

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.^[1] During pregnancy women are at higher risk of periodontal disease, an estimated 60-75% of pregnant women have gingivitis – a form of periodontal disease.^[2] Periodontal disease may be associated with adverse birth outcomes, such as preterm birth and low birth weight.^[1,2]

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.^[1] 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.^[1] Dental care is safe during pregnancy; pregnant women are encouraged to practice good daily oral hygiene and discuss any concerns with their dentist.^[3]

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

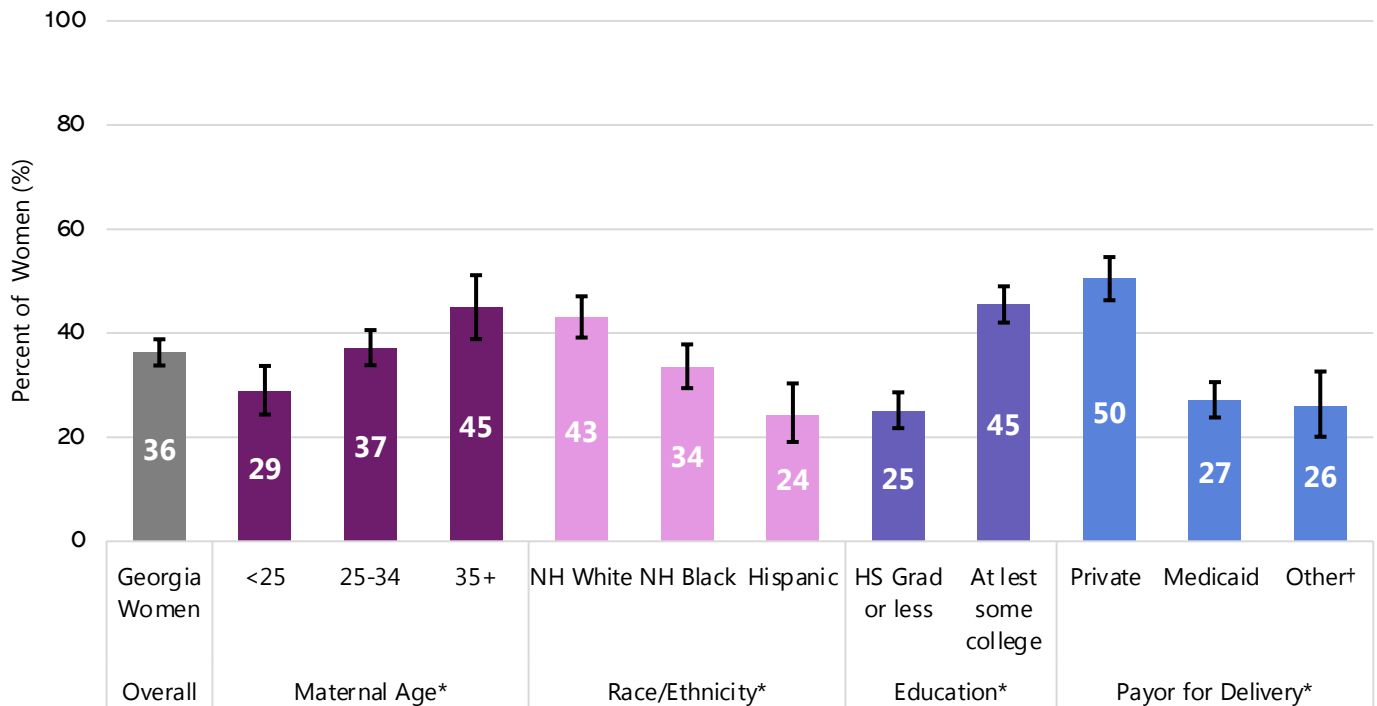


87% of Georgia women knew it was important to care for teeth and gums during pregnancy,



