

Training manual on Oral Health Promotion for **SCHOOL TEACHERS**

National Oral Health Programme

Ministry of Health and Family Welfare
Government of India

शरीरमाद्यं खलु धर्मसाधनम्

Conceptualised and Developed by:

Centre for Dental Education and Research

WHO-Collaborating Centre for Oral Health Promotion

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BACKGROUND

Education and health go hand in hand. Children need to be healthy to learn and be fit for school. India has too many children who suffer from everyday ailments that limit them from attending schools regularly. Dental diseases, diarrhoea and worm infestations are commonplace among young children of school going age. Tooth aches have a huge impact on the quality of life of children and their ability to learn. Even the best education system cannot guarantee high academic performance if their health is compromised. Tooth aches contribute to loss of school hours and absenteeism.

Good hygiene is the key at school level. Many of these ailments are preventable by some simple, scientifically proven interventions which greatly prevent their occurrence. Among these is tooth brushing, recognised as the single most effective way of preventing tooth decay, by the World Health Organisation and FDI World Dental Federation. Cost effective interventions like tooth brushing in a school can be implemented on a mass scale in collaboration with schools and school teachers.

School is the second home for most children and training school teachers is a widely tested way to implement school level interventions. The National Oral Health Programme has been launched to prevent, control and manage effectively, the burden of oral diseases in India. This comprehensive programme aims to make oral health services accessible, affordable and sustainable with onus on oral health promotion and disease prevention, transforming the way people think about oral health. Training teachers and other significant groups of the civil society is an important component of this programme.

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The role of teachers is especially vital for the success of this initiative since the school is often the only environment that is equipped with the resources to expose children to healthy practices. This manual attempts to equip teachers with knowledge on common dental problems that occur in childhood and the skills to educate children as well as their parents on the ways to prevent these.

It is a hope that with the help of this manual, teachers would reinstate their commitment to the programme and ensure that these interventions are correctly practiced by their students and become lifelong, healthy habits.



सत्यमेव जयते

National Oral Health Programme (NOHP)
Ministry of Health and Family Welfare



जगत प्रकाश नड्डा
Jagat Prakash Nadda



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MESSAGE

The National Oral Health Programme (NOHP) aims to provide accessible, affordable and quality oral healthcare services to all citizens. The programme, while strengthening the service delivery component of oral health, also focuses on creating awareness around the importance of prevention and control of oral diseases.

I am delighted to release such an informative and practical manual on Oral Health Promotion for School Teachers. Maintaining good oral health is one of the basic fundamentals of good overall health – maintaining a clean and healthy mouth, consuming a balanced diet and avoiding the use of tobacco products.

Inadequate awareness about oral health, school children invariably suffer from dental problems like dental caries, gum disease and irregular alignment of teeth. Through dissemination of the information, the school teachers will be equipped with all the tools and knowledge of assessing students' oral health and hygiene.

This manual on oral health has been developed through multi-sectoral collaboration which include school children and their teachers, the department of education, the department of health and national oral health centers such as CDER, AIIMS, New Delhi. This manual can help inculcate some of the best practices in oral health promotion among school children across the country.

Adoption and dissemination of knowledge and procedure prescribed in the manual for school teachers can usher into improvement of oral health and thereby overall health of the children across the country.

(Jagat Prakash Nadda)

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I/3144189/2018
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Message

The Ministry of Health & Family Welfare showed its commitment to improving the oral health status of the country by introducing the National Oral Health Programme in the 12th Five Year Plan. Slowly and steadily the programme has been playing an integral part in strengthening the public health care delivery system in India.

With its focus on generating awareness around oral health at the grassroots level of the community, the programme is introducing this manual on Oral Health Promotion for School Teachers. Equipped with the information in this manual, school teachers will be empowered with not just the knowledge of most common oral diseases but also the ability to identify and manage them in their students. This manual will empower them to identify lifestyle risk factors that could result in a child developing oral diseases, such as use of tobacco products or consumption of a diet high in sugar. Educating a child is the first step towards educating the parents, other family members and community members.

This manual will assist the programme in taking a giant leap towards educating the community in oral health and hygiene. With that, I wish the National Oral Health Programme and all its technical partners great success in all its future endeavors.



(Anupriya Patel)

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सत्यमेव जयते

सर्वेसन्तु निरामया



एक कदम स्वच्छता की ओर

स्वास्थ्य एवं परिवार कल्याण राज्य मंत्री
भारत सरकार

MINISTER OF STATE FOR
HEALTH & FAMILY WELFARE
GOVERNMENT OF INDIA



MESSAGE

The Ministry of Health & Family Welfare is taking drastic steps for eradication of communicable diseases and also focusing on prevention and management of non-communicable diseases. Holistic measures to improve the health outcomes of India's citizens are being taken keeping in mind that social-economic and environmental factors. An important aspect of overall health is oral health. Poor oral health can affect an individual and her/his family socially, financially and physically.

There is no denying the fact that the Children learn from community role models. I am quite hopeful that this manual on oral hygiene practices will prove a helpful tool for school teaches. Incorporating this manual into the routine curriculum or extra-curricular activities of the schools will help spread the oral health knowledge to all school children and to the society at large. I am happy to see that the national Oral Health Programme is generating such a wonderful content for generating awareness about oral health.

I hope and trust that the programme will continue to innovate, grow and heighten the much needed public awareness about the oral health.

(Ashwini Kumar Choubey)

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Government of India
Department of Health and Family Welfare
Ministry of Health & Family Welfare
Dated : 14th March, 2018

MESSAGE

India launched its National Health Policy in 2017 with a focus on strengthening the primary health care service delivery system across the country and preventing common communicable and non-communicable diseases. In line with the vision of the policy, this manual for School Teachers on Promoting Oral Health is being introduced. Good oral and dental health constitutes an important part of general health in all age groups, including and especially children.

School teachers are a central figure in every community and have the potential to greatly influence oral health practices in children and at large. This manual will equip school teachers with knowledge about the common oral diseases. By acting upon this knowledge, school teachers can not only become role models in maintaining good oral hygiene themselves but can also further spread that knowledge to all her/his students.

The pictures and activities in the manual not only add to the visual appeal of the manual but also make the information easy to understand for school children of all ages. Suggested games and role play activities will make learning a fun experience for children, all the while inculcating excellent oral hygiene practices for life. I wish the National Oral Health Programme great success in all its wonderful endeavors.

P. Sudan
(Preeti Sudan)

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Foreword

This manual for School Teachers on Promoting Oral Health is a great addition to the existing diverse Information, Education and Communication/ Behavior Change Communication materials developed under the National Oral Health Programme.

It provides actionable information for early detection and management of common oral and dental diseases in children including gingivitis and dental caries. It also informs on simple, easy-to-adopt, preventive practices like proper and regular tooth brushing, a healthy diet and development of mouth rinsing habit after every meal. These practices have the potential to prevent most commonly occurring oral diseases in children.

School, a second home for most children is often the only place equipped with resources to inculcate in children healthy practices which can transform into lifelong healthy habits. School teachers can play a vital role in promoting oral health in young children and as an extension, their parents and the community at large. Such interventions have the potential to drastically reduce the requirement of leave from schools by students because of early intervention, indirectly aiding improved academic performance.

I hope that through a joint effort the States, schools and associated Government organizations will enlighten the young generation about the importance of oral health, leading to a disease free future.


(Dr. B.D. Athani)

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SCHOOL: AN IDEAL PLACE TO PROMOTE ORAL HEALTH

- About 250 million children go to school everyday. A substantial number of school hours are lost citing tooth ache due to dental decay. Teachers like you all, are deputed at various places spanning across our country.
- Among the diseases that are commonly seen in school going children, dental diseases constitute a significant burden.
- Promoting oral health awareness among children and their parents through **you** helps in preventing most of these dental problems.
- **You** hold a key responsibility in educating the children and contributing to prevention.
- “Catch them young” is an interesting idiom that applies here and this manual will equip all of **you** with skills to not only educate but also detect these common dental problems at the earliest possible stage.

Flip through the next few pages for more information-

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YOUR ROLE AS TEACHERS

- Any child's first interaction with the world apart from the family is in the school which slowly turns into a second home.
- You get to spend a significant time with children and there is an instant trust in your instruction.
- You connect children and their parents to the health care providers.
- You can make a great difference by educating children about effective oral hygiene measures and by constantly motivating them.

Objectives of Training

After reading this manual, you will know

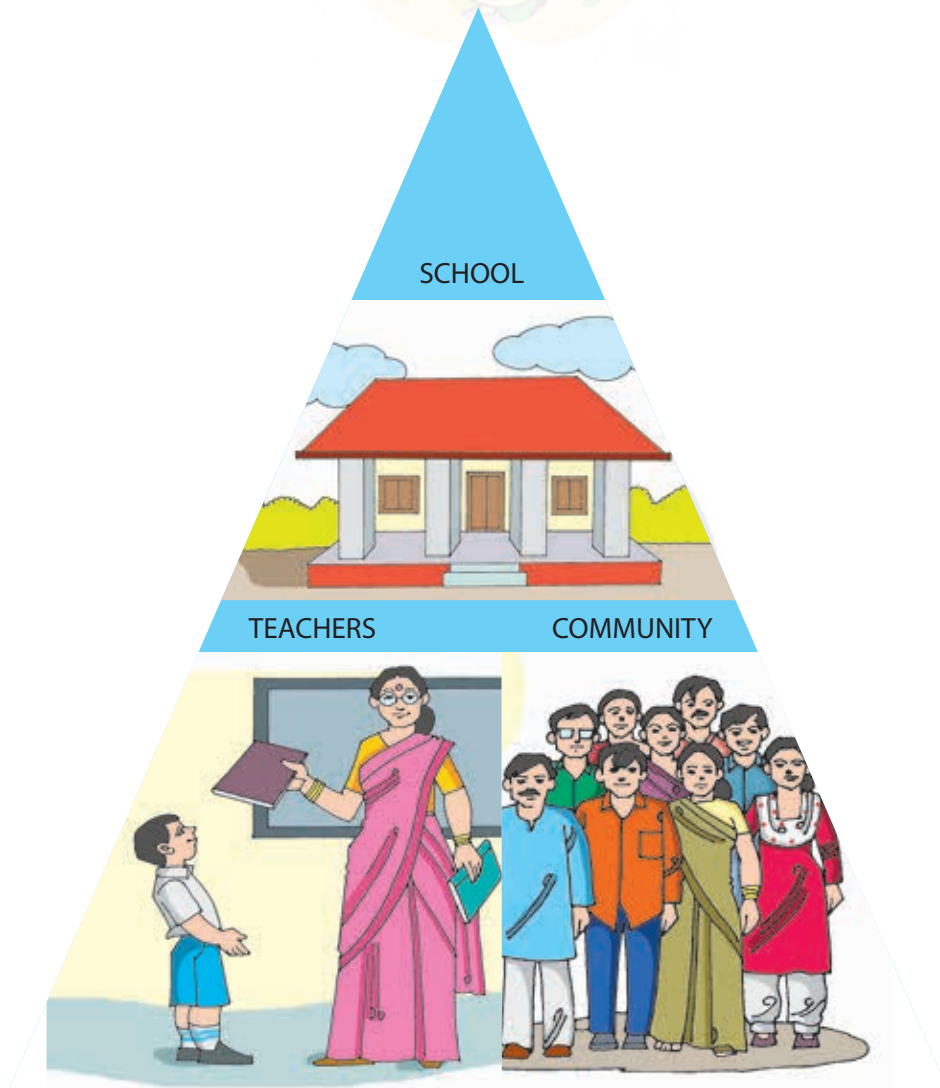
1. Features of healthy teeth and gums
2. Signs and symptoms of common oral diseases seen in children.
3. Prevention of the common dental diseases.
4. Management of common dental emergencies
5. Points for referral

