



Oral Health – Fluoride varnish

In 2000, the Surgeon General declared tooth decay as the most common chronic illness among school age children. In fact, tooth decay is 5 times more prevalent than asthma or the common cold. One in four children begins kindergarten with childhood caries and is three times as likely to miss school. In 2014 the US Preventive Service Task Force recommended fluoride varnish to the primary teeth of all infants and children starting at the age of primary tooth eruption (age 6 months). It is then recommended at least every 6 months to all children 5 years and under.

The chief risk factors for oral caries are;

1. Going to bed with a bottle of milk or formula
2. Breast feeding during the night allowing child to nurse on demand and sleep on the breast
3. Juice in a sippy cup

Our mouths contain bacteria called *Strep mutans*. That bacteria combines with the sugars in the foods we eat and the liquids we drink pooling around the tooth creating acid. The acid demineralizes the tooth harming tooth enamel and damaging teeth. Fluoride protects teeth by making them more resistant to acid.

The water in north Idaho has essentially no natural fluoride and the Sandpoint city water does not have added fluoride. Fluoride varnish is a highly concentrated form of topical fluoride in a shellac base which sticks to the tooth and jump starts the remineralization process which prevents tooth decay. It has been shown to reduce decay by 30-63%. It has its greatest effect when applied before the onset of caries which appear as decalcified white spots along the gum line.

It is an incredibly safe and effective procedure that takes about 45-60 seconds. The only scientifically proven risk of fluoride is the possible development of cosmetic dental fluorosis if too much fluoride is ingested during the period of tooth development (usually in locations where the water is naturally high in fluoride). The only contraindications to varnish are allergy to pine rosin or pine nuts, ulcerative gingivitis/stomatitis or other open lesions.

Fluoride varnish is applied to infants and toddlers in a knee to knee format between the parent and nurse. Older children can be on the exam table with the head up at 45 degrees. The varnish is then painted on with a brush. Avoid application to the lips as children dislike the sticky feel.

Children should establish a regular dental home by the age of 3. For children without insurance or Medicaid, local dental providers include Loftus Family Dental in Sandpoint and Kaniksu Health Services in Sandpoint and Bonners Ferry.

CPT code 99188

ICD-10 code Z41.8



Fluoride Varnish

Directions for your child's care after fluoride varnish

5% sodium fluoride varnish was applied to your child's teeth today. This treatment safely delivers fluoride and a protective coating to the tooth surfaces. To obtain the maximum benefit, please follow these recommendations:

- Your child may eat, drink, and use a pacifier immediately.
- Hot, sticky, or crunchy foods should be avoided until tomorrow.
- No additional fluoride supplement until tomorrow.
- Resume regular brushing and flossing tomorrow.
- Varnish to be applied twice a year through age 5.

Your child will probably be able to feel the varnish on the teeth. Once brushing and flossing is resumed tomorrow, the feeling should go away. If you have any questions or concerns please contact us at 208.263.1435.

