



Sonya Cronin discusses coping with younger patients and ensuring parents understand the recourse involved with protecting children’s teeth

Recently I have been placing a number of fissure sealants on young patients.

As we know, fissure sealants are highly recommended and are an effective way of reducing pit and fissure caries. It is great to see parents enthusiastic about preventing decay and encouraging their children to look after their teeth. Often, parents tell me that they are attempting to make up for their mistakes with their own dentition in the past. Thankfully, this makes my job a little easier; it means they are keen to learn the correct oral hygiene techniques and listen to my decay prevention advice.

As I am repeating the same information over and over every day, it is easy to forget that this is the first time many people have heard this information, so I must do my best to motivate them. Explaining that their child’s last deciduous tooth may not be lost until they are 12 or 13 years old is helpful.

Many assume that primary teeth do not matter as they are eventually lost, but bad habits with oral hygiene will continue with permanent dentition, so it is best to always

be mindful of children’s teeth. I demonstrate the correct brushing and flossing technique and also give parents whose children are particularly at risk of developing caries a printout of my oral hygiene advice.

PERFECTING TECHNIQUE

Fissure sealants can be quite difficult to place. I find that there is a limited window of opportunity with children’s concentration and co-operation. I remember finding this part of the dental hygiene course challenging. However, with good technique, fissure sealants are quite manageable.

I have been lucky enough to observe a paedodontist working with children, which was extremely helpful, and I picked up a few helpful tips on behaviour management.

As fissure sealant appointments are often the first treatment children have done in the dental surgery, it is important to me that it is a positive experience, so taking the time and having patience is essential. Juggling the suction, curing light, etch, sealant and keeping the tooth surface dry and the patient’s mouth open can be a little overwhelming at times. Of course, having an assistant is very helpful, although many hygienists do not have that luxury. Hence why we are great at multitasking and working well under pressure!

OTHER FACTORS

Fissure sealants and dietary advice go hand in hand, so I do my best to spend time advising parents of the importance of having a healthy, balanced diet.

A lot of patients are alarmed by the hidden sugars in foods they considered healthy. We have a sugar chart in the waiting room of the clinic that shows the exact amount of sugar in fizzy drinks, juices, sweets and chocolate, which is effective in getting the message across. It is impossible to avoid treats, but making better choices and limiting the frequency of eating them can make a big difference.

I also explain the benefits of systemic and topical fluoride in the prevention of decay. Although fluoride can be a controversial topic, most patients welcome my advice and are happy to take the information on board.

Parents are always delighted during visits when the dentist informs them there is no new decay detected, so it is worth the time spent on oral hygiene and the placement of fissure sealants. **ID**

Sonya Cronin is a registered dental hygienist currently working in specialist and general dental clinics in Munster. Sonya previously worked as a dental nurse in Ireland and Australia for six years.



Comments to Irish Dentistry @IrishDentistry