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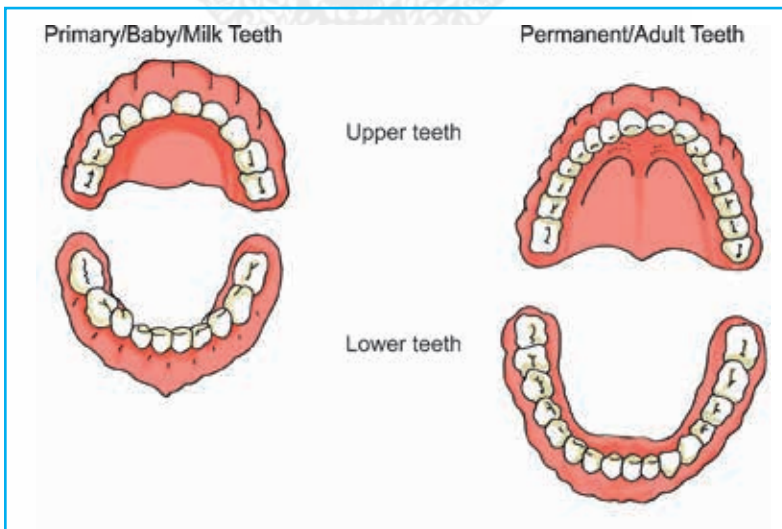
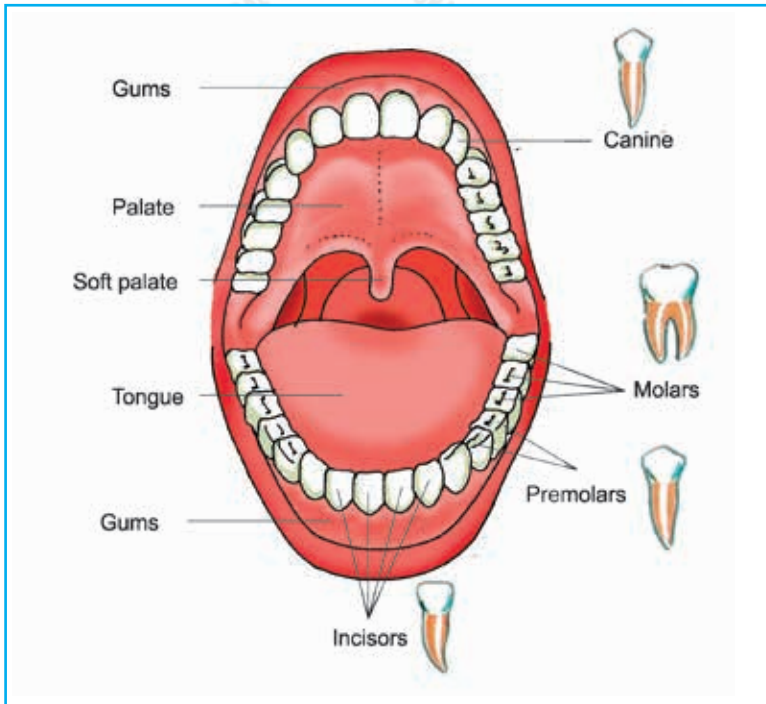
INTEGRATED SCHOOL COMMUNITY

YOU, the teachers play a central role to both the school as well as neighbouring community. Promoting healthy habits among children in your school will translate to change at their homes and ultimately bring about tangible community transformation.



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Healthy Mouth



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WHAT'S IN THE MOUTH?

The mouth leads to the oral cavity. The oral cavity has teeth, gums and the following parts

Tongue

The tongue is a freely movable muscular organ present in the oral cavity. It aids in taste, speech, chewing and swallowing. The upper surface of the tongue has projections called papillae which bear taste buds.

Palate

The roof of the mouth is formed by the palate. The bony part of the palate is called hard palate and behind the hard palate is the soft palate.

Cheek

The mouth/oral cavity is bound by the upper and the lower lip and the inner side is the cheek. The oral cavity is lined by a specialized layer of the skin called mucosa.

Teeth

- Teeth are vital structures of the body with a definite blood and nerve supply
- Humans have two sets of teeth
 - Milk teeth/ Baby teeth/ Primary teeth
 - Adult teeth/ Permanent teeth
- The first to appear are Milk Teeth and are helpful to the child not only for chewing but also in providing guidance to the developing jaw and permanent teeth.

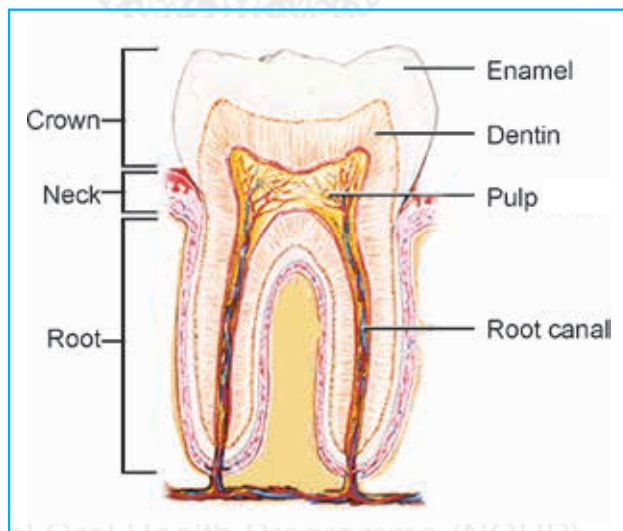
There are four different types of teeth in human beings.

1. **Incisors:** They are the front teeth, four in the upper arch and four in the lower arch. They are shaped to bite and cut food into small pieces
2. **Canines:** They are conical teeth at the corner of the mouth. Their function is to tear or shred food.
3. **Premolars:** These are two on each side of both the jaws just behind the canines. The function of these teeth is to hold and crush the food. Premolars are present only in adults.
4. **Molars:** They are three in number on each side of the jaws and have bigger chewing surfaces for cutting food into smaller particles.

There are two incisors, one canine, two pre-molars and three molars making eight teeth in each half of the jaw and a total of **thirty-two teeth** in permanent dentition

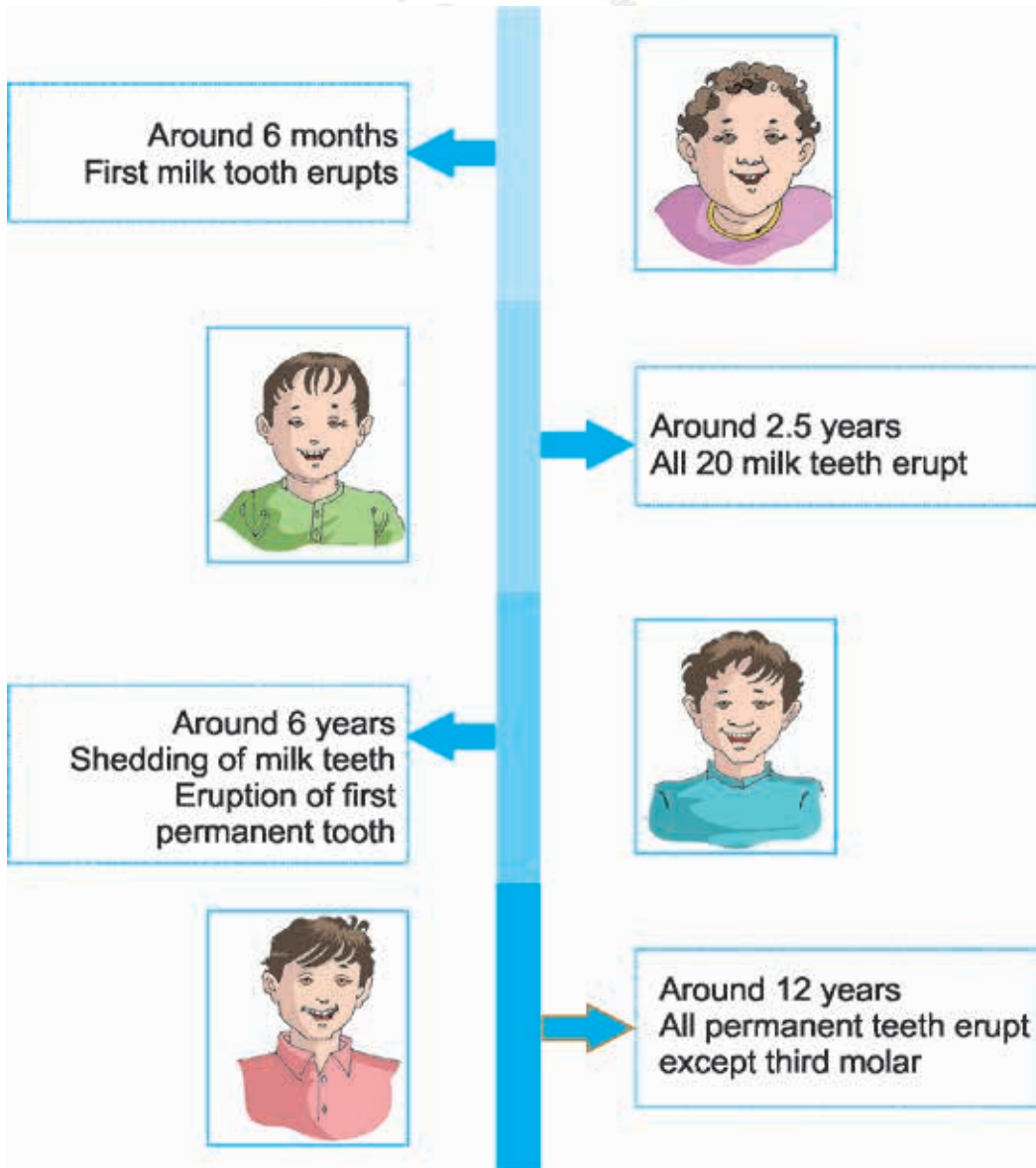
Parts of Teeth

- The pearly white visible part of the tooth is the **crown** and the longer portion anchored inside the gum and the bone is the **root**.
- The outermost hardest white cover is known as the **enamel**. The inner relatively less hard part is the **dentin**. It surrounds the **pulp** containing blood vessels and nerves of the tooth.



