

DENTISTRY FOR PREGNANT WOMEN IS THE NEXT STEP

Despite the incredible advances that have been made in dentistry in the past years, preventive dentistry still seems to be a secondary priority. Rather than primarily focusing on treating oral diseases such as dental caries and periodontitis, prevention should be emphasized as indispensable.¹ Thus, good general and oral health begins when the future mother, still pregnant, strives to remain healthy, so that she can receive her baby with health and habits of life that lead to good health – extended to the whole family, since the excellent moment in which the family are opened to receive information. Therefore, a dental prenatal is extremely important and should be stimulated among pregnant women, either for their own care or to receive guidance for their babies.

According to the literature, the need of dental care for pregnant women as an integral component of the prenatal care program remains to be an important issue. Although a non-robust evidence was found, there are the hypothesis of periodontitis as an independent risk factor of preterm birth and preeclampsia.^{2,3} Adverse birth outcomes are traumatic, since preterm birth is the second leading cause of death in children under five; and, preeclampsia, a maternal multi-organ disease that clinically manifests in the second half of pregnancy with the appearance of hypertension and proteinuria, is one of the leading causes of maternal morbidity and mortality in the Western world.³

Oral health of pregnant women is considered almost always unsatisfactory, particularly among those of low socioeconomic status.⁴ Despite that, generally they are often eager for information on the best care for their future babies. We know that early childhood caries (ECC) is a major global public health issue, which affects 5–94 % of 1- to 5-year-old children worldwide, who suffer from dental pain, and difficulties with eating, speaking and socializing,⁴ therefore pregnant women need to be educated regarding the possible impact of ECC on the quality of life of their babies and family. Thus, pregnant woman is a key person in preventing dental decay in infants.

Dentists should pay special attention to the pregnant woman, implementing a prenatal dental program in their area of work, encouraging and guiding these women about their own oral hygiene and of their future baby, for the prevention of diseases.

REFERENCES:

1 – WHO. World Health Organization. Oral Health. Information sheet April 2012. www.who.int/oral_health/publications/factsheet/en/. Acesso em 4 de setembro de 2018.

2 - Sgolastra F, Petrucci A, Severino M, Gatto R, Monaco A. Relationship between periodontitis and pre-eclampsia: a meta-analysis. *PLoS One*. 2013 Aug 19;8(8):e71387. doi: 10.1371/journal.pone.0071387.

3 - Iheozor-Ejiofor Z, Middleton P, Esposito M, Glenny AM.

Treating periodontal disease for preventing adverse birth outcomes in pregnant women. *Cochrane Database Syst Rev*. 2017 Jun 12;6:CD005297. doi: 10.1002/14651858.CD005297.pub3.

4 - Wagner Y, Heinrich-Weltzien R. Midwives' oral health recommendations for pregnant women, infants and young children: results of a nationwide survey in

Germany. *BMC Oral Health*. 2016 Mar 18;16:36. doi: 10.1186/s12903-016-0192-1.

Andréa Fonseca-Gonçalves

Adjunct professor of the Department of Pediatric Dentistry and Orthodontics, School of Dentistry, Universidade Federal do Rio de Janeiro, UFRJ.

E-mail: andrea.goncalves@odonto.ufrj.br

Phone: (21) 3938-2101