

Early Childhood Dental Disease — What's in a Name?

Allan Narvey, DDS, Cert Pedo, FRCD(C), Luke Shwart, DMD, MBA

Contact Author

Dr. Shwart

Email: luke.shwart@calgaryhealthregion.ca



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“What’s in a name? That which we call a rose, by any other name would smell as sweet.”
William Shakespeare, *Romeo and Juliet*, Act II, Scene ii

Shakespeare knew that a name is more than the title we assign to a person or thing — it can include the qualities of a subject so that it can easily be identified and put in context. The expanded promotion of health information means that non-dental professionals and the public are exposed to dental terminology, so it behooves dentists to take care with names. One that has evolved over time is the label applied to tooth decay in very young children. It has been known as bottle mouth, baby bottle tooth decay, nursing caries, labial caries and, most recently, early childhood caries (ECC). At a workshop on ECC in 1999,¹ participants defined the disease and set the parameters for its most rampant version: severe early childhood caries.

Can you see the trend? Many of these labels presumed an etiology. We now find that the most recent term, ECC, leaves something to be desired. At a conference on ECC in Calgary in September (see page 897), the collective wisdom of delegates representing diverse areas of interest, from medicine, nursing, social work, immigrant and refugee aid, poverty reduction and teaching, told us that ECC is a misnomer that perpetuates the unfortunate concept that the mouth is separate from the

body. Worse yet, the term may delay recognition and access to treatment.

Over the last 3 decades we fought hard for recognition of the importance of a healthy oral environment for everyone, not only cardiac, cancer, diabetic, transplant and special needs patients. Those of us currently engaged in the battle know how much work it takes to change a paradigm. The idea that good oral health is linked to good general health is gaining recognition in many areas of society. Just as people no longer shrug about smoking or drinking and driving, we no longer ignore the health risks related to dental diseases. The battle’s tide is turning in our favour, but we still have work to do.

Young patients, the next generation of Canadians, must be our priority. Children are the most vulnerable members of society, yet they are being ravaged by some of the worst levels of dental disease many pediatric dentists have ever seen. This disease, which is mostly preventable, affects all strata of the socioeconomic scale, although it is concentrated in immigrant and refugee groups, First Nations residents and those trapped in rising poverty levels. If society is judged by how it treats our most vulnerable, we have some

serious questions to ask ourselves as those responsible for the oral health of our nation. The suffering among those affected is endless and better prevention is needed, otherwise we will never have enough pediatric dentists to care for all those needing treatment.

The delegates at the Calgary conference came to understand that what we have labelled ECC is linked not only to the pain of children who often are too young to tell us what the problem is, but also to infection and future sequelae. The effects of preschooler tooth decay may have an impact on the child's family, schooling, personality, social relationships, mind, restful sleep, physical growth and development. In Canada, tens of millions of health care dollars are spent annually on this disease that usually begins before a parent ever thinks of taking the child in for a dental checkup or considers the general health consequences of not doing so.

Parents often don't understand the word "caries." To them, it sounds like a strange dental term that only dentists use. Delegates at the Calgary conference, including those non-dental professionals who work on the front lines with young families, recognized that people need a term that reflects the seriousness of the disease and its consequences. We need to put the disease back into early childhood caries. We need to call it "early childhood dental disease."

At the conference, this surprising proposal was met by an immediate and audible approval in the room. It struck us at once that renaming the condition is the right thing to do. The expression "early childhood dental disease" adds context; people understand disease as something that can be prevented and has general health effects. It very simply replaces a confounding name with a straightforward one.

Because the risk factors of decay also contribute to childhood obesity and malnutrition, we have an opportunity to collaborate with organizations fighting those problems. By renaming ECC a disease, we bring it to the forefront and make it a target for all of our colleagues who care for children and young families.

Although we submit this proposal to change the name of this infectious disease so that it can be more universally understood and recognized, it is you, the dental professionals of Canada, who can lead the way and make this change happen. Now that you are following the Canadian Dental Association's position statement for checking children by their first birthday,² you can call early childhood caries a disease when you see it. Among colleagues, you can refer to it as ECDD, a slightly longer acronym, but a refreshing and current one. In your clinic you can continue to use fluoride varnish, a well-researched and evidence-based strategy for halting and reversing early decalcification and an effective treatment for limiting this disease in high risk groups.

Our universities, the Canadian Dental Association, the Canadian Academy of Pediatric Dentistry, the Canadian Association of Public Health Dentistry, Health Canada and other organizations with a stake in childhood health should be among the early adopters of the new name. We can ask our colleagues in medical schools, the Canadian Pediatric Society (which is forming an Oral Health section) and the Canadian Public Health Association to start using this new terminology. We can reach across borders and encourage the change among our colleagues in the United States and abroad. With some help, it won't be long before the tipping point is reached and the term ECC will seem quite archaic, used only by those no longer in the know.

Be a part of the change you envision. Let's call this serious health issue a disease and begin treating it like one. ♦

THE AUTHORS

Dr. Allan Narvey and Dr. Luke Shwart co-chaired the Task Force and Planning Committee for the 2007 Calgary Conference on Early Childhood Caries.



Dr. Narvey maintains a pediatric dental practice in Calgary, Alberta.



Dr. Shwart is manager, Community Oral Health Services, Calgary Health Region, Calgary, Alberta.

Correspondence to: Dr. Luke Shwart, 1509 Centre St. SW, Calgary, AB T2G 2E6.

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