



Background

A common issue for many young children with special needs is oral sensitivity, which can impact eating, nutrition, speech, toothbrushing, dental check-ups and oral health. Families may receive education from occupational therapists, dental health educators and other health professionals regarding this issue. In an effort to provide consistent messages to parents, a group of oral health specialists and occupational therapists met to develop parent messages to address oral sensitivity and improve oral health and feeding practices.

Parent Messages

- When recommending crunchy foods such as crackers or chips for mid-morning and mid-afternoon snack times, encourage the parents to brush the child's teeth after the mid-morning snack. This would also apply to the use of air-puffed Cheetos or graham crackers that may be used as "first foods." (Rationale: Crackers and chips stick to the teeth so the flour breaks down to sugar and increases the risk of cavities. Children should have their teeth brushed twice a day, before breakfast and after the last feeding before bed. By brushing after the morning snack, the crackers will get brushed off the teeth and reduce the risk for decay.)
- Recommend face and cheek massage throughout the day and especially before toothbrushing to decrease oral sensitivity.
- For children who need chewing stimulation, recommend non-latex tubing or toys rather than licorice since licorice contains sugar and is sticky, it can contribute to tooth decay.
- When recommending use of the Baby Safe Feeder, try melons and other food rather than fruit roll ups, which can increase the risk for cavities.
- Electric toothbrushes can be helpful to decrease oral sensitivity. When it is used for vibratory stimulation the child, not the parent, should direct it. When a child has oral sensitivity, the parent should brush the child's teeth with a non-vibrating toothbrush.
- It is recommended that children learn to drink from a variety of cups, especially open cups. Prolonged and exclusive use of the no-spill sipper cup should be discouraged. Children often carry and drink from this type of cup throughout the day, which allows the sugar in the drink (all drinks except water) to be in contact with the teeth and cause cavities. The open cup and the nosey cup help the child to learn to control the flow of liquid and bring their lips together. A straw or sport bottles are other options to increase variety.
- The American Academy of Pediatrics no longer recommends giving juice but rather recommends that children be given fresh fruit cut into pieces when developmentally appropriate. The rationale is that children often get too many calories from juice and it also increases the risk for cavities. Encourage parents to give the child water in the cup and, if appropriate, milk.
- For older children who stuff or pouch food, have the child look in the mirror after eating to see the food. Instruct parents to check after mealtimes for residual food. This is a choking hazard.
- Some children need foods with high flavor. Try using dips without sugar such as ranch dressing or salsa.
- Children who are tube-fed still need to have their teeth brushed morning and bedtime for healthy teeth and gums. Any child who is G-tube fed should continue to have an oral stimulation program to avoid oral sensitivity so that oral hygiene activities can be carried out.