



DENTAL HEALTH DURING PREGNANCY

Getting a dental checkup during pregnancy is safe and important for the health of both the mother and the baby. Women can safely have cleanings and procedures like cavity fillings and be treated for pregnancy-related conditions before the baby is born. The American Dental Association, the American Congress of Obstetricians and Gynecologists, and the American Academy of Pediatrics all encourage women to get dental care while pregnant.¹

When to tell the dentist about pregnancy

If a woman thinks she might be pregnant, she should let her dental office know. The dentist also needs to know all medications she is taking and if she received any special advice from her physician. If the pregnancy is high-risk or if she has certain medical conditions, the dentist and the physician may postpone certain treatments.

How pregnancy will affect the mouth

Many women have no dental discomfort during pregnancy while others experience problems. Regular checkups and good dental hygiene keep mothers and babies healthy.

Pregnancy gingivitis

A woman's mouth can be affected by hormonal changes. For example, some women develop a condition known as pregnancy gingivitis, an inflammation of the gums that can cause swelling and tenderness. The gums may bleed a little when she brushes or flosses. Left untreated, gingivitis can lead to more serious forms of gum disease. The dentist may recommend more frequent cleanings to prevent this.

Increased risk of tooth decay

Pregnant women may be more prone to cavities for several reasons. If they are eating more carbohydrates than usual, this can cause decay. Morning sickness can increase the amount of acid the mouth is exposed to, which can eat away at the outer covering of the teeth (enamel). Other reasons are a more sensitive gag reflex, tender gums, and exhaustion. It is especially important to brush twice a day and floss daily, as poor oral hygiene habits during pregnancy have been associated with premature delivery, intrauterine growth restriction, gestational diabetes, and preeclampsia.

Pregnancy tumors

In some women, overgrowths of tissue called "pregnancy tumors" appear on the gums, most often during the second trimester. It is not cancer but swelling that happens most often between teeth and may be related to excess plaque. "Pregnancy tumors" bleed easily and have a red, raw-looking, raspberry-like appearance. They usually disappear after the baby is born, but if one causes concern, a dentist can say if it should be removed.

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Medications

The dentist should know what prescription medications and over-the-counter drugs the pregnant patient is taking. This information helps the dentist determine if a prescription medication is needed, and which type to prescribe. The dentist can consult with the patient's physician to choose medications – such as pain relievers or antibiotics – which may be safely taken during pregnancy. The professionals will work together to keep the mother and the baby safe. They can answer questions about recommended medications.

Local anesthetics during pregnancy

If the pregnant patient needs a filling, root canal, or a tooth pulled, the numbing medications the dentist may use during the procedure are safe for both mother and baby.

A study in the August 2015 issue of the *Journal of the American Dental Association* followed a group of pregnant women who had procedures that used anesthetics like lidocaine shots and a group that did not. The study showed these treatments were safe during pregnancy, as they caused no difference in the rate of miscarriages, birth defects, prematurity, or weight of the baby.

The American Congress of Obstetricians and Gynecologists agrees that procedures like cavity fillings and crowns are safe and important to have during pregnancy to prevent potential infection. If possible, dental work should be scheduled in the second trimester. Cosmetic procedures, like whitening, should wait until after baby arrives. If an emergency procedure is necessary, the dentist will work with the patient to determine the best plan for the health of both mother and baby.

Dental x-rays during pregnancy

Getting an x-ray during pregnancy is safe. Although radiation from dental x-rays is extremely low, the dentist or hygienist will cover the pregnant patient with a leaded apron that minimizes exposure to the abdomen. The dental professional will also cover the patient's throat with a leaded collar to protect the thyroid from radiation.

For more information, contact the Division of Public Health, Bureau of Oral Health and Dental Services, at 302-622-4540 and www.dhss.delaware.gov/dhss/dph/hsm/ohphome.html.

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Questions and Concerns

1. Do I need to change my daily habits?

If you are already brushing twice a day with a fluoride toothpaste and cleaning between your teeth once a day, keep up the good work! If not, there is no better time to start, as poor habits during pregnancy have been associated with premature delivery, low birth rate, gestational diabetes, and preeclampsia. Talk to your dentist about your routine and if you should make any changes.

2. I am struggling with morning sickness. What should I do?

Vomit contains stomach acids that can eat away at your teeth. First swish and spit, using water, a diluted mouth rinse, or a mixture of one cup of water and one teaspoon of baking soda. Brush your teeth about 30 minutes later.

3. Help! Brushing makes me gag.

During a time when anything (and possibly everything) may make you gag, take it slow and figure out what works for you. Changing your flavor of toothpaste, using a brush with a smaller head, or brushing at different times of the day may help. If you need to swish and spit before coming back to brush your teeth, try that as well. Keep up your routine because pregnant women are slightly more at risk for cavities, due to acid on teeth from morning sickness, diet changes, and feeling too tired to brush.

4. Does what I eat affect my baby's teeth?

Your baby's teeth begin to develop between the third and sixth months of pregnancy and eating well can help them form correctly. Get plenty of nutrients, including vitamins A, C, and D, protein, calcium, and phosphorous. To reduce the risk of neural tube defects, you need 600 mcg of folic acid each day while pregnant. Take folic acid supplements and eat foods high in folate. Drink water with fluoride or speak to your dentist about fluoride supplements if your drinking water does not contain fluoride.

Resources

1. American Dental Association. 2020. *Pregnancy*. Mouth Healthy. Retrieved July 15, 2020 from: <http://www.mouthhealthy.org/en/pregnancy>
2. American Dental Association. 2020. *Pregnancy Concerns*. Mouth Healthy. Retrieved July 15, 2020 from: <http://www.mouthhealthy.org/en/pregnancy/concerns>

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