



TEACH ME TOOTHBRUSH SET

Introducing good oral health care right from the start may prevent long-lasting and sometimes irreversible oral health problems in infants and young children. The unique MAM Toothbrush Set features a long-handled caregiver brush designed for hands-on learning as you and your baby care for those tender gums and precious first teeth together. The shorthanded, baby's first brush is designed for holding, gumming, generally exploring, to help your baby grow comfortable with the "feel" of health care.

1 Soft, rounded head adapts perfectly to a baby's tiny mouth and prevents irritation of delicate mouth tissue.

2 Short, extra-soft bristles with rounded heads provide optimal brushing without harming a baby's tender gums and tooth enamel.

3 Extra long handle of the caregiver brush allows baby to brush along with caregiver and learn proper usage.

4 Soft massage part of the caregiver brush gently cleans tongue and gums prior to the appearance of your baby's teeth and may ease teething discomfort.



3 The small gap created by the short, pink bristles serves as a guide for how much toothpaste to use.

4 Soft handle is ergonomically shaped, easy to grip and non-slippery.

Caution: This is not a toy - store away from baby and young child's reach.

This publication has been reviewed by the American Academy of Pediatric Dentistry and found to be scientifically accurate. MAM offer a range of baby feeding and soother accessories. For more information please contact: Sassy Baby Products, 2502 Brenton Industrial Park Dr. S. E., Kentwood MI 49508, Tel.: (616) 243-0767. Made in Germany for Sassy INC. By MAM Babyartikel GmbH. Designed by I.D.Pool, Vienna



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www.mambrush.com

What should I do when my child refuses to brush his teeth or let me brush them?

As children start developing a sense of independence, refusal to cooperate with toothbrushing is not uncommon. They are testing to see if brushing is really an activity that has to be done, or one that they can get out of. It's no different than other challenges you will face during this time, like refusing to take a bath or to get dressed, or refusing to eat certain foods.

If this happens in your home, maintain your authority — loving authority that is — and continue to be unwavering with your expectations. If you have already established a pleasant oral care routine this period may not be quite so challenging or last quite as long.

Does my baby need fluoride supplements?

That depends on your baby's risk for tooth decay and the amount of fluoride currently being ingested. For example, breast milk does not contain fluoride. If yours is an exclusively breast-fed baby over 6 months of age, you'll want to talk with your pediatric dentist about fluoride supplements. Also, infant formulas vary in the amount of fluoride in them depending on the type: ready-to-feed or mixed with water.

So, if your older baby's formula is prepared with well water or city water that does not contain fluoride, your pediatric dentist may recommend fluoride supplements. The popularity of bottled and filtered waters means that many babies and young children are not getting enough fluoride during a time when they need it most. If your family uses bottled or filtered water, talk with your pediatrician or pediatric dentist about the need for additional sources of fluoride.

Can too much fluoride be harmful?

Fluorosis, a discoloration of the teeth ranging from white specks to brown stains, can occur when fluoride is consumed in excessive amounts. The greatest risk for fluorosis is between 2 and 3 years of age, when developing permanent teeth are still under the gums.

To prevent excessive fluoride ingestion, only use a thin smear of toothpaste on your child's toothbrush. Over-the-counter fluoride mouthrinses are not recommended for children under the age of 6.

What should I expect when my child is teething?

Symptoms of teething are usually seen four days before a tooth erupts, the day of eruption, and the following three days. They include: increased biting, drooling, sucking, gum rubbing, facial rash, decreased appetite, irritability, wakefulness, ear rubbing, and mild temperature elevation. Teething rings, cold washcloth to bite on, massaging the gums, increased fluid consumption, and non-aspirin analgesics may help comfort your child during teething.

Symptoms of a potentially serious illness, such as a high or persistent fever, should not be attributed to teething. Call your pediatrician if your baby is experiencing these symptoms.

How can I help my child with special healthcare needs maintain oral health?

Starting oral healthcare early is particularly important for children with special healthcare needs and/or disabilities because they may be at greater risk for oral disease. A pediatric dentist has additional training in treating children with special needs.

When should my child visit the dentist?

Begin establishing a relationship with a pediatric dentist soon after the eruption of your baby's first tooth, but no later than 12 months of age. This is important because you'll want your child's first experience with the dentist to be during a calm, friendly visit rather than during an emergency that could be painful or traumatic.

What should I expect at the first dental visit?

The primary focus of your child's first dental visit is to assess your child's risk for future oral problems, such as early childhood caries. Your pediatric dentist will let you know what to expect and how to handle your child's evolving oral care needs. Based on this visit, your dentist will recommend a return visit schedule.