Parts of a tooth

Sequence of Tooth Eruption



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Healthy gums

- Teeth are embedded in the jawbone which is covered from outside by a specialised layer of the skin, called the Gums / Gingiva.
- Healthy gums are generally pink in colour
- They are firmly attached to the underlying bone.



Healthy teeth and gums
in a child



Healthy teeth and gums in
an adult mouth

Do You Remember

1. What are the different parts of the tooth?
2. List the 4 types of teeth seen in human beings.
3. How many sets of teeth do humans have? Can you name them?
4. How many permanent teeth do humans have?
5. What is gingiva?
6. When does the first tooth come out in a child?

COMMON ORAL DISEASES SEEN IN CHILDREN

Dental decay

- Tooth decay is the most common disease affecting children.
- Dental Decay is also called Dental Caries
- Tooth decay appears as a brown or black discolouration on the tooth, which on progression leads to formation of cavity. Tooth decay affects baby and adult teeth .

Signs:

- Brownish/black discoloration
- Hole / cavity on the tooth or in between two teeth
- Broken tooth
- Tooth pain on touch
- If left unnoticed, complications like
 - Pus discharge
 - Swelling



Black discoloration

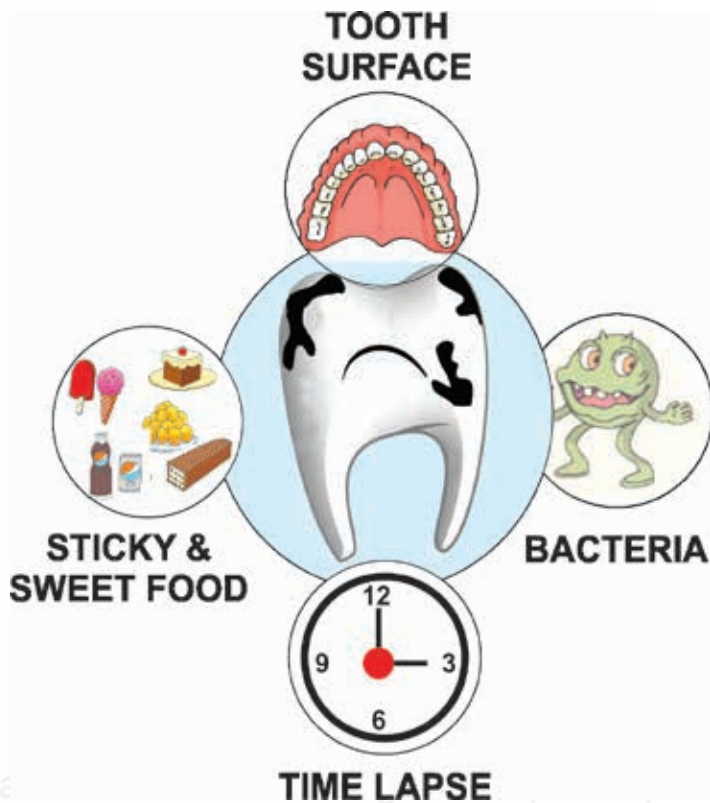
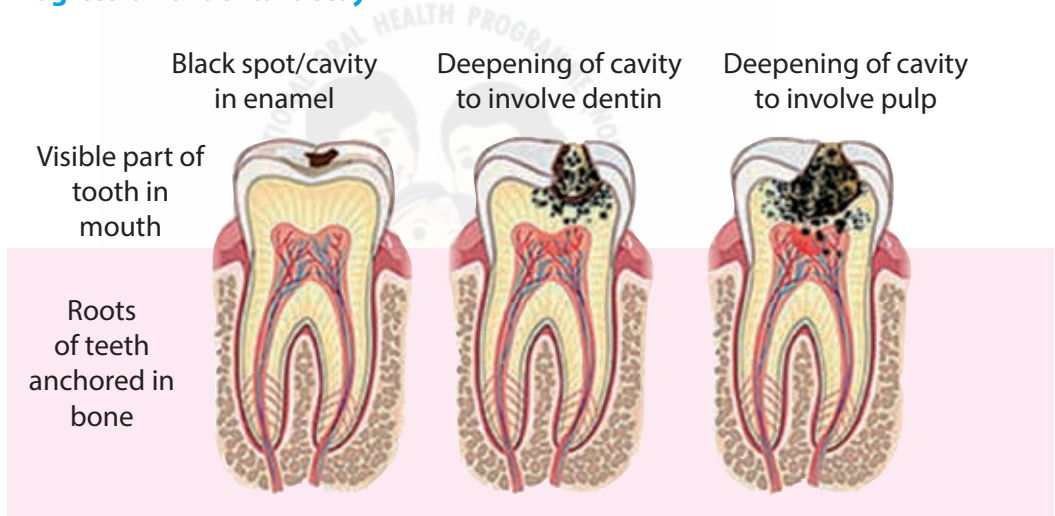
Black
discoloration



Cavity

Hole/cavity in between
two milk teeth

Progression of dental decay



Na
Ministry of Health and Family Welfare

Causes

Bacteria

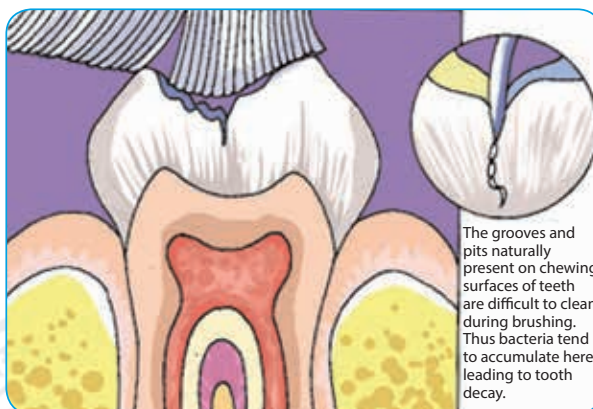
Bacteria are very small organisms not visible to naked eye. Normally present in the oral cavity of every individual. These bacteria live in a slimy, transparent layer on tooth as Dental Plaque.

Plaque is normally not visible on tooth surface.

Tooth surface

The grooves, pits and fissures naturally present on chewing surfaces of teeth are difficult to clean. Bacteria tend to accumulate here leading to tooth decay.

Decay may also occur if food is left between two teeth for a long time.



Time lapse

If food is left in the mouth for a long time, bacteria tend to accumulate, release acids and thus lead to decay.

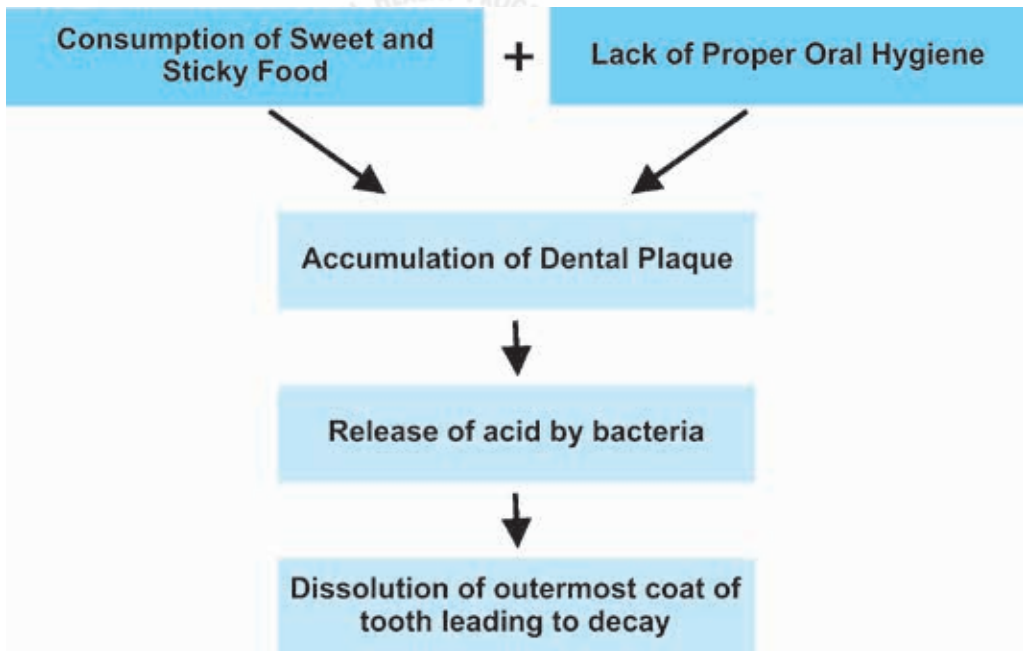
Sweet and sticky food

Consumption of sweet and sticky food like toffees, chocolates, cakes, biscuits frequently and in-between meals leads to decay.

Symptoms:

- Pain on chewing on that particular side
- Food lodgement on or in between the teeth
- Sensitivity on consuming hot/cold food
- Swelling, referred pain, severe discomfort and associated fever on leaving the decay untreated for a long time

Process of Dental Decay



Nursing Bottle Decay/Early Childhood Decay

- It is seen in babies on bottle feed.
- Involves rapid destruction of multiple teeth
- Most commonly affects upper front and lower back teeth.
- Lower front teeth are spared as they are covered by the tongue during feeding.



