



The California Society of Pediatric Dentistry



California Dental Association



The Consequences of Untreated Dental Disease in Children

Looking Closer at California's Children



The Consequences of Untreated Dental Disease in Children

Poor oral health in infants and children destroys more than just a smile.

Although largely preventable by early examination, identification of individual risk factors, parental counseling and education, and initiation of preventive care procedures such as topical fluoride application, the progressive nature of dental disease can quickly diminish the general health and quality of life for affected infants, toddlers, and children. Failure to identify and prevent dental disease has consequential and costly long-term adverse effects.

Tooth decay in children is painful, just as it is in adults. Unless arrested in its early stages, dental decay becomes irreversible. Without appropriate treatment, tooth decay will lead to infection of the teeth, gums and tooth loss.

Untreated dental disease compromises the child's ability to eat well, sleep well, and function well at home and at school. The unaesthetic nature of untreated dental decay compromises the child's self-esteem and social development.

Despite significant achievements in public health programs such as community water fluoridation and other preventive measures such as dental sealants, too many children still suffer from dental disease and are without basic dental care. The Surgeon General in 2000 issued a Call to Action urging that oral health promotion, oral disease prevention, and oral health care have a presence in all health policy agendas at the local, state, and national levels. Inherent in this goal is the critical concept of integrating oral health in general health agendas, priorities and funding.

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The California Society of Pediatric Dentistry (CSPD) is the professional membership organization representing California's nearly 700 pediatric dental providers, educators and researchers. Our members provide primary and specialty care for infants, children, adolescents and patients with special medical and developmental needs. The mission of the California Society of Pediatric Dentistry is to advocate optimal oral health and general welfare of infants, children, adolescents and persons with special needs.

The California Dental Association (CDA) is the largest state organization of the American Dental Association, representing over 24,000 member California dentists. The mission of CDA is to support its members in their practices and service to the public through innovation in education, advocacy and related programs. The California Dental Association is the recognized leader for excellence in member services and advocacy promoting oral health and the profession of dentistry.



A four to five year old child with evidence of tooth decay or Early Childhood Caries (ECC).

#1 - Early stages of decay (white spots or patches)

#2 – Moderately decayed primary tooth

#3 – Severely decayed primary tooth



A three year old child with severely decayed and unrestorable upper front teeth, requiring immediate extractions. If untreated, it is likely to cause an abscess and cellulitis (swelling of the face), the treatment of which may require hospitalization.



A five year old child with extensive decay of the upper front teeth. These teeth may need to be removed as the decay may be too advanced to restore. The early loss of these teeth will negatively affect the child's ability to chew, and may affect his or her self esteem.



A seven year old child with multiple, severely decayed primary teeth. The premature loss of these teeth will cause shifting of the teeth, leading to need for orthodontic treatment. Extraction or restoration of these teeth will be extensive and costly.



A four year old child with severe tooth decay requiring multiple tooth extractions: chewing and speech will now be compromised. Prosthetic replacement (bridge) may be available but is very costly.



Young teenager with malpositioned permanent teeth and moderate to severe chronic gingivitis (gum disease). The consequence of leaving this condition untreated is pain, infection and eventual loss of teeth.



A three year old child with severe tooth decay resulting from the chronic use of a baby bottle filled with milk or other sugary liquid. Untreated, this child may develop a severe dental abscess causing pain and inability to chew food.



Eight year old child with mandibular cellulitis (lower jaw swelling) from an infected permanent molar. The condition may require hospital treatment requiring 3 days of I.V. antibiotics/fluids and costing thousands of dollars.

Children's Oral Health Facts

- Tooth decay is the number one chronic health problem of children.
- Dental disease is infectious and progressive. The bacteria that cause it are transmissible and the disease is preventable.
- Children need their teeth to eat properly, talk, smile, and feel good about themselves. Children with cavities may have difficulty eating, smiling, and have problems paying attention and learning at school.
- By kindergarten, more than 50% of children in California have already experienced dental decay, 28% have untreated decay and 19% have extensive decay.¹
- By 3rd grade, over seventy percent of California's children have experienced dental decay.¹
- It is estimated that more than 1/2 million of California's children missed school in the previous 12 months due to dental problems ²
- Left untreated, dental decay can become severe enough to require emergency room treatment.
- Severe dental disease in children often requires the use of general anesthesia and hospitalization. Hospital stays for severe dental disease can run several days and cost over \$20,000.
- The resources used to treat children with severe dental disease could provide effective prevention and education programs for most of California's children.

*For children's oral health, treatment is good,
prevention is better and early prevention is best!*

Sources:

1. "Mommy, It Hurts to Chew." The California Smile Survey: An Oral Health Assessment of California's Kindergarten and 3rd Grade Children, February 2006
2. California Health Interview Survey, 2003