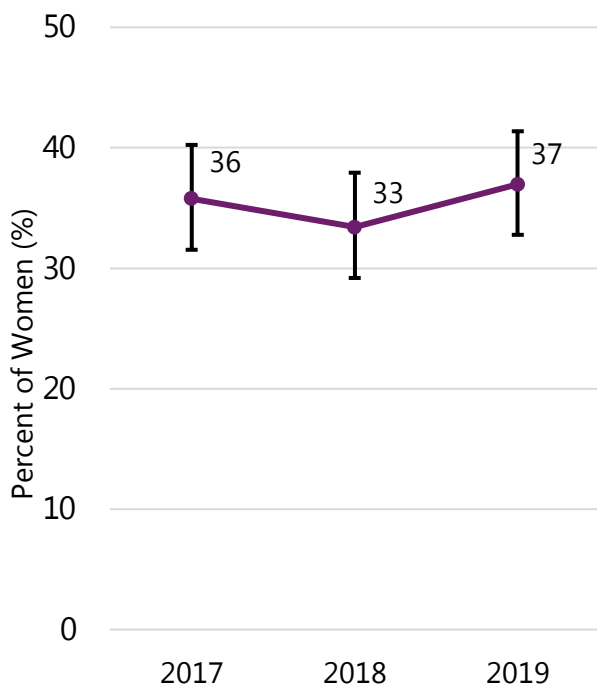
52% of Georgia women were told by a health care worker how to care for their teeth and gums during pregnancy

Figure 1. The percent of women^ who reported having their teeth cleaned during pregnancy, Georgia PRAMS, 2017-2019



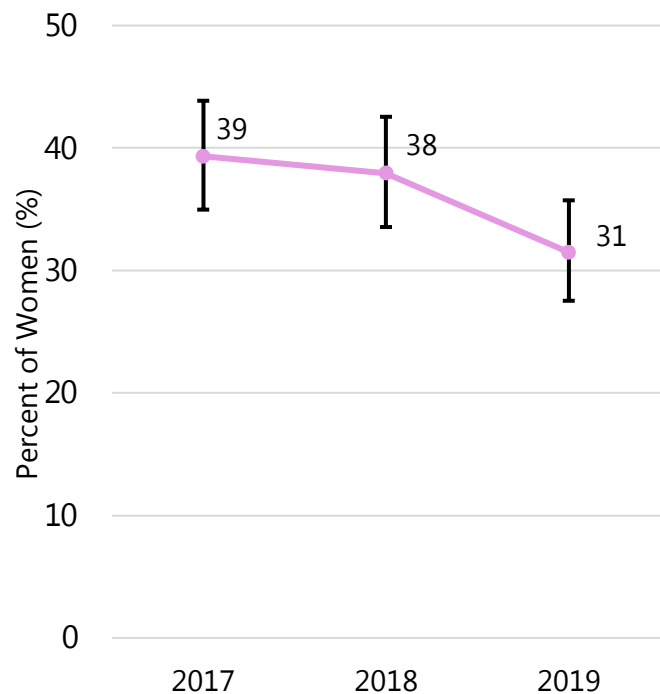
Notes: Percents are weighted. NH: Non-Hispanic; HS: High School. ^Results are among women with a recent live birth in Georgia. *P-value < 0.05; †Other category for payment for delivery includes self-pay, CHAMPUS/TRICARE, other government insurance, and "other" categories.

