

## Pregnancy and Oral Health

Oral health is important for both pregnant women and their infants. Maintaining good oral health during pregnancy is a critical part of prenatal care. Studies show poor oral health during pregnancy is associated with negative health outcomes for women and infants.<sup>[1]</sup> During pregnancy women are at higher risk of periodontal disease, an estimated 60-75% of pregnant women have gingivitis – a form of periodontal disease.<sup>[2]</sup> Periodontal disease may be associated with adverse birth outcomes, such as preterm birth and low birth weight.<sup>[1,2]</sup>

Research indicates a mother's oral health status is a strong predictor of her children's oral health status. Women who have a lot of cavity-causing bacteria during pregnancy and after delivery could transmit these harmful bacteria from their mouth to the mouth of their baby.<sup>[1]</sup> Children of mothers who have high levels of untreated cavities or tooth loss are more than 3 times more likely to have cavities as a child.<sup>[1]</sup> Dental care is safe during pregnancy; pregnant women are encouraged to practice good daily oral hygiene and discuss any concerns with their dentist.<sup>[3]</sup>

#### **Routine Dental Care**

35% of Georgia women had their teeth cleaned by a dentist or dental hygienist before their last pregnancy



36% of Georgia women had their teeth cleaned by a dentist or dental hygienist during their pregnancy 76% of Georgia women had insurance to cover dental care during their pregnancy





## **Oral Health Problems**

18% of Georgia women needed to see a dentist for a problem during their most recent pregnancy



63% of the women who needed care for a problem saw a dentist or dental clinic about a problem during pregnancy

## Oral Health Beliefs & Education

87% of Georgia women knew it was important to care for teeth and gums during pregnancy,



52% of Georgia women were told by a health care worker how to care for their teeth and gums during pregnancy

100 80 Percent of Women (%) 60 40 50 45 45 43 20 37 36 29 27 25 26 0 <25 25-34 35+ NH White NH Black Hispanic HS Grad Georgia Atlest Private Medicaid Other<sup>+</sup> Women or less some college Maternal Age\* Payor for Delivery\* Overall Race/Ethnicity\* Education\*

Notes: Percents are weighted. NH: Non-Hispanic; HS: High School. ^Results are among women with a recent live birth in Georgia. \*P-value < 0.05; +Other category for payment for delivery includes self-pay, CHAMPUS/TRICARE, other government insurance, and "other" categories.

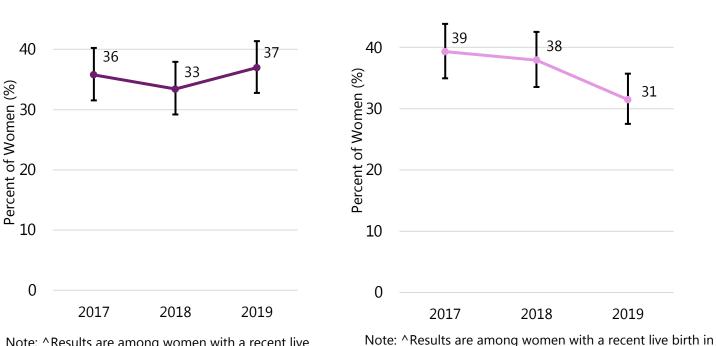
Figure 2a: The percent of women^ who reported having their teeth cleaned **before** pregnancy, Georgia PRAMS, 2017-2019

50

having their teeth cleaned **during** pregnancy\*, Georgia PRAMS, 2017-2019

Georgia. \*Yearly trend for teeth cleaning during pregnancy is

statistically significant, p= 0.0117



Note: ^Results are among women with a recent live birth in Georgia. Yearly trend for teeth cleaning before pregnancy is not statistically significant, p= 0.705.