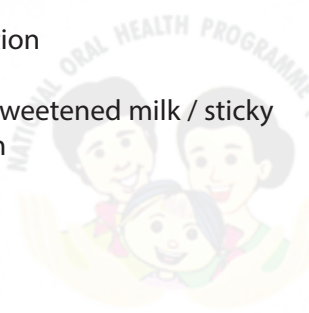
Avoid letting baby sleep with sweet nipple or bottle in the mouth

Signs

- Brownish black discoloration
- Broken upper front teeth
- Continuous presence of sweetened milk / sticky / sweet food in the mouth

Symptoms:

- Early loss of milk teeth
- Difficulty in eating
- Pain and dental abscess
- Unpleasant appearance



Nursing Bottle Decay

Your role		
Do	Advise to children:	Advise to parents:
<ul style="list-style-type: none">■ Identify the black spot/ discoloration/ pain/ pus discharge.■ Note in the children's record and inform the parent.	<ul style="list-style-type: none">■ Rinsing mouth thoroughly with water after every meal / snack■ Brush teeth twice a day■ Avoid sticky foods and sweetened beverages■ Avoid picking teeth using any objects	<ul style="list-style-type: none">■ Give medication to the child only on a dentist's prescription■ Avoid placing camphor/ tobacco / petroleum products/ pain balm/ salt at the site of pain in the child's mouth■ Avoid application of heat / any pain relief cream in the area of pain either externally or in the child's mouth

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Gum Diseases

Early stage of gum disease is called **Gingivitis**

Signs and Symptoms

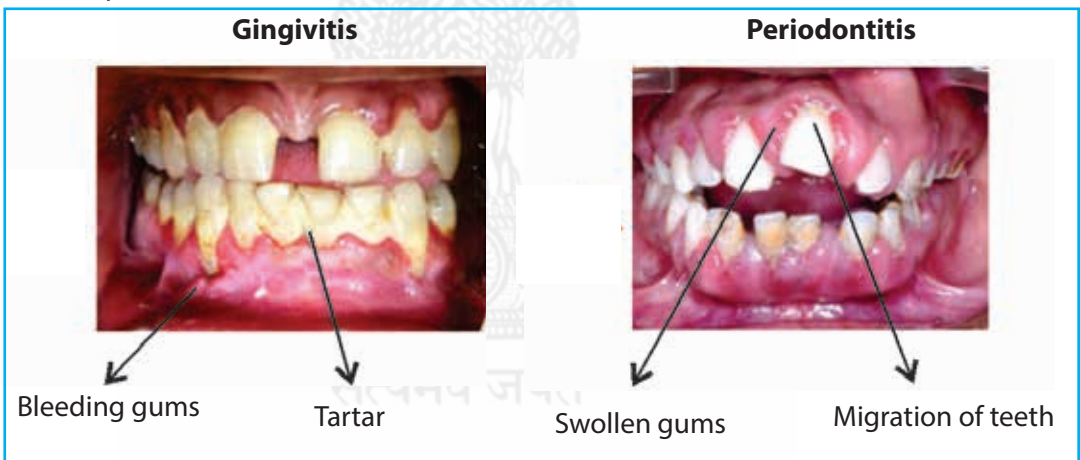
- Foul odour from the mouth/bad breath
- Deposits on teeth
- Bleeding gums
- Swollen gums

Progression

If Gingivitis is not treated, it may progress to a severe stage of the disease known as **Periodontitis**. It is also called Pyorrhea.

Signs and Symptoms

- Dull constant ache
- Bleeding from gums
- Food lodgement
- Loose teeth
- Foul odour/bad breath
- Gaps between teeth



Causes

- The gum diseases are caused by poor oral hygiene plaque accumulation.
- The bacteria present in plaque form toxic substances that may cause inflammation of gums.
- If plaque is not removed regularly, it may harden to form calculus (tartar).
- The rough surface of tartar attracts further deposition of plaque and bacteria.
- This leads to progression of the disease and destruction of underlying bone



Bad Breath

Your role		
Do	Advise to children:	Advise to parents:
<ul style="list-style-type: none"> ■ Identify the bleeding gums/ bad odour/ food deposits. ■ Note in the children's record and inform the parent. 	<ul style="list-style-type: none"> ■ Tooth brushing twice daily ■ Rinse mouth with water ■ Avoid picking teeth using any objects 	<ul style="list-style-type: none"> ■ Take the child to the dentist

Irregular alignment of teeth / jaw (Malocclusion)

Any deviation from the normal alignment of teeth and / or upper / lower jaw. It may compromise the appearance or the functions like speech and chewing.

Signs

- Abnormally forward or backward teeth / jaw
- Gaps between the teeth
- Uneven crowded teeth
- Cross bite / reverse bite
- Asymmetry of face
- Pain in the joint between upper and lower jaw

Symptoms

- Difficulty in pursing lips
- Unpleasant appearance
- Difficulty in keeping teeth clean because they are crooked

Causes

- Early loss of milk teeth due to dental decay.
- Oral habits causing abnormal pressure on teeth and surrounding structures such as thumb and finger sucking, tongue thrusting, mouth breathing, nail biting



Forwardly placed teeth



Irregular alignment of teeth



Effects of Malocclusion

- Appearance
- Low on confidence and self-esteem
- Increased chances of dental decay and gum problems
- Teeth that are abnormally forward may get injured easily



Thumb sucking habit

Cleft Lip/ Palate

A split in the lip or the roof of the mouth seen at birth is called cleft.

Signs and Symptoms

- Split lip/ palate or both
- Feeding, swallowing and speech difficulty
- Unpleasant appearance of the face



Nail biting habit



A split in the lip



Child with Cleft Lip & Palate



Your role	
Do	Advise to children
Identify habits	Encourage the children to stop deleterious oral habits

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Trauma to the teeth and face

Teeth and face may get injured easily in childhood during

- Playing/cycling/running
- Physical violence
- Sports injuries
- Falls

It may occur at home/schools/ playgrounds or anywhere else.

Signs:

- Broken tooth/ knocked out tooth
- Bleeding
- Wounded and swollen lips
- Back teeth not meeting

Symptoms:

- Pain
- Bleeding
- Numbness
- Progressive reduction in mouth opening after trauma



Broken upper front teeth



Knocked out/avulsed tooth

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Your role		
Do	Dont's:	Advise:
<ul style="list-style-type: none"> ■ Arrest bleeding with pressure/ cold pack ■ Save the knocked out tooth/ broken tooth fragment and place it in milk/ water/ tender coconut water ■ Refer to the nearest dentist within one hour ■ If the injury involves face/ head, refer to the nearest health facility immediately. 	<ul style="list-style-type: none"> ■ Do not rub /scrub the tooth ■ Do not wrap the tooth in a soiled cloth ■ Do not leave the tooth dry ■ Do not throw the tooth or the broken fragment 	<ul style="list-style-type: none"> ■ Promoting safe environments for preventing trauma



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Dental Fluorosis

Presence of brownish yellow spots or roughened surface on the teeth due to high amount of fluoride in drinking water supply is called dental fluorosis.

In severe form, fluoride may get deposited in the bones. This is known as skeletal fluorosis.

Signs:

- Chalky white teeth
- Brownish yellow stains
- Pitting



Your role

Do

Identify the condition and write in child's record

Do You Remember

1. What is a cavity?
2. What is dental plaque?
3. What is nursing bottle decay?
4. What is periodontitis?
5. What will happen if gum diseases are not treated in time?
6. What are the ill effects of crooked teeth?
7. What is cleft lip and cleft palate?
8. When should a patient with dental trauma report to the a dentist?

PREVENTION IS BETTER THAN CURE

At school level

School teachers should ensure these practices are followed by the parents and this can be done during the Parent Teacher Meetings.

Parents play a crucial role in maintaining the oral health of children. Parents need to advocate tooth brushing and mouth rinsing habits in school children. This begins when the first tooth erupts. Parents also need to reinforce about regular dental check up. This makes the child get used to visiting the dentist.

In addition, teachers may –

- Organize a monthly class on oral health.
- Discuss child's oral health in parent teacher meeting.
- Integrate mid day meal, hand washing and mouth rinsing everyday.
- Integrate annual deworming day with mass tooth brushing at school.
- Organize discussions on maintaining safe school environments.
- Facilitate annual oral health check up by a dental team.

At home care

The common dental diseases listed so far are easily preventable following simple measures at home. Some of these include

- Tooth brushing and tongue cleaning
- Mouth rinsing
- Regular self examination of the mouth
- Avoid smokeless/ smoking tobacco and betel nut in all forms

- Breaking bad oral habits
- Consumption of healthy non-cariogenic diet
- Trauma management
- Visiting a dentist regularly



Tooth brushing

- This is an important part of effective plaque control.
- Tooth brushing has to be done with toothpaste.
- A pea size amount of tooth paste and a soft bristled brush must be used
- Two types of tooth brushes – baby/ adult brush may be used according to the age.
- Milk teeth also need to be brushed and maintained in good health since this prevents premature shedding.
- The tooth brush has to be changed once in three months or when it begins to fray.
- Brushing must be done twice a day
- Massaging the gums with finger should also be advised after tooth brushing.

Brushing instructions:

1 For the outer portion of tooth surfaces, place the toothbrush at a 45° angle towards the gum margin

2 Move the brush from up to down for the upper jaw and from down to up for the lower jaw

3 To clean the inner back-tooth surfaces, use gentle down strokes with the tip of the toothbrush

4 To clean the inner front tooth surfaces, hold the brush upright and use gentle up and down strokes with the tip of the toothbrush

5 For chewing surface use gentle, short back and forth motion so that teeth are cleaned

6 From red to white

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Tongue Cleaning

- Advise on cleaning the tongue after tooth brushing.
- This has to be done with the bristles of the brush by applying gentle back and forth strokes.
- Advise on rinsing the mouth thoroughly after brushing

Mouth Rinsing

- Should be advocated as a part of routine oral hygiene
- It must be advised that consumption of sweetened beverages/ snacks and meals has to end with a thorough mouth rinse with water
- Mouthwashes can be used after consultation with dentist.



Tooth Brushing in Children



- Bring together upper and lower teeth
- Place brush on the line where the teeth meet
- Make large circular motion over teeth
- For the inside, same may be repeated with smaller circular motions.
- Brush the biting surfaces of the teeth

Regular Mouth Self Examination

- Educate about and encourage self examination of mouth.
- It is recognised as a simple way to also detect the warning signs of oral cancer
- It is described in the following picture in 7 simple steps:

MOUTH SELF EXAMINATION

BUCCAL MUCOSA



RIGHT CHEEK



LEFT CHEEK

TONGUE: LATERAL BORDER



RIGHT BORDER



LEFT BORDER

UPPER & LOWER LABIAL VESTIBULE



PALATE



FLOOR OF THE MOUTH



The following table gives a gist of early signs that should be kept in mind while examining the mouth.

Look for:

Condition	Identification points
Tooth decay	<ul style="list-style-type: none"> Black spot/discoloration of tooth Cavity / hole in the tooth Sensitivity to hot and cold, sweet and sour Food lodgement in the cavity/ between teeth Pain / swelling / pus discharge
Gum diseases	<ul style="list-style-type: none"> Foul smell Bleeding gums Deposits and discoloration of tooth Loose teeth Widening gap between teeth Swollen gums
Irregular arrangement of teeth and jaws	<ul style="list-style-type: none"> Crowding of teeth/reverse bite Protruding / Backwardly placed teeth/Inability to keep the lips closed
Abnormal growth, patch or ulcers	<ul style="list-style-type: none"> White / red patch Non healing ulcer (for more than 2 weeks) Reduced mouth opening Change in voice Lump in the neck Burning sensation Inability to eat spicy food
Cleft lip/ palate	<ul style="list-style-type: none"> Split lip / gap in the palate Inability to feed the baby
Dental Fluorosis	<ul style="list-style-type: none"> White/yellow/brown discolored patches on tooth

Quitting consumption of all forms of tobacco and betel nut

Advise all school children to not initiate tobacco consumption and to quit use of all forms of tobacco (smoke less or smoking), betel nut and any such regular chewing habit.

Inform the parent and advise consulting a dentist/doctor immediately.