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



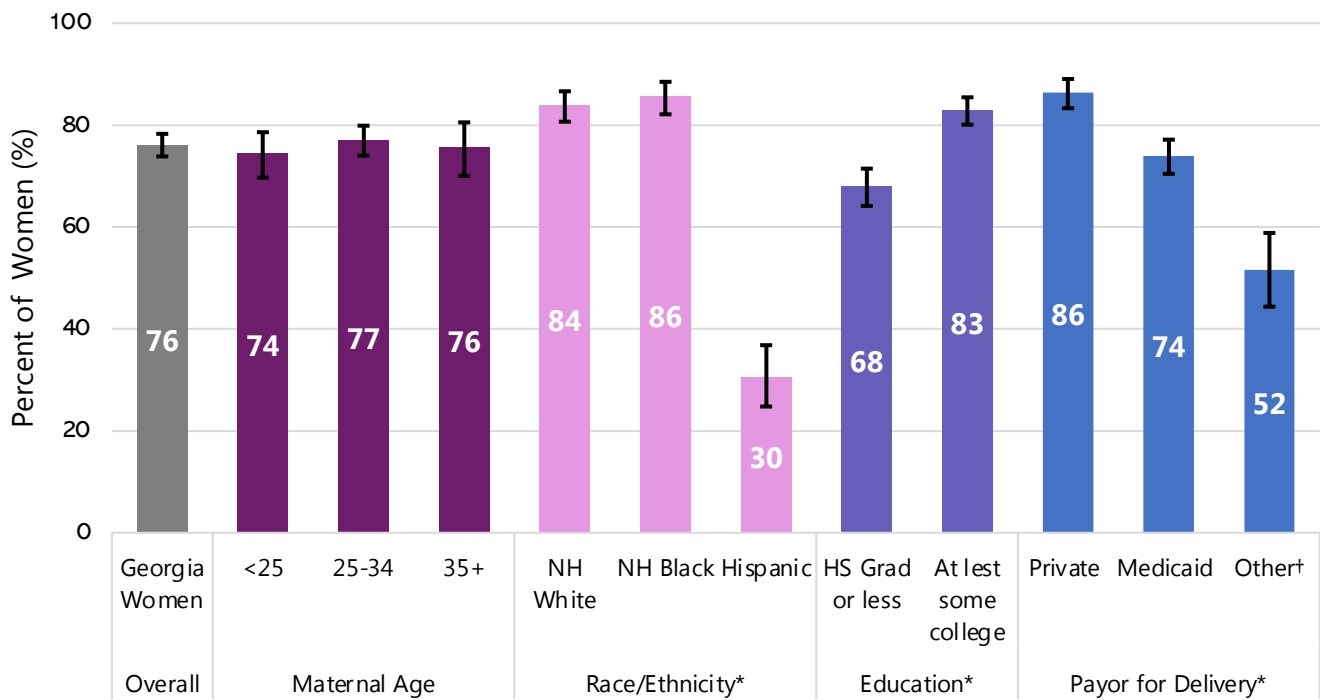
Note: ^Results are among women with a recent live birth in Georgia. Yearly trend for teeth cleaning before pregnancy is not statistically significant, p= 0.705.