The examination itself is brief and usually done in the knee-to-knee position with a parent closely involved in holding the child. If your child starts to cry, try not to worry. This is a very common, normal reaction.

How do I find a dentist for my child?

Finding a dentist who treats infants and young children can sometimes be a challenge. Ask family, friends, and co-workers if they have any recommendations. The American Academy of Pediatric Dentistry offers a search tool on their web page, www.aapd.org, to locate a pediatric dentist in your area. Other possibilities include asking your child's pediatrician or calling the local dental professional society in your community.

Additional Educational Resources:
American Academy of Pediatric Dentistry (AAPD), www.aapd.org,
American Dental Association (ADA), www.ADA.org,
American Academy of Pediatrics (AAP), www.apd.org

Questions to Ask Your Dentist

- Is the development and eruption of my child's teeth normal?
- Is my child receiving an adequate amount of fluoride?
- Is the pacifier (or thumb) sucking affecting my child's mouth?
- What are some oral health care products that you recommend for the care of my child's mouth at home?
- If plaque build-up on my child's teeth was noted, what recommendation do you have for removing the plaque at home?
- How often does my child need to come to the dentist for check-ups?



6+ months

EARLY ORAL CARE



TOOTH BRUSH SET

TEACH ME



Item number: 344

• Long handled brush for hands-on learning

• AAPD reviewed, 10-pg. comprehensive booklet on early dental care

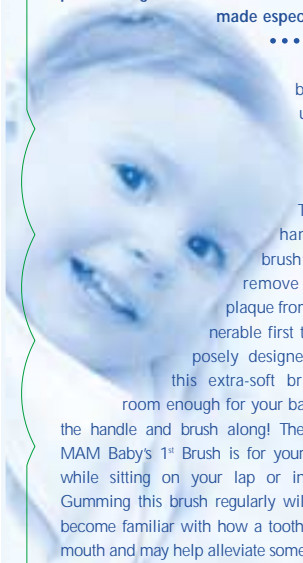


by MASSAGING GUM Sassy



CONGRATULATIONS

Whether at your health care provider's suggestion, or due to your own good sense, you have taken an important step in your baby's oral care — purchasing a MAM Teach Me Toothbrush Set made especially for infants.



The MAM toothbrush system is unique because it is not just one, but two infant toothbrushes. The first, a long-handled "caregiver brush", lets you gently remove cavity-causing plaque from your baby's vulnerable first teeth. We've purposely designed the handle of this extra-soft bristle brush with room enough for your baby to grasp on to the handle and brush along! The second, smaller MAM Baby's 1st Brush is for your baby to explore while sitting on your lap or in an infant seat. Gummying this brush regularly will help your baby become familiar with how a toothbrush feels in the mouth and may help alleviate some of the discomfort of teething.

Accidents can happen, however. So adult supervision is always required whenever your child is using any toothbrush.

Make regular toothbrushing a natural part of your young child's lifestyle early on — just as eating certain foods, wearing certain clothes, and playing with certain toys all are. This booklet tells you why and contains valuable information that will show you how. For more detailed information, visit our website at www.mambrush.com.

Good Oral Health Begins ...

... with Your Baby's First Toothy Grin

Regular toothbrushing becomes important with the appearance of your baby's first tooth. As soon as that tooth breaks through the gumline, it becomes a target for decay-causing bacteria and needs to be cleaned regularly.

Bacteria + Carbohydrates = Tooth Decay

Tooth decay is actually the result of a bacterial infection.

The infection begins when bacteria that normally live in our mouths feed on sugars from the foods that we eat and beverages we drink. After digesting these sugars, the bacteria produce an acid that breaks down the tooth enamel causing it to lose its hardness. Over time this process can produce a hole in the tooth, otherwise known as a cavity.

Brushing Breaks the Cycle of Decay

Plaque is a sticky "biofilm" of decay-causing bacteria and living germs that adheres to the tooth enamel. Each time you brush, you disturb this biofilm and break up the cycle of decay.

Tooth decay is one of the most common — and readily preventable diseases in childhood. Sadly, many children needlessly suffer from its effects, which include pain, difficulty eating, speech problems, and an unattractive appearance.