The following may be used as the points for advocating brief intervention

Delay	Delay consumption of tobacco or betel nut at the time of urge/ craving
Distract/ Divert	Distract the mind / divert attention from tobacco towards other activities like-music/ reading/ meditation/ conversing with family or friends/ eat nutritious food Try consuming clove/ cardamom
Drink Water	Drink water frequently and keep the mouth wet to reduce craving for tobacco / betel nut
Deep breathe and do exercise	Perform relaxation exercises like yoga and breathing exercises. Do any physical activity like walking/ jogging / running / cycling / swimming

Breaking bad oral habits

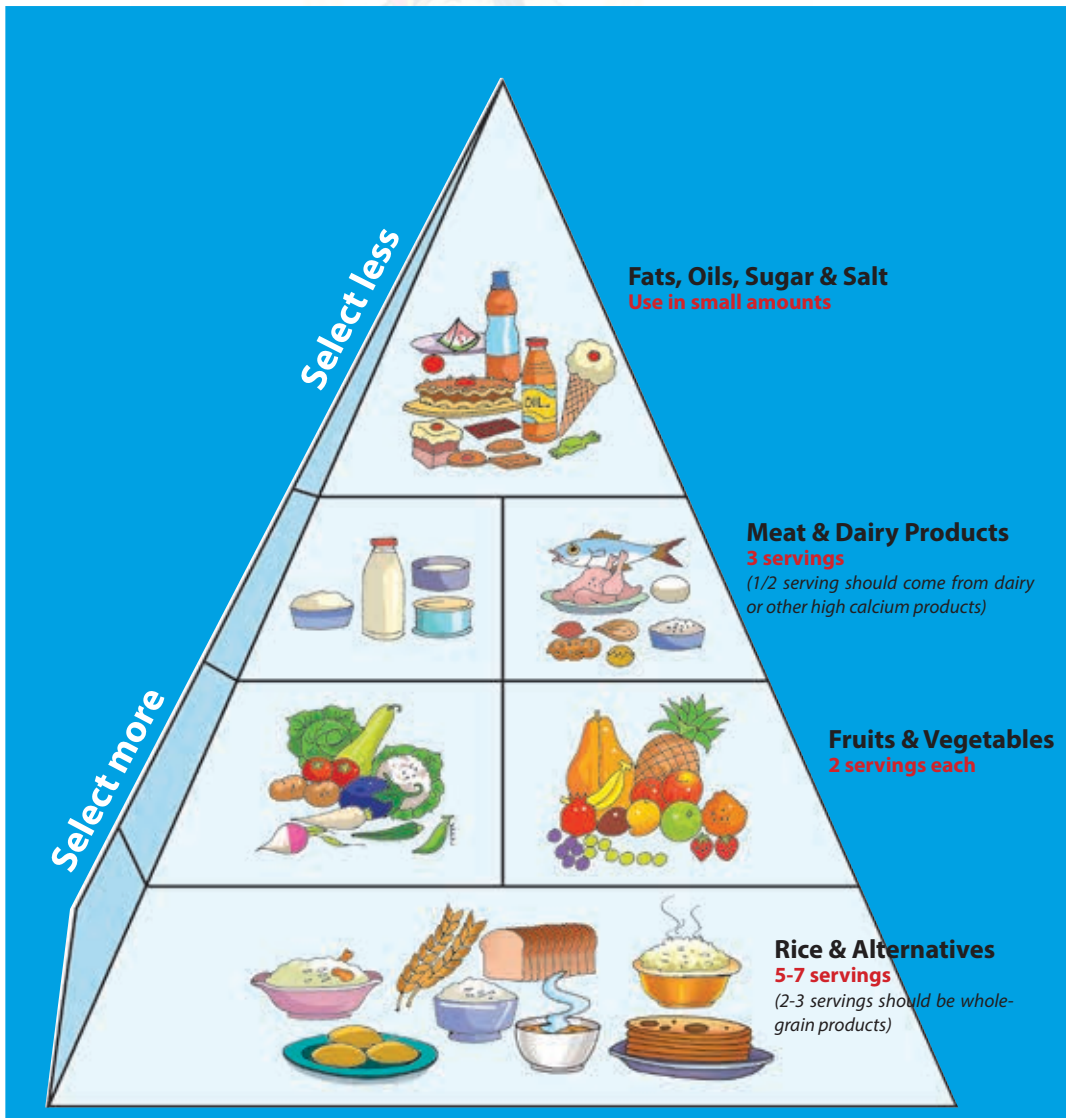
Thumb/ digit sucking-Advise to parents if habits persist beyond 4 years.

- Give enough attention, love and care to the young child.
- Advise on showing the child his/her own image in the mirror when he/she is thumb sucking/digit sucking
- Advise painting the nail with substance of bad taste/ odour which may prevent the child from sucking on the thumb / finger
- Advise on making the child wear long sleeved clothes to prevent thumb sucking while sleeping

Consumption of healthy non-cariogenic diet

A balanced diet should be recommended at all ages

- Advise on consumption of raw and fibre rich fruits and vegetables.
- Advise on avoiding sweetened beverages, soft drinks, sticky and sweet food.
- Advise on avoiding frequent snacking between major meals.



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Dental trauma management

First-aid for dental trauma to save the broken/knocked-out tooth may be given at home/school by following the steps in the infographic.

Save your tooth

Your teeth may be saved if you know what do to after any injury to the mouth

What to do if your tooth is **BROKEN**

- 1 Find the piece of tooth
- 2 The piece can be placed back
- 3 For this to be possible seek attention immediately from a Dentist

What to do if your tooth is **KNOCKED OUT**

- 1 Find the tooth
- 2 Hold it by the crown
- 3 Gently rinse to remove debris without touching the root
- 4 Never leave the tooth dry




5 FOLLOW ONE OF THESE ALTERNATIVES

- 5a Put the tooth back in its place
- 5b Place the tooth in tender coconut water/ milk/normal saline
- 5c When milk is not available place the tooth in the mouth between cheeks and gums below the tongue

- 6 Seek immediately specialized dental treatment within one hour time period

Follow these steps to manage any dental emergency:

Dental Emergencies

 <h3>Toothache</h3> <ul style="list-style-type: none">• Rinse the mouth with salt water• If there is swelling, place cold compress on your cheek, do not use heat or any form of tobacco as a remedy• Visit your dentist at the earliest to identify and seek apt treatment for your toothache	 <h3>Mouth Injury</h3> <ul style="list-style-type: none">• A - Assess the injury and reassure the child• B - Bleeding management by applying pressure gently to the injury site• C - Control Pain Use painkillers after doctors consultation• D - Dentists help	 <h3>Broken tooth / Knocked- out tooth</h3> <ul style="list-style-type: none">• Find the tooth/ piece of tooth• Preserve the piece/ tooth in milk/coconut water/your saliva• Do not leave the piece/tooth dry• The piece/tooth can be put back in place by a Dentist• Seek help from a Dentist within one hour
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Visiting a dentist

It is important to advise parents to ensure that they take their child to a dentist at least once a year for a routine dental check-up, early diagnosis and prompt treatment



Professional measures

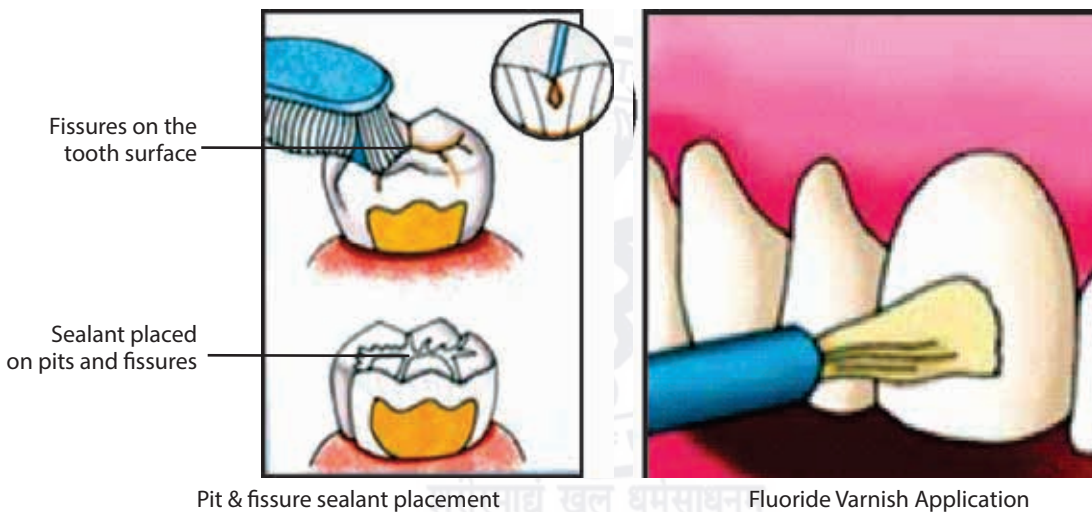
In addition to home care, below are a few procedures performed by the dentist to prevent and stop progression of common dental diseases

Prevention of dental decay

- Pit & fissure sealant placement
- Fluoride application
- Fillings
- Root Canal Treatment

Pit & fissure sealant placement

Sealant placement is a procedure that seals the fissures on chewing surfaces of teeth and prevents decay.



Fluoride Application

Fluoride varnish application is a procedure that prevents decay on smooth surface

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Fillings

Filling is a procedure where decay is removed and the tooth is filled with a filling material.



Decayed tooth



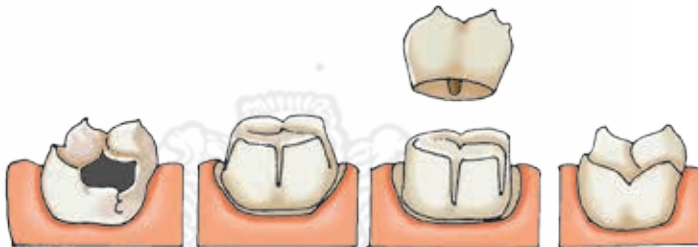
Removal of decay



Filling

Root Canal Treatment

- When the decay progresses to involve pulp, root canal treatment is done.
- It is a procedure where infected pulp, nerves and vessels of the tooth are removed and a filling material is placed.
- Later, a cap is placed on the tooth.



Placement of a cap

Prevention of gum diseases

- Dentist will advise and demonstrate proper brushing technique.
- Dentists may suggest rinsing mouth with warm salt water / chemical based mouth wash whenever applicable.
- Dentist cleans the deposits on the teeth, including calculus by using instrument called scalers. This is called scaling.
- The dentist may also suggest oral hygiene measures in specific target groups.



Scaling for removal of tartar deposits

Prevention of Irregularly aligned teeth

- Care for milk teeth
- Braces
- Appliances for restricting bad oral habits
- Cleft lip and / or palate management

Care for milk teeth

Apart from reinforcing good oral hygiene for maintaining healthy milk teeth at home, the dentist may place fluoride varnish or fluoride releasing fillings to safeguard the decayed milk teeth.