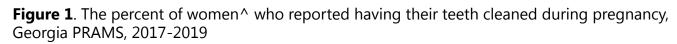
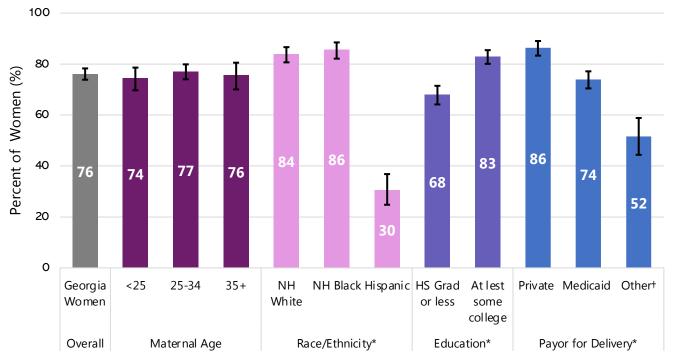


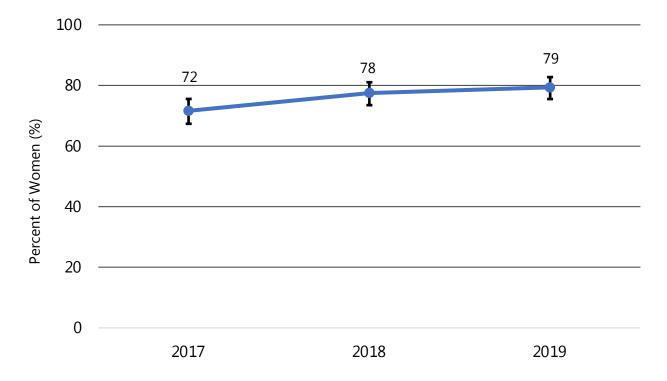
Figure 2b: The percent of women^ who reported 50



**Figure 3**. The percent of women<sup>^</sup> who reported having dental insurance during pregnancy, Georgia PRAMS, 2017-2019

Notes: Percents are weighted. NH: Non-Hispanic; HS: High School. ^Results are among women with a recent live birth in Georgia. \*P-value < 0.05; +Other category for payment for delivery includes self-pay, CHAMPUS/TRICARE, other government insurance, and "other" categories.

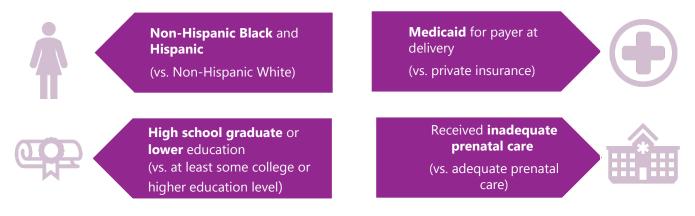
**Figure 4:** The percent of women<sup>^</sup> who reported having dental insurance during pregnancy<sup>\*</sup>, Georgia PRAMS, 2017-2019



Notes:  $^{Results}$  are among women with a recent live birth in Georgia. \*Yearly trend is statistically significant, p = 0.0057

## Disparities in Beliefs About Oral Health

# Significantly **fewer** women with certain characteristics **knew it was important to care for teeth and gums during pregnancy**:



#### Take Action: Recommendations and Resources

#### **MOTHERS CAN:**

Perform oral health maintenance:

- Brush twice a day with fluoridated toothpaste, floss once daily, and limit sugary food and drinks
- · Visit the dentist twice a year
- Stop use any use of tobacco products and recreational drugs and avoid secondhand smoke
- Drink fluoridated tap water
- Take your child to the dentist by their first birthday or within six months after their first tooth erupts

#### **HEALTH CARE PROVIDERS CAN:**

- Conduct an oral health assessment during the first prenatal visit
- Review medical and dietary histories, including use of tobacco, alcohol, and recreational drugs
- Be aware of patients' health coverage for dental services during pregnancy to make referrals to the appropriate dental provider
- Counsel women to follow oral health professional's recommendations for achieving and maintaining optimal oral health

#### RESOURCES

To find resources for oral health and pregnancy, visit:

https://www.mchoralhealth.org/

https://www.cdc.gov/oralhealth/publications/features/pregnancy-and-oral-health.html

https://www.resourcehouse.com/hmhb/

#### **References:**

1. https://www.cdc.gov/oralhealth/publications/features/pregnancyand-oral-health.html

2. https://www.acog.org/clinical/clinical-guidance/committeeopinion/articles/2013/08/oral-health-care-during-pregnancy-andthrough-the-lifespan

3. https://dph.georgia.gov/oralhealthprogramga

**Data Source & Notes**: Georgia Pregnancy Risk Assessment Monitoring System (PRAMS); all percentages are weighted and represent women with a recent live birth in Georgia.

For more information on the Georgia PRAMS Project, please visit <u>https://dph.georgia.gov/PRAMS</u>

