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Early Dental Visits Increase — Alaska CUBS, 2009–2017

Background

A dental visit for children by 1 year of age is generally recommended by national organizations focused on child health.¹⁻³ This *Bulletin* presents trends pertaining to the age at which Alaska children are first seen by a dentist and describes early childhood dental care during 2015–2017.

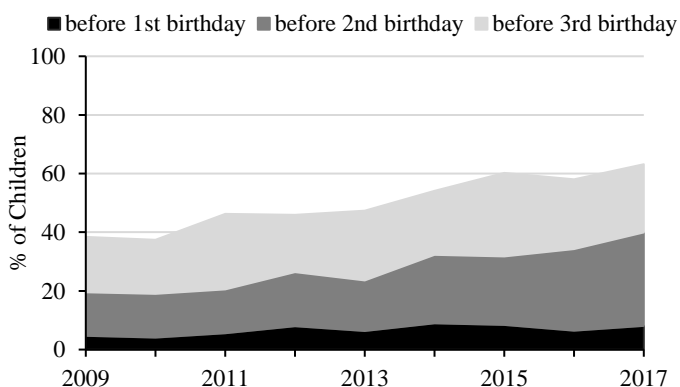
Methods

The Childhood Understanding Behaviors Survey (CUBS) is an ongoing, population-based survey that collects self-reported health-related information from Alaska mothers of 3-year-old children. The CUBS survey data are linked to birth certificates and are statistically weighted to represent all mothers of 3-year-olds born in Alaska. Since 2009, the survey has asked when the child was first seen by a dentist or dental care provider and what type of dental care the child has received. Children were categorized as having received no dental visit, preventative care only, or dental treatment (e.g. oral surgery, restorative treatment, or trauma care) at some point in their lives. We used linear regression to evaluate trends in timing of first dental visit.

Results

During 2009–2017, the percentage of Alaska 3-year-olds who first visited a dentist or dental care provider prior to their third birthday significantly increased from 38% to 63% (Figure, $p < 0.001$). Likewise, the percentage of 3-year-olds whose first visit to a dentist occurred before their second birthday doubled from 20% to 40% ($p < 0.001$), while the percentage who first visited a dentist before 1 year of age increased from 5% to 8% ($p < 0.01$). Children covered by Medicaid (as indicated on the survey) were more often reported to have visited the dentist before 3 years of age compared to children not covered by Medicaid, although an overall increase was observed among both groups. During 2015–2017, 91% of mothers of children who were not covered by Medicaid indicated their children had another form of *health* insurance.

Figure. Timing of First Dental Visit — Alaska, 2009–2017*



*As reported in the CUBS survey by mothers of 3-year-olds.

During 2015–2017, 56% of mothers of 3-year-olds reported that their child had visited a dentist for preventive dental care only, 13% reported that their child had received dental treatment, and 31% reported that their child had never visited a dentist (Table). Furthermore, 19% reported that their child had been diagnosed with tooth decay or cavities, and 7% reported that their child had a tooth pulled. Regional differences were observed in the distribution of dental care received ($p < 0.001$). The percent who had no dental visit ranged from a low of 14% in the Northern region to a high of 43% in the Interior region. The percent who had only preventative care ranged from 45% in the Southwest to 62% in the Mat-Su, while the percent who had received dental treatment ranged from 9% in Mat-Su to 36% in the Southwest.

Table. Level of Dental Care Ever Received among 3-Year-Olds, by Region — Alaska CUBS, 2015–2017*

	No Dental Care	Preventive Care Only	Dental Treatment
Statewide	31%	56%	13%
Interior	43%	47%	10%
Gulf Coast	36%	54%	10%
Anchorage	31%	59%	10%
Southeast	30%	56%	14%
Mat-Su	29%	62%	9%
Southwest	19%	45%	36%
Northern	14%	57%	29%

*As reported in the CUBS survey by mothers of 3-year-olds.

Discussion

Early childhood dental visits in Alaska have steadily increased since 2009. Particularly encouraging is the increase of first visits before 1 year of age. However, in 2017, <10% of Alaska 3-year-olds had visited a dentist before 1 year of age and >30% had never visited a dentist by 3 years of age. The Alaska Medicaid Program adopted in 2016 the nationally recommended periodicity schedule for oral health treatment, including coverage of a first dental visit with the eruption of the first tooth and no later than 1 year of age for children (7 AAC 160.900[a](26)).

Dental caries is the most common chronic disease of childhood.⁴ The percentage of children with no early dental visit is high statewide and particularly alarming in some regions of the state. Dental visits allow a provider to address decay as soon as it appears and offer anticipatory guidance to parents on how to care for their infant's teeth, including the appropriate type and amount of toothpaste to use. Timely treatment for caries can reduce overall cost by preventing more severe problems. Addressing decay early can reduce potential dietary impacts related to missing teeth or pain while eating. CUBS did not collect information on what prompted children's first dental visits or on whether or not they had *dental* insurance. Some early dental visits may have been scheduled preferentially for children who have obvious signs of tooth decay or caries.

Recommendations

1. Clinicians should strongly encourage parents to take their infant to see a dental provider before their first birthday.
2. Clinicians should help families understand the causes of dental caries and include prevention and early intervention as part of comprehensive oral health services.
3. Clinicians should inform patients that Medicaid/Denali KidCare currently covers preventive dental visits following the eruption of the first tooth.
4. Clinicians including qualified oral health care providers such as dental hygienists or dental health aides should follow the Bright Futures Periodicity Schedule and perform oral health risk assessments beginning at 6 months of age.⁵

References

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