

Early Childhood Caries in India

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Early childhood caries (ECC) affects teeth of children aged less than 6 years. It has significant influence on individuals, families, and societies as it affects both primary and permanent teeth and influences general health and quality of life across the entire life.

According to the Global Burden of Disease study in 2017, more than 530 million children globally have dental caries of the primary teeth. Prevalence of ECC is increasing rapidly in low- and middle-income countries. Access to the dental care is not equitable in many countries, leaving children of poor families underserved.¹ Prevalence of ECC in India as studied by the systematic review is considered to be 49.6%, which is very high and the government should identify ECC as national priority that requires significant attention.²

Approaches to reduce the prevalence include interventions that start in the first year of a child's life, evidence-based and risk-based management, and reimbursement systems that foster preventive care. Moderate certainty evidence suggests that providing advice on diet and feeding to pregnant women, mothers, or other caregivers with children up to the age of 1 year probably leads to a slightly reduced risk of early childhood caries.³

The ECC prevention and control approaches range from changing personal behavior, to working with families and caregivers, to public health solutions such as building health policies, creating supportive environments, and health promotion and orientation of health services toward universal health coverage. It is essential to build supportive environments for integration of ECC and prevention and control into general health activities. In addition, primary care teams, including community health workers, are key to successful programs.¹

With current healthcare programs in the health field, integration of medical and dental care is required in order to identify individuals at high risk at an early age and provide oral health counseling

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prenatally. Dental professionals should work beside one another with gynecologists, pregnancy scanning specialists, nurses, ANMS, ASHAs, and all other healthcare professionals.

However, it is challenging to identify a key platform to deliver oral health promotion and ECC prevention. Hence, all sectors of the community should use primary care team to promote healthy behaviors at local and national levels.

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