

Preparing for Your Child's First Dental Visit

by Houston Family



The American Dental Association and the American Academy of Pediatric Dentistry agree the first visit for all children should be at one year of age or six months after the first teeth erupt, whichever comes first. Why so early? In the past, first visits consisted of a quick look to check for cavities or early signs of cavities, along with recommendations about diet and brushing. Today, pediatric dentists are practicing Airway Focused Dentistry to look for potential growth and development issues that can be detected in a child as young as 12 months. Amy

Luedemann-Lazar DDS, MS Board Certified Pediatric Dentist at Kidstown Dental in Katy explains why dental visits should begin so early “We are seeing more patients with issues such as small airways, early signs of sleep disturbances, tonsil and adenoid issues, CPAP therapy, attention deficit disorder and a host of other challenges. Some of these problems

could be identified easily with an early visit with a pediatric dentist,” explains Dr. Luedemann.

What should you expect at your child’s first dental visit?

A valuable, thorough assessment, anticipatory guidance and simple easy recommendations with minimally-invasive interventions to ensure your little one is off to the best start possible. Done well and right, your child can have improved growth and development, airway health, and overall health.

Dr. Amy Luedemann shares what she looks for during the first dental visit:

- Assessment of growth and development of the face, jaws and airway
- Assessment of the alignment of the jaws
- Evaluation of muscle attachments, called frenums, looking for restrictions that could affect growth and/or function
- Assessment of feeding and speech milestones
- Screening of airway size, tonsil size and signs of possible sleep apnea
- Oral cancer screening
- Examination of all teeth present for any signs of cavities or enamel defects that would put the child at an increased risk for tooth problems
- Screen for silent reflux (which makes a child more cavity prone)
- Complete assessment of diet and habits to accurately predict risk for caries
- Review of contributing factors which affect child’s risk for dental disease

“By a thorough first visit, we can identify potential challenges and recommend minimally invasive procedures to improve a child’s overall health, keeping them cavity-free, lowering their risks for speech and feeding issues, sleep apnea, the need for tonsils and adenoids surgery, chronic ear infections, asthma and allergy symptoms, and the possibility to avoid the need for braces all together,” explains Dr. Luedemann.

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