Baby Bottle Tooth Decay

A bottle at bedtime may help comfort your baby to sleep, but it also allows sugars to pool around the teeth, increasing the risk for tooth decay. If your child enjoys having a bottle of milk, formula, or juice at bedtime, break the habit by gradually replacing one ounce of the drink with water each night. This subtle change should make the transition

easier on your baby. "Baby bottle tooth decay" is also seen in children who have continuous access to tippy-cups filled with juice, milk and soft drinks. Limit these sweet beverages to mealtimes — offer water in tippy-cups during daily activities and play instead.

Nursing Caries

Older babies and young toddlers who are breast-fed frequently and for long periods of time can also develop tooth decay similar to that found in baby bottle tooth decay. If you decide to nurse after the first year, be sure to take extra good care of your older baby's teeth.

"He gets that from his mother ..."

Did you know that tooth decay-causing bacteria is usually passed on early in life from a mother to her baby? It's true.

It happens during activities that involve an exchange of saliva, such as: kissing, sharing eating utensils, transferring food from mother's to child's mouth, and sharing toothbrushes. The bacteria are passed less often between father and child, though researchers aren't sure exactly why.

Just think of it as "brushing for two"!

Mothers with high levels of bacteria and untreated tooth decay are more likely to pass along decay-causing bacteria to their children. Be sure to make time for your own oral health care, too.

Warning Signs of Early Childhood Caries

White spots on your child's front teeth near the gumline are a sign of early childhood tooth decay. The spots develop when minerals that make the teeth strong and hard — such as calcium and fluo-

ride — are lost from the teeth. If identified early, the white spots can be "remineralized", which will prevent a cavity from forming. If you notice any changes at all in the color of your child's teeth, see your pediatric dentist for an evaluation as soon as possible.

Pediatricians and pediatric dentists recommend gradually weaning from the bottle to a cup around 10 months of age. Children should be off the bottle completely by one year of age.

Healthy Gums are Important, Too!

Sometimes your baby's gums may bleed a little bit when you brush them. Don't worry. Gently continue, using a soft-bristled toothbrush, carefully angling the toothbrush bristles toward the gums. When the plaque near the gumline is removed consistently, the gums will stop bleeding, and turn pink and firm — sure signs of healthy gums.

Sometimes, "Not Sharing Is Caring"

Family members should not share toothbrushes because this can spread many kinds of infections, including decay-causing bacteria.

Replace toothbrushes every two months or after a communicable infection, such as strep throat. A run through the dishwasher can also sanitize infected brushes. After using, store toothbrushes where they can air dry to help reduce the number of bacteria harbored in them. Keeping your family's toothbrushes clean is particularly important if your child is susceptible to frequent infections.



Your Questions Answered ...

Why Start Brushing So Early?

It's important to start good oral health care early for at least **three important reasons:**

First, children infected with decay-causing bacteria early in life are at greater risk for high levels of tooth decay by 4 years of age.

Second, children with tooth decay in their baby teeth are at a greater risk for developing tooth decay in their permanent teeth.

And, **third**, learning to brush can be easier with a receptive baby than it is with an independent toddler.

What type of toothbrush is best for my baby?

Encourage good cleaning habits early on with a toothbrush made especially for cleaning an infant's teeth.

For example, since gum tissue is thin during the first years of life, choose a brush with soft bristles and a small, cushioned head to help prevent injuries while brushing. The brush should also be comfortable for you to hold and easy to maneuver in your baby's mouth — because you will be doing most of the "real" brushing until your child reaches schoolage.

A second, child-size toothbrush is also a good idea because young children learn by imitating their parents. Look for an infant's toothbrush that has a wide handle that is easy to grasp.

Do I need to floss my baby's teeth?

Flossing between teeth really isn't necessary unless they come in contact with one another. Your pediatric dentist will tell you when it's time to add flossing to your child's oral care routine.

How often should I clean my baby's mouth?

Your baby's mouth should be cleaned at least twice a day, preferably at night and in the morning. Before bed is particularly important because saliva flow decreases while we sleep. If carbohydrates are left on the teeth for bacteria to feed on overnight, you will have created the ideal conditions for tooth decay.

How can I get inside my baby's mouth to brush his teeth?

Good question. Start by laying your baby down on your lap or changing table with his head tilted back a bit. Now, instead of trying to come directly from the front, approach his mouth with the toothbrush from behind. (It's an old dentist trick!) If needed, gently place a finger between the gum pads to help hold your baby's mouth open. A picture's worth a thousand words. So visit our website (www.mambrush.com) to download a short video demonstration.

Toothbrushing should be supervised by an adult. Do not let your young child walk or crawl around with a toothbrush hanging from his mouth. Accidents resulting from young children falling with toothbrushes in their mouths can be quite severe.

