

There is strong evidence that fluoride supplements are beneficial in reducing dental decay. Our office policy regarding fluoride use and decay prevention is as follows:

### Fluoride Guidelines for Ages 0 – 3

We recommend children come in to have their teeth checked at age two. The purpose of this first appointment is to:

1. Establish a dental home base for the child.
2. Do a brief visual exam, if possible.
3. Brush the child's teeth and instruct the caregiver how to do this.
4. Apply fluoride varnish if possible.
5. If any extensive decay is noted the child will be referred to a pediatric dentist.
6. Counsel the caregiver as to:
  - The need for regular dental visits.
  - Be sure the family receives dental care because caries (dental decay) is a transmissible disease.
  - Recommend healthy snacks (carrots, apples, etc.) and avoid sticky fruits such as raisins.
  - No Soda.
  - Less Juice.
  - Wean off the bottle (at least no bottle for sleeping).
  - Only water or milk in a sippy cup.
  - Chewing gum with xylitol only.
  - Drink tap water which will provide some systemic fluoride.
  - Less or no candy and junk food.

### Fluoride Guidelines for Moderate Risk Children and Adults

For those patients who have demonstrated a moderate risk for decay we recommend the use of Omni Gel. This is a brush on 0.4% stannous fluoride gel used twice daily (morning and evening). This product is for decay reduction and prevention, remineralization, and protection against decalcification in orthodontic patients.

### Fluoride Guidelines for the High Risk Patient (Dry Mouth or Post Radiation)

1. Control Rx (1.1% Neutral Sodium Fluoride – 5000 ppm Fluoride) or Prevident 5000 used three times daily as toothpaste. We can dispense the Control Rx in our office or you can get the Prevident 5000 your pharmacy with a prescription. When using these products spit out the excess; do not swallow it, and do not rinse or eat for thirty minutes afterwards.
2. Peridex (Chlorhexidine Gluconate 0.12%) . 10ml rinse once daily used for one week per month.
3. Xylitol gum or mints (Theragum, Theramints, and TheraSpray). Dosage is 6 – 10 gm per day. The gum is 1gm per stick. The mints or 0.5gm per mint.

- This is two sticks of gum three times daily or four mints three times daily.  
Add the TheraSpray as a moisturizer for dry mouth patients as needed.
4. Professional Prophylaxis in our office with full mouth Fluoride Varnish (Vanish , 5% Sodium Fluoride) every three months.
  5. Optionally we may add trays with Cavarest (1.1% Sodium Fluoride Gel) for additional protection as needed in severe cases.

#### Fluoride Guidelines for Tooth Sensitivity

For sensitivity we recommend Sodium Fluoride Varnish applied in our office. For home use we recommend SootheRx (Calcium Sodium Phosphosilicate) used as a brush on paste.

#### Risk Factors Used to Determine Decay Susceptibility

1. Visible heavy plaque
2. Frequent snacking
3. Deep pits and fissures
4. Recreational drug Use
5. Inadequate saliva flow
6. Saliva reducing factors (medications, age, radiation)
7. Exposed roots
8. Orthodontic Appliances

Any of these factors can place a patient in a moderate or high risk category for dental decay. We will determine which category the patient fits in by evaluation the amount and severity of the decay and the past history of decay.