridated mouthwash. Go back to brushing with fluoridated toothpaste as soon as you can.

Food cravings while pregnant

Some women experience unusual food cravings (and food avoidance) while they are pregnant. A regular desire for sugary snacks may increase your risk of tooth decay. Try to snack on low-sugar foods instead.

If nothing but sweetness will satisfy your craving, try to sometimes choose healthier options such as fresh fruits. Rinse your mouth with water or an alcohol-free mouth rinse, or brush your teeth after having sugary snacks.

Increase your calcium during pregnancy

You need to increase your daily amount of calcium during pregnancy. Sufficient calcium will protect your bone mass and meet the nutritional needs of your developing baby.

Good sources of dietary calcium include products such as:

- milk
- cheese
- unsweetened yoghurt
- calcium-fortified soymilk.

Increase your vitamin D during pregnancy

Vitamin D helps the body to utilise calcium. Good sources include:

- cheese
- fortified margarine
- fatty fish, such as salmon
- eggs.

Where to get help

- Your dentist
- **Australian Dental Association**. Tel (02) 8815 3333
- **Community dental clinic** – to find your local community clinic, tel. 1300 360 054 or search by postcode
- The **Royal Dental Hospital of Melbourne:**
 - General enquiries or appointments Tel. (03) 9341 1000 or 1800 833 039 (outside Melbourne metro) 8.30 am to 5 pm, Monday to Friday
 - Dental emergencies Tel. 1300 360 054, 8.00 am to 8.30 pm, Monday to Friday, 8.30 am to 8.00 pm weekends and public holidays
- Your GP or obstetrician

This page has been produced in consultation with and approved by:

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