

Sugar and children's oral health

What do I need to know?

In a nutshell

We have been campaigning for public health legislation that helps to limit the amount of sugary food and drink children consume in the UK.

We support the Academy of Medical Royal Colleges report (2013), which recognises that current strategies are failing to improve the diet and health of children and that an unprecedented coordinated approach is needed. The report set out a series of key recommendations that aim to tackle the current obesity crisis in children in the UK, including recommendations for health professionals to reduce the exposure of children to unsuitable food, and encourages health food and lifestyle choices.

Launched in 2013, our *Make a meal of it* campaign called for a 20 per cent tax on sugary carbonated drinks, a ban on unhealthy food and drink advertising aimed at children, the removal of vending machines selling sweets and sugary/acidic drinks in schools and hospitals and restricting the availability of unhealthy food and drink at shop tills.

The campaign helped to persuade some of the leading supermarkets to rethink their placement of sweet treats at checkouts. The sugar tax issue is still being debated and the BDA will continue to lobby Government on the oral health benefits of such a tax.

The BDA has been supporting the campaigning work of the British Heart Foundation and the Children's Food Campaign to take action on junk food marketing to children, and Action on Sugar's work on the harmful effects of a high-sugar diet.

Despite steady improvements, an unacceptable number of children still suffer from tooth decay. The average figures for tooth decay hide regions and communities whose oral health falls far behind the most affluent parts of the country.

What can I do?

The most important message dentists can give parents is to remember that it is not just the amount of sugar children eat or drink that causes tooth decay, but how often they have sugary foods and drinks. A good oral hygiene routine is essential, as well as regular dental check-ups, and thinking carefully about the food and drinks that their children regularly consume.

Top tips for your patients:

1. **Limit sugar intake:** In the mouth, the bacteria living on the teeth rapidly convert sugar into acid and it is this acid that dissolves the tooth enamel. The risk of developing decay increases as the amount and frequency of sugar consumption rises.
2. **Brush regularly:** Keeping teeth clean by regular brushing helps prevent decay as the amount of acid generated is dependent on the quantity of dental plaque on the teeth. All children up to three years old should use a toothpaste with a fluoride level of at least 1000ppm, both morning and night. After the age of three, toothpaste should contain 1350ppm-1500ppm. Children's brushing should be supervised until the age of 7.

3. **Don't miss your check-ups:** Dentists should encourage their patients to ensure their children come in for regular dental check-ups, so any oral health problems can be spotted early.
4. **Put a lid on unhealthy snacks:** The problem is made worse by the trend for sweets, which tend to be eaten between meals, and contain increasingly acid ingredients. Breadsticks, nuts and raw vegetables are far better alternatives to sugary snacks. Even if carbonated drinks are sugar-free, their acid properties will still lead to tooth damage, by erosion rather than decay. Raisins can be a problem too, as they tend to stick to teeth and attack enamel, so should be consumed after meals, rather than as a snack.
5. **Watch out for 'hidden' sugars:** Pure fruit juices can be a healthy choice, but the natural sugars these contain can still damage teeth, so fruit juice should be consumed with a meal and only one glass (150ml) a day. Sugars in whole pieces of fruit are less likely to cause tooth decay because they are combined with fibre.

Key facts

- **Dental caries is the number one reason why children aged 5 to 9 are admitted to hospital in England**, even though this could be largely prevented through regular brushing, adequate exposure to fluoride and reducing sugar consumption. The NHS spent £30 million on hospital-based tooth extractions for children aged 18 years and under in 2012-13.
- **The variation is particularly dramatic among 3-year olds**, with approximately 34 per cent suffering in Leicester, compared with just 2 per cent in south Gloucestershire.
- **In Wales over ten per cent of children will have a tooth extracted** due to decay.
- **Nearly a quarter of the added sugar in our diet comes from soft drinks, fruit juice and other non-alcoholic drinks** and children aged 11-18 get 40 per cent of their added sugars from drinks, mainly soft drinks, such as cola. Around one in eight children admit to drinking sugary drinks at least four times a day.
- **Britons eat around 700g of sugar a week:** that's an average of 140 teaspoons per person. Teenagers' intakes are the highest of all groups and they consume 50 per cent more sugar on average than is currently recommended. Intakes of sugar for adults tended to be higher in the lowest income groups.
- **Current Government advice suggests limiting sugar intake to 10 per cent or less of your daily calories**, and this might soon be revised down to 5 per cent, in line with recent World Health Organisation recommendations: that's about 70g sugar for men (about 14 teaspoons) and 50g (about 10 teaspoons) for women, although this varies according to factors such as age, size and how active people are. Food and drinks high in sugar should only be consumed in small amounts.
- **Examination of children's teeth suggests that there may be an unreported erosion epidemic**, with surveys of 12 year-old children showing that as many as 60 per cent of children show evidence of tooth erosion. Across the UK, three in 10 five-year olds have visible signs of decay and by the time they reach 15, this increases to nearly one in two.
- **Tooth enamel begins to be destroyed when acid levels in the mouth below 5.5 on the pH scale** (7 is neutral and 1 is acid). Water has a pH of 7 and milk 6.8.

For more information and references visit:

www.bda.org/sugar