A Parent’s Guide to Dental Care for Children with Sickle Cell Disease

Jaw or tooth pain without a visible cause in a child with sickle cell disease could be dangerous. The sickle cells may block the blood vessels of the teeth and jaws and lead to a sickle cell crisis.

If your child has severe pain in their tooth or jaw without a visible cause, you should take him to the hematologist or dentist immediately.

Children with Sickle Cell Disease need to see a pediatric dentist regularly.

A child should have his/her first dental visit no later than 12 months of age. Your child’s dentist will recommend how often he or she should go to the dentist.

Children with Sickle Cell Disease can have special oral problems.

- Teeth may look rough or have white, yellow, or brown spots.
- Gums may look pale if his/her hemoglobin levels are low. As long as you follow the hematologist’s care plan, this is not something to worry about.
- Teeth may not fit together normally. Many children with sickle cell disease have upper teeth that are further ahead of the lower teeth. There may be spacing between the upper front teeth as well.
- Severe pain in his or her tooth or jaw without any visible cause during a sickle cell crisis.

Prepare your child for a visit to the dentist:

- Make sure your child takes his/ her medicine on schedule.
- Make sure he or she has a good night’s rest before the appointment.
Questions to ask your child’s dentist:

- Can you numb my child’s teeth?
  Yes. Usually, the dentist will use a local anesthetic called lidocaine with epinephrine to numb your child’s teeth. This has been found to be safe and effective for children with sickle cell disease.

- Can my child get the laughing gas if they are scared?
  Maybe, if your child has not had any problems related to sickle cell disease or a recent crisis. Your child’s dentist may talk to your hematologist before giving your child laughing gas.

- Will my child need antibiotics before dental treatment?
  Maybe. Your child’s dentist may talk with your child’s hematologist to decide if antibiotics are needed.

- How often should my child see a dentist for check-ups?
  It depends on his or her risk of getting cavities or other dental problems. Some children may need dental check-up every six months, while others may need to check-ups more often.

- Do my child’s medicines effect the teeth?
  Sometimes they do.

  Sugar is sometimes added to cover up the bitter taste of the medicine. Taking frequent doses of sweet medicine can make your child more likely get cavities. The medicine may make your mouth dry and not have enough spit. Having a dry mouth creates bacteria that can cause cavities.

  Dry mouth also makes plaque and tartar build up faster which can lead to gum disease.

  It is important to try to prevent cavities since the medicine used to treat sickle cell disease cannot be changed.

- Will my child need braces?
  Maybe. Braces (or orthodontic treatment) are usually not necessary but can close spaces and make teeth fit together more normally. Your child needs to be able to keep from getting cavities and be medically stable without having recurrent episodes of crises in order to get braces.

- Does my child need prescription fluoride products?
  Maybe. The dentist will decide based on a dental exam and x-rays.
How can I prevent cavities in my child?

- Brush your child’s teeth every morning and every night with a soft toothbrush.
- Use toothpaste with fluoride in it and has the ADA seal of approval on the tube.
- Floss after brushing at night.
- Drink fluoridated water.
- Do not drink juices, sodas, or sports drinks often.
- Stay away from foods that have added sugar. In-between meal snacks should not be sweet treats.

Questions your child’s dentist might ask you:

- Who is your child’s pediatrician or hematologist? How can I get in touch with him or her?
- What medication does your child take? What are the dosages?
- Does your child have any drug or food allergies?
- How often does your child have sickle cell crises? When was the last one?
- How often have you had to take your child to the hospital? Was your child admitted to the hospital?
- What are your child’s triggers for sickle cell crises?
- Has your child had any problems when having dental work done in the past?
- Is your child afraid of going to the dentist?

Questions you should ask your child’s hematologist:

- Does my child need any extra protection while getting dental care?
- Is there anything the dentist should do differently for my child?
- Will my child need to be admitted to the hospital and receive general anesthesia or sedation for dental treatment?

How often should my child see the dentist?

Most children should see the dentist every 6 months. However, if your child is at high risk for dental caries, the dentist may recommend more frequent visits, such as every 3 or 4 months.
Children with sickle cell disease can get cavities, just like children who do not have sickle cell disease. Dental cavities are preventable by ensuring a healthy, low-sugar diet and regular brushing and flossing.

**How to find a pediatric dentist:**

American Academy of Pediatric Dentistry: [www.aapd.org](http://www.aapd.org)

American Board of Pediatric Dentistry: [www.abpd.org](http://www.abpd.org)

Additional Information on Sickle Cell Disease:

[https://medlineplus.gov/sicklecelldisease.html](https://medlineplus.gov/sicklecelldisease.html)

Note: The information you see describes general oral health information for children with Sickle Cell Disease, but it does not apply to everyone. This information is not medical advice. Please contact a healthcare provider if your child has a medical problem. If you think your child may have a medical emergency, please call your child’s doctor or an emergency number immediately.