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



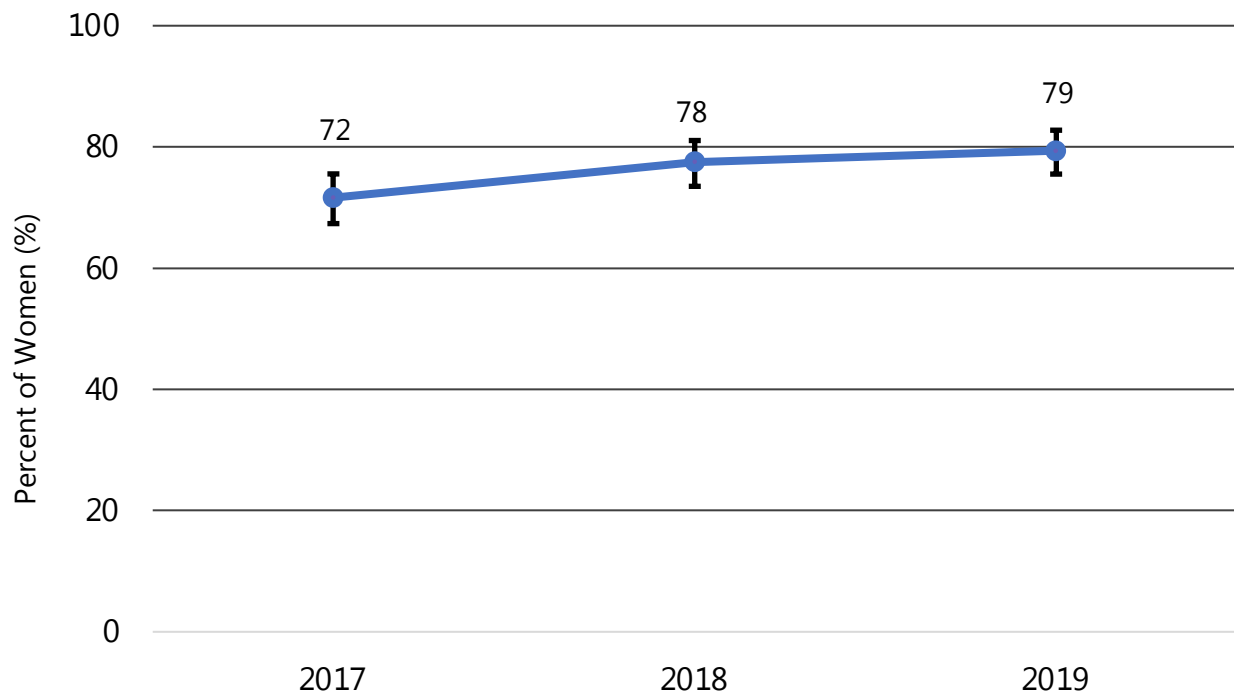
Note: ^Results are among women with a recent live birth in Georgia. *Yearly trend for teeth cleaning during pregnancy is statistically significant, p= 0.0117

Figure 3. The percent of women[^] 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.

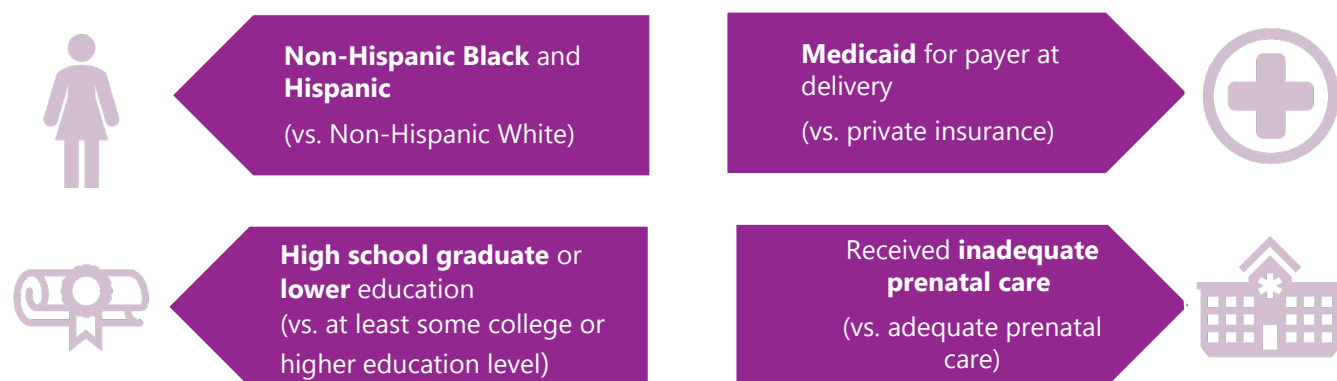
Figure 4: The percent of women[^] who reported having dental insurance during pregnancy*, Georgia PRAMS, 2017-2019



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/hmh/b/>

References:

1. <https://www.cdc.gov/oralhealth/publications/features/pregnancy-and-oral-health.html>
2. <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2013/08/oral-health-care-during-pregnancy-and-through-the-lifespan>
3. <https://dph.georgia.gov/oralhealthprogramqa>

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 <https://dph.georgia.gov/PRAMS>