In case of premature shedding of milk teeth, the dentist may also place an appliance that maintains the space for the successor tooth

Braces

The dentist can also plan for placement of orthodontic braces and wires to achieve the proper alignment of teeth.



Clips / Orthodontic Braces

Appliances for restricting bad oral habits

The dentist may also provide appliances and suggest exercises that restrict oral habits.

Cleft lip and / or palate management

The dentist may reinforce on feeding techniques, speech therapy and initiate comprehensive management

Management of fluorosis

The dentist will diagnose and perform appropriate treatment.

Management of dental trauma

The dentist will grade the severity of dental trauma and manage appropriately.

Do you Remember

1. Two things to do every day to maintain good oral health are _____ and _____.
2. Brushing should be done using a _____ and a ____ size of tooth paste.
3. Is it important to maintain milk teeth from shedding prematurely?
(True/False)
4. Mouth wash should be used only on recommendation of a dentist.
(True/ False)
5. Whenever a tooth is completely knocked out of the socket after a fall, it is recommended to report to the dentist in ____ hr(s)



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POINTS TO REMEMBER



You should follow these golden rules yourself and make the child understand that it is important to

1. Brush teeth properly twice daily, after waking up and before going to sleep
2. Always rinse mouth properly after eating
3. Avoid eating sweet and sticky food.
4. Eat raw and fibre rich foods like fruits and vegetables
5. Get the routine dental check-up done



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CHECKLIST

- Involve parents, local leaders and teachers in meetings
- Make oral health a definitive component of the meetings
- Show the manual to parents
- Discuss how parents contribute to the maintenance of oral health in parent teacher meeting
- Discuss provision of oral health aids like toothbrushes and encouraging mouth rinsing after every meal
- Conduct monthly interactive classes on oral health
- Utilize oral health education aids provided in this manual
- Ensure the children get their teeth checked in school camps
- Ensure appropriate referral mechanism for children with oral health needs with nearest dental team
- Advocate regarding the activities on oral health to State Nodal Officers and/or responsible officers
- Organize mass tooth brushing activities once in a year
- Organize “Swachh School Swachh Mukh” drives
- Make 100 yards around the school, tobacco free

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FREQUENTLY ASKED QUESTIONS

Can decay occur early in childhood, what should be done when decay is noticed early in childhood?

Yes. Continuous bottle feeding of sweetened milk to infants after weaning, particularly at night can lead to rampant decay of all teeth, sparing the lower front teeth. Immediately after the first tooth erupts, it is important that the mother consults a dentist and gets advised on importance of oral hygiene early in life.

What has to be done to avoid staining of teeth?

Regular tooth brushing and mouth rinsing habits can help avoid staining on teeth. In case stains persist, a dentist has to be consulted.

How often should teeth be cleaned by a dentist?

If maintained well, a regular check-up once a year would suffice. Cleaning is essential only when plaque deposits harden to form calculus tenaciously attached to the gum.

Can salt / manjan be used for cleaning teeth instead of tooth paste?

Gul manjan / manjan / tooth powder or any other such material is found to contain abrasive compounds that can lead to wearing off the tooth enamel. Also, it is found that Gul manjan contains tobacco and thus can be addictive leading to oral ulcers / cancer.

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What can be used to clean teeth?

It is advisable to use a soft bristle brush and pea size of tooth paste to clean teeth twice a day. This avoids plaque accumulation and prevents decay and gum diseases.

How to keep teeth healthy?

Brushing once in the morning and always before sleeping along with a practice of rinsing mouth with water after every meal is the best way to keep teeth healthy. Mouth rinsing should also be practised after eating sweet / sticky food like cake, bread, biscuits, chocolates, candies, rice etc.

What is the reason for whitish stains on teeth?

Presence of whitish stains on teeth following a specific pattern covering multiple upper and lower front teeth is indicative of Dental Fluorosis. It occurs due to excessive fluoride in the ground water supplies of that region. It needs to be evaluated by a dentist for severity assessment and necessary action. Also, if found in excess, the authorities concerned need to be alerted about fluoride in water.

What are clefts and why do clefts occur? Can this be treated?

A split or opening in the roof of the mouth or the lip is called a cleft. The cause could be genetic or certain drugs during early pregnancy or also undernourishment during pregnancy. It is important to report to a doctor immediately after birth to understand treatment protocol and feeding practices.

What to do when teeth do not begin to erupt even after the age of 1 year?

Consult a dentist before any further options are considered.

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Can irregularly aligned teeth be corrected, if yes when?

Yes. Consult your dentist. Some children need correction of crooked teeth and bite as early as 3 years while some may need treatment around 12 years.

What is the best way to help a person quit smoking / chewing tobacco?

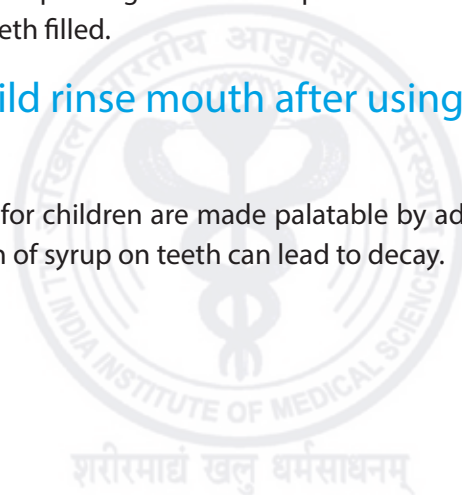
Advising them to delay tobacco use, divert the mind from the thought of tobacco, drink about 4-5 litres of water a day, do exercise and identify a quit date to completely forgo tobacco is something any person can do. In addition, referral to the nearest health facility for personalised counselling can help.

How important is it to fill milk teeth?

Milk teeth guide the eruption of permanent teeth and act as natural space maintainers for the permanent set of teeth. Also, they are important for functional aspects like chewing and speaking. It is thus important to keep milk teeth healthy and get decayed milk teeth filled.

Why should a child rinse mouth after using medicated syrups?

Most medicated syrups for children are made palatable by adding sweetener. If left uncleaned, the retention of syrup on teeth can lead to decay.



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COMMON MYTHS AND FACTS ON ORAL HEALTH

MYTH

Oral health has no impact on General Health

FACT:

Oral cavity is the mirror of your body. It is very important to maintain good oral health and go for timely dental check-ups. Poor oral health can impact overall health

Brushing during pregnancy can worsen the gum bleeding/gum enlargement

The gum disease gets aggravated during pregnancy due to changes in hormone levels. Continue with brushing and consult a dentist for further advice and treatment.

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MYTH

Cleft is caused because of curse or exposure during eclipse

FACT:

Cleft of the lip or palate in a child can occur due to some reasons like lack of nutrition including Iron and folic acid in the mother, consumption of alcohol/tobacco products during pregnancy, as a result of consanguineous marriages, in certain genetic diseases or syndrome.

Milk teeth should only be brushed after all of them erupt

As soon as the first tooth erupts in the mouth, one must start brushing the tooth/teeth using a baby tooth brush

Cavities on milk teeth can be left untreated as they will shed and new teeth will come in their place.

Cavities if left unfilled, may lead to destruction and loss of milk teeth.

Premature loss of milk teeth may lead to chewing and speaking difficulty in children and result in irregular alignment of permanent teeth.

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MYTH

Worms can be removed from teeth upon noticing decay and cavity.

FACT:

There are no worms in a tooth that are visible to naked eye. Small microscopic organisms called bacteria can damage the tooth structure and lead to cavities. However, these organisms are too small to be appreciated without microscopes. The dentist can remove the damaged tooth structure and place a filling to prevent deepening of existent cavities or perform a root canal treatment if the cavity involves pulp.

Tooth powder is a better alternative to toothbrush and toothpaste

Tooth powder/dantmanjan has abrasives in high quantities that can wear off and damage teeth over a period of time. Hence, it is recommended to clean your teeth using toothbrush and toothpaste everyday.

Scaling weakens the teeth and loosens them,

Scaling is done with special instruments to facilitate the removal of tartar and calculus only, They do not have detrimental effects on the teeth or the gums.

Scaling is recommended at timely intervals to maintain good gum health

MYTH

FACT:

Tooth extraction can lead to loss of eyesight

Tooth removal has no known impact on the vision / eyesight.

Keeping /chewing tobacco numbs tooth pain

Tobacco should not be considered as a remedy for tooth pain, one can start warm saline rinses or take medicines as prescribed by a qualified doctor and visit the dentist at the earliest to identify the cause of dental pain and seek dental treatment.

Using gul manjan, coal, brick powder, ash, charcoal powder is beneficial to teeth.

These substances have abrasives that wear out the tooth structure at a fast rate and are not recommended to clean your teeth. Gul manjan has nicotine as one of its components and can get one addicted to the use of tobacco therefore, it must be avoided altogether.

सत्यमेव जयते

MYTH

As you age, it is normal to loose teeth

FACT:

The life of your teeth depends on how well you keep them. Factors like diet, correct oral hygiene practices, regular dental check up are very vital for healthy teeth.

If you take care of teeth and gums they are with you all your life.



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ACTIVITY – ROLE PLAY

FUNCTIONS OF TEETH



Scene 1: Primary teeth

- Children to enact Milk/Baby teeth. The following enactment maybe done:



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Central Incisor:

I am a teeth placed at the centre,

I help you bite and cut food,

I am the first milk tooth to come in your mouth

Lateral Incisor:

I am the smaller one among the incisors,

But I help my big brother-the central incisor to bite and cut your food, together we play, together we stay

Canine:

I am very important to tear and get through all you eat

With the incisor brothers ,I belong to the anterior set of teeth

First Molar and Second Molar together:

We are big, we are mighty

We help you crush and grind all your food

We belong to the posterior teeth, we help you crush, grind and eat

All teeth in the end say together:

Baby teeth , Baby teeth-Pearly and white

Brush Morning and night to keep them shiny white

Keep us healthy and cavity free and then you will welcome happy permanent teeth

Scene 2: Permanent Teeth

Allocate the children as permanent teeth and the functions of the permanent teeth may be enacted as follows:



Central Incisor: I help you cut and slice things with ease, little brother/sister(calls out or looks to lateral incisor and lateral incisor enters) help me please?

Lateral incisor: (Holds hand of incisor)Sure big brother/sister! I'll be happy to accompany you, then together we can help to cut and slice-wont that be really nice?

Canine: I am big and pointy .I am the corner stone of your mouth. I am unique and I can cut and tear with ease.

