

Tips for Good Oral Health: **PREGNANCY**

Pregnancy is a time when women have special health needs. Your teeth and gums may be affected by your pregnancy, just as other tissues in your body are. If your gums are in good health before you get pregnant and you clean your teeth well, you are less likely to have problems.

Gum Disease

Oral tissues may show an exaggerated response to bacterial plaque during pregnancy due to increased levels of oestrogen and progesterone. These hormones may affect your immune response to bacteria and favour bacterial growth. Therefore you may experience more gum problems at this time. Inflammation of the gum or gingivitis may be more noticeable between the second and eighth months of pregnancy and tends to subside after delivery. This is called pregnancy gingivitis. Symptoms may include redness, bleeding and swelling of your gums.

If you have healthy gum tissue before pregnancy, pregnancy gingivitis may be prevented with good oral hygiene. In pregnant women with poor oral hygiene, pregnancy gingivitis may progress into periodontitis, a more severe form of gum disease.

It is important to minimise the effects of pregnancy gingivitis with professional cleaning and a good home care routine. Regular dental check-ups and professional cleaning visits during pregnancy will help prevent gum problems.

Pregnancy Granuloma

Occasionally, a gum growth may occur during pregnancy called a pregnancy granuloma. Pregnancy granulomas are more common after the third month of pregnancy and are non-cancerous. A pregnancy granuloma is caused by the inflammatory response of your gums to local irritants such as bacterial plaque or calculus/tartar.

The growth usually presents as a red nodule on the gums between the teeth, which may bleed easily and occasionally become ulcerated. The lump is usually painless, however, it may become painful if it interferes with your bite or it accumulates debris. If a pregnancy granuloma forms, professional removal of plaque and calculus is required, supported by good oral hygiene. Pregnancy granulomas normally regress after delivery, however if they require removal, this can be performed by a dentist or a specialist periodontist. This procedure is usually carried out after delivery as it may recur, if removed during pregnancy.

If you experience gum problems during your pregnancy, it is important to visit your dentist. Any treatment you might need can be provided before or after delivery as required.

Dental Erosion

Morning sickness may lead to vomiting during some stages of pregnancy. Frequent vomiting during pregnancy can have an erosive effect on your teeth surface. The tooth enamel may dissolve or become softened by gastric acids. It is important to not brush teeth immediately after vomiting. It is good to wait for about 30 minutes before brushing teeth. Instead rinse immediately with water.

Pregnant women should avoid drinking soft drinks or juices to help ease nausea as acidic drinks are highly erosive. The so-called 'diet' drinks are also acidic, and if taken frequently can lead to erosion.

Dental Vistis

A dental examination before you plan to become pregnant will allow identification and treatment of teeth and gum problems beforehand. Otherwise a check-up during pregnancy is advisable to help you maintain good oral health, particularly if you have any symptoms of gum disease.

If treatment is required during pregnancy, this may be best performed during the second trimester. Emergency treatment can be undertaken at any time with proper safety measures.

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