Premolar1 and Premolar 2: (Enter together)

We are twins and help each other, we help you cut and shred your food and from us start the set of your posterior teeth

Molar 1 : I am the first permanent tooth to come, I am mighty and strong just like my brother/sister

Molar 2: Thank you brother/sister

Molar 3: Enters and pushes molar 2 and 1...I'm the last of the molar siblings to come and tend to be a naughty one

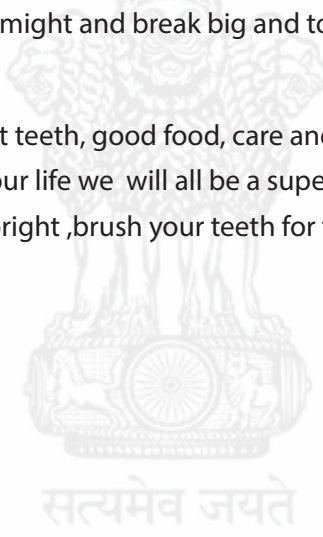
All Molars together: We are strong, we all help you crush and grind your food. We will grind with all our might and break big and tough foods just right

All Teeth together:

We are the permanent teeth, good food, care and brushing will keep us fit.

Then for the rest of your life we will all be a super hit!

Keep us sparkly and bright ,brush your teeth for two minutes morning and night!





ACTIVITY

BRUSHING SONG

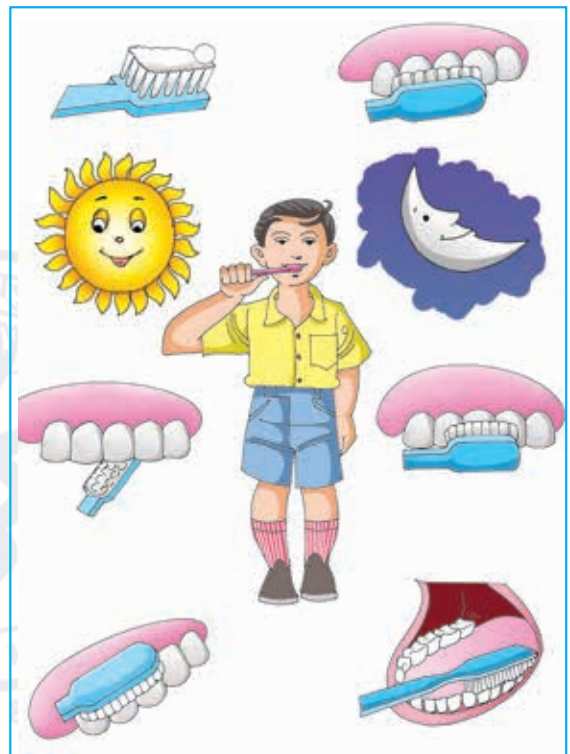
(Sing in the tune of Twinkle Twinkle Little Star)

Take your brush and take your paste
And then you take only pea-sized paste
Now you need to place the brush right
Place your brush at the gum-line

Then you start to brush up and down
Up and down, up and down,
That's the right way to brush teeth(2)

Next you place the brush upright
Brush up and down ,and up and down
That's the right way to brush teeth(2)

Brush your teeth then brush your tongue
Two minutes ,then you're done!
Morning and night, morning and Night
Now we will brush teeth right!



(This song may be used to induce behaviour change)

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ACTIVITY – ROLE PLAY

TOOTHACHE/DENTAL PAIN



Ministry of Health and Family Welfare

Characters: Raju, Volunteer as school teacher, Child 1, Child 2

(Classroom setting)

Children are making a commotion in the class, teacher enters

All children: Good morning Teacher

Raju: AAAhhh (child holds his cheek)

Teacher: Who was that? What is the matter?

Child 1: Miss, Raju was holding his mouth since morning , he hasn't spoken to us at all

Teacher: What's the matter Raju?

Child 2: AAAhhh. Raju looks like a frog puffing his cheeks and turning all red!

Teacher: Oh! Don't trouble him saying all that!

Raju : (Speaking faintly)Miss ,my tooth has been hurting since some days, I cant even eat my favourite ice-cream, it pains so much!

Teacher: Raju you should not neglect any such problem you should make an appointment with a Dentist, the sooner the better. It could be something serious.

Teacher: (Speaking to the class)Children, always remember to brush your teeth twice daily. It will keep, cavities and most tooth problems at bay. A stitch in time saves nine!

Teacher: Keep rinsing mouth and do not stop brushing. Do not hesitate to visit your Dentist. Your dentist will help identify the reason for your tooth pain and suggest a solution specific to your teeth.

शरीरमाद्यं खलु धर्मसाधनम्

ACTIVITY – ROLE PLAY

BROKEN TOOTH



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Ministry of Health and Family Welfare

Characters: Volunteer as Teacher, Child 1, Child 2, Child 3, Child 4, Child 5, Volunteer as nurse , group of children

(Setting: School ground on annual sports day)

Children are standing at the start line of a race

Teacher 1: Ready everybody?

Children in racing position

Teacher 1: On your marks, get set, go!

Children start running, one child is pushed over and starts crying after the fall

Child 1 (Crying) and holding the mouth. Teacher and Nurse rush in. Children stop running to come see the fallen child.

Nurse: You look hurt badly, show me where it hurts

Child 1: (Crying) Nurse it hurts so much!

Nurse: Oh no we have a broken tooth, children please look around and help us find the broken tooth

Children look puzzled

Child 2: Nurse, can it be stuck together again? Is it even possible?

Child 3: Can we use glue?

Nurse: No we wont be using glue but I will need one more thing, could any of you get a vial from the first-aid kit please?

Child 2: Sure Nurse, I have seen it, I'll get it! (Child runs off)

Nurse: Children if a tooth is broken, it can be put back in place by the Dentist, however you must all find that tooth piece and preserve it and immediately go to the dentist.

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Child 4: (Shouts out) I found the tooth piece Nurse! (Gives it to the nurse)

Child 2: (Panting after running to the nurse) Here Nurse I got the jar you asked me to get.

Child 5: What is in the jar Nurse?

Nurse: Children, this is a special solution that will preserve the broken tooth piece till we reach the dentist. No matter what, we must never let the tooth piece dry children. If you don't have this solution you can keep the piece in a clean cup with cold milk or coconut water or saline or even your own saliva

Child 1: Nurse I'm happy that the Dentist can fix my tooth!

Nurse: Yes, come! Come! We must see the Dentist at once, enough tooth adventures for today!



ACTIVITY – ROLE PLAY

KNOCKED OUT TOOTH



Characters: Volunteer as Old man, Child 1, Child 2, Volunteer as Nurse, Volunteer as Dentist, Group of Children (3-4) (Setting: Staircase)

Children are climbing and coming down the stairs, suddenly one child is running downstairs

Child 1: Catch me if you can!

Old Man: Go slow, be careful or you will fall!

Child 1: AAAhhh.. (Falls with a thud on the ground)(Holds mouth)My mouth!

Old man (speaking to children on staircase) :Please rush and call the nurse

Child 2: Yes Sir! (and runs off)

Nurse enters with her firstaid kit, cleans Child 1's face

Nurse: Children we have a knocked out tooth scenario, it must be here somewhere please look around carefully. In case anyone finds it please hold the tooth by its crown part only!All children look around and search for the knocked out tooth.

Child 2: Nurse here it is(holding tooth by crown part only)

Nurse: (Nurse gets vial from health clinic alongwith saline water, gently washes the tooth by holding the crown and puts it in the vial with saline water)

Thank-you! Now make way, we must not waste a minute to get to the dentist, we must reach within one hour!

Scene 2 (At the Dentist's)

Dentist: Well in time, come lets take a look

Child 1: Doctor please fix this tooth up(Cries)

Nurse: Here doctor, we managed to find the tooth as well!

Dentist: Splendid, don't worry you will be all fixed up in no time!

(Dentist works on the Dental chair with the child then come to address the Nurse,Teacher and a few children present there)

Dentist: Children, knocked out teeth should always be held by the crown part only and never allowed to dry up. To preserve the tooth you may use special solution,saline, cold milk, coconut water. It is must to rule out any other injury to the mouth region. The golden hour for reporting to the dentist is within 1 Hour of the injury as the chance of putting the tooth back and it surviving is very good within this time. Do not hesitate to visit the dentist

ACTIVITY – ROLE PLAY

ORAL HABITS



National Centre of Excellence for Implementation of
National Oral Health Programme
All India Institute of Medical Sciences, New Delhi

Characters: Vounteer as Mummy, Volunteer as Papa, Munni, Dentist

Setting: Childs bedroom in the house

Mummy: Munni, did you brush your teeth before going to bed?

Munni: Yes Ma, I'm all set for bedtime story now!

Munni is sucking her thumb and listening to the story. Munni's father walks in to say goodnight.

Papa: Goodnight beta ! Sleep tight. You look like an angel when you sleep with the thumb in your mouth.

Mummy: Yes dear. Just like she used to sleep when she was a little girl!

Setting : at the Dentist

Dentist: Good morning Munni, how are you?

Munni is shy and sucks her thumb and hides behind her mummy.

Dentist: Oh my I see Munni likes her thumb a lot! Ma'am since when has this been a habit for her?

Mummy: Since the time she left her bottle Doctor, (looks worried and asks doctor)Is there some problem?

Dentist: Thumb sucking or finger sucking in children after the age of 3-4 years is a bad habit and must be discouraged. It can lead to problems like crooked teeth or forwardly placed upper teeth. It is good that you brought Munni to me, we will tackle this problem and help Munni stop this bad habit.

Mummy: Thank you Doctor I had no clue Munni's habit was bad for her teeth.

सत्यमेव जयते

ORAL HEALTH EDUCATION GAMES FOR CHILDREN



शरीरमाद्यं खलु धर्मसाधनम्

Centre for Dental Education and Research
National Centre of Excellence for Implementation of
National Oral Health Programme
All India Institute of Medical Sciences, New Delhi



MINISTRY OF HEALTH & FAMILY WELFARE
NATIONAL ORAL HEALTH PROGRAMME

TOOTH TWIN!!

Find the two teeth that look alike!



Good luck!

ORAL HEALTH TIPS



Brush your teeth in the morning and night for 2 minutes



Rinse your mouth after each meal



Eat plenty of fruits and vegetables for a beautiful smile



Don't hesitate to visit your dentist. He is your friend



SMILEY CALENDAR

"BRUSH YOUR WAY TO HEALTH"

Colour the sun if you brushed for two minutes in the morning and colour the moon if you brushed for two minutes at night, before bedtime. Add the suns and moons at the end of each month—this will show your brushing streak!

	1	2	3	4	5	6	7
Week-1							
	8	9	10	11	12	13	14
Week-2							
	15	16	17	18	19	20	21
Week-3							
	22	23	24	25	26	27	28
Week-4							
	29	30	31	For Brushing in the Morning- 1 mark For Brushing in the Night, before bedtime- 1.5 marks			
Week-5							

1-36: NOT ENOUGH. BUCK UP!! 37-59: GOOD, BUT CAN DO MUCH BETTER! 60-75: EXCELLENT. KEEP IT UP!

Name:.....
Class:.....
Month:.....





MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

CAVITY FIGHTERS



Directions: Start the day with brush and toothpaste, as you go ahead the bad chocolates, candy, ice cream may spoil your teeth and set you back. So save yourself by with the help of your friends Brushy and Paste!

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MINISTRY OF HEALTH & FAMILY WELFARE
NATIONAL ORAL HEALTH PROGRAMME

TOOTH HUNT!!

Can you help the boy find his fallen tooth?



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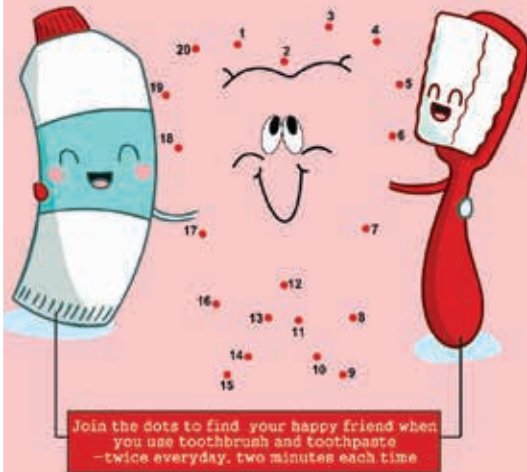


CENTER FOR DENTAL EDUCATION AND RESEARCH
AIIMS, NEW DELHI



MINISTRY OF HEALTH & FAMILY WELFARE
NATIONAL ORAL HEALTH PROGRAMME

SMILEY SURPRISE!



ORAL HEALTH TIPS



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MINISTRY OF HEALTH & FAMILY WELFARE

NATIONAL ORAL HEALTH PROGRAMME

DENTAL CARE!

Word search



a	e	n	a	m	e	l	b	s	c	d	e
t	f	p	u	i	p	g	h	c	i	j	t
o	l	d	s	t	b	r	a	c	e	s	
o	l	d	e	c	a	y	o	i	e	t	i
t	e	p	n	u	o	n	i	a	a	t	
h	e	f	t	f	r	t	o	n	v	r	n
b	t	f	i	l	l	i	n	g	a	t	e
r	o	i	n	e	c	a	o	u	a	a	d
u	o	k	l	m	m	n	o	m	p	r	q
s	t	o	o	t	h	p	a	s	t	e	b
h	e	f	l	u	o	r	i	d	e	l	

Braces	Fluoride	Toothpaste	Toothbrush	Scaling
Dentist	Filling	Enamel	Dentin	Pulp
Decay	Tartar	Gums	Tooth	

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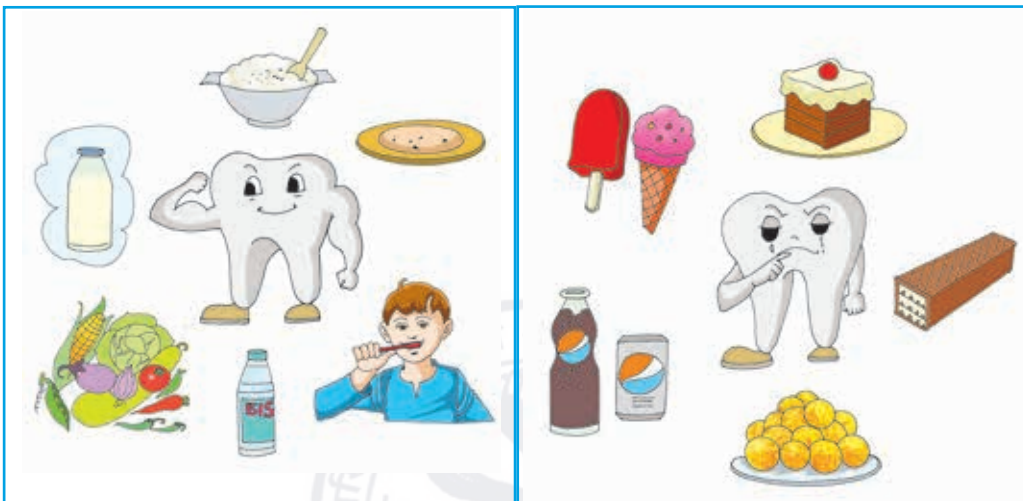


National Oral Health Programme (NOHP)
Ministry of Health and Family Welfare

ACTIVITY

HEALTHY HABITS

- Healthy habits are a reflection of healthy teeth. How many habits according to you are healthy for your teeth?



Habits that lead to healthy mouth and teeth

- Rinse after every meal more so after eating sweets
- Brush teeth twice a day
- Regular Dental check-up
- Consume
 - Milk
 - Cheese
 - Green leafy vegetables
 - Fruits
 - Water

Habits that lead to oral diseases

- Not rinsing mouth after each meal
- Wrong brushing technique
- High sugar food that causes tooth cavities
 - Chocolates
 - Toffees
 - Cake/Sweets
 - Cold Drinks
 - Biscuits

GLOSSARY

Biopsy: A biopsy is a medical test commonly performed by a surgeon. He collects a small piece of diseased or suspicious tissue for detailed examination under high magnification. In the oral cavity biopsy is often done to exclude or confirm cancer from a suspicious looking white or red patch or a ulcer.

Braces: Dental braces are devices used in orthodontics that align and straighten teeth and help position them with regard to a person's bite, while also aiming to improve dental health. Braces also fix gaps.

Calculus: Tartar, or dental calculus, is a build-up of plaque on the teeth that's been allowed to harden

Candidiasis: It is a fungal infection due to any type of Candida (a type of yeast). When it affects the mouth, it is commonly called thrush. Signs and symptoms include white patches on the tongue or other areas of the mouth and throat.

Cavity: Cavities are permanently damaged areas in the hard surface of your teeth that develop into tiny openings or holes. Cavities, also called tooth decay or caries, are caused by a combination of factors, including bacteria in your mouth, frequent snacking, sipping sugary drinks and not cleaning your teeth well.

Chemotherapy: It is a widely used treatment for cancer. The term chemotherapy refers to the drugs that prevent cancer cells from dividing

and growing. It does this by killing the dividing cells.

Cross bite: It is a form of malocclusion where a tooth (or teeth) has a more buccal or lingual position (that is, the tooth is either closer to the cheek or to the tongue) than its corresponding antagonist tooth in the upper or lower dental arch. In other words, cross bite is a lateral misalignment of the dental arches

Crown: It refers to the anatomical area of teeth, usually covered by enamel. The crown is usually visible in the mouth after developing below the gingiva and then erupting into place.

Dental Pulp: The soft tissue forming the inner structure of a tooth and containing nerves and blood vessels. Also called tooth pulp.

Dental Plaque: It is a soft, sticky film that builds up on your teeth and contains millions of bacteria.

Dentine: It is a hard, light yellow, porous layer of tissue directly underneath enamel.

Dentures: Dentures are prosthetic devices constructed to replace missing teeth; they are supported by the surrounding soft and hard tissues of the oral cavity.

Edentulous: Lack of teeth

Enamel: The outermost white part of teeth is called the enamel.

Eruption: Tooth eruption is a process in tooth development in which the teeth enter the mouth and become visible.

Fraying: It means to become worn at the edge, typically through constant rubbing of tooth brush

Genetic: Relating to heredity/family.

Gingiva: The part of the oral mucosa covering the teeth, also called gum.

Gingivitis: A condition of the gums characterized by inflammation and bleeding.

Immunocompromise: Having the immune system impaired or weakened (as by drugs or illness)

Inflammation: A condition in which part of the body becomes reddened, swollen, hot, and often painful, especially as a reaction to injury or infection.

Mucosa: A membrane that lines the oral cavity.

Periodontitis: It is a severe stage of gum disease that destroys the bone that supports teeth. It can lead to tooth loss.

Pitting: Hollow or indentation on the surface of teeth

Pit and Fissures: They are the deep grooves that make up the chewing surfaces of your teeth

Pursing lips: To gather or contract the lips into wrinkles or folds

Radiotherapy: It is a therapy using ionizing radiation, generally as part of cancer treatment to control or kill malignant cells

Referred pain: Pain felt in a part of the body other than its actual source.

Reverse bite: A reverse bite, or protruding lower teeth, is the term used to describe lower front

teeth that sit in front of upper front teeth. This causes the bite to be reversed or the 'wrong way around'.

Root: The part of a tooth below the neck of the tooth.

Scalers: Periodontal scalers are dental instruments used in the prophylactic and periodontal care of teeth (most often human teeth), including scaling and root planing.

Steroids: Also called corticosteroids, are anti-inflammatory medicines used to treat a range of conditions.

Shedding: It is a term given to describe the physiologic process that ultimately leads to replacement of the deciduous teeth by their corresponding permanent successors

Speech Therapy: Training to help people with speech and language problems to speak more clearly.

Syndrome: A group of symptoms that consistently occur together or a condition characterized by a set of associated symptoms.

Tartar: Tartar, or dental calculus, is a build-up of plaque on the teeth that's been allowed to harden

Teething: Teething is the process by which an infant's first teeth sequentially appear by emerging through the gums, typically arriving in pairs. The mandibular central incisors are the first primary teeth to erupt, usually between 6 and 10 months of age.

Trimester: A period of three months, especially as a division of the duration of pregnancy.

Vestibule: The portion of the mouth that lies between cheek/lips and teeth.

FURTHER READING

WHO Expert Consultation on Public Health Intervention against Early Childhood Caries, 2016

<http://apps.who.int/iris/bitstream/10665/255627/1/WHO-NMH-PND-17.1-eng.pdf>

Dental Trauma Guidelines International Association of Dental Traumatology, 2012

<https://www.iadt-dentaltrauma.org/1-9%20%20iadt%20guidelines%20combined%20-%20r%20-%2011-5-2013.pdf>

Operational Framework for Management of Common Cancers

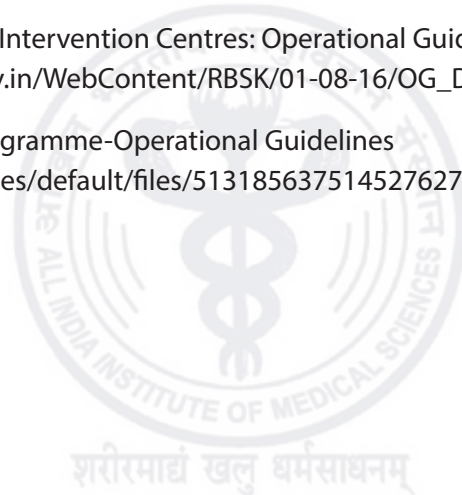
http://cancerindia.org.in/wp-content/uploads/2017/11/Operational_Framework_Management_of_Common_Cancers.pdf

Setting up District Early Intervention Centres: Operational Guidelines

http://www.nhmmp.gov.in/WebContent/RBSK/01-08-16/OG_DEIC.pdf

National Oral Health Programme-Operational Guidelines

<https://mohfw.gov.in/sites/default/files/51318563751452762792.pdf>



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