

Dental Care for Nursing Mothers

Dental Care at Home

Just as it's important to keep your teeth healthy while you're TTCing and pregnant, it's essential during nursing too. Actually, it's even more important because if you have a cavity or other oral issue, you may end up transferring those germs to your baby, even through simple things like sharing a spoon. There's not a high chance, but there is a chance, and that's enough to make taking care of your teeth highly critical.

One of the concerns during fertility was the fluoride in toothpaste and mouthwash. This is not a concern while breastfeeding. Research has found no data on the excretion of fluoride into breast milk. However, there seems to be evidence that high concentrations of fluoride can decrease milk production. High concentration means 98 to 137 mg per kilogram of body weight. Since it's nearly impossible to digest that amount with brushing your teeth and using mouthwash, it's not a problem.

Dental Procedures

Since x-rays for the teeth are close to the chest, many nursing mothers become concerned about radiation. The good news is you do not have to be wary of it. Not only will you be wearing the lead vest, but the radiation will not seep into and transfer to your baby via breast milk. The only effect it may have is killing off some of the living cells in the milk. Again, this is okay because those cells regenerate after feedings, so your baby won't be affected.

If you need a cavity filled or another dental procedure, local anesthesia is acceptable during breastfeeding. Novocaine or lidocaine are both considered compatible (no risk for baby). In addition, most medications (oral or IV) for sedation are also compatible.

Laughing gas or nitrous oxide is also compatible with breastfeeding. The gas leaves the body quickly by going to the brain and then to the lungs out your mouth. After the laughing gas mask is removed, recovery only takes three to five minutes. For this reason, ingesting nitrous oxide via breast milk is rare.

Major Takeaways for Dental Care During TTC, Pregnancy and Nursing

The major takeaways are to continue dental care through TTC, pregnancy, and nursing. Neglecting dental care is far worse than your exposure to potential toxins in the products you use.

If you believe fluoride may be the reason you're having a difficult time conceiving, switch over to the fluoride and triclosan-free toothpaste and mouthwashes. Just switch back to fluoride toothpaste when you are pregnant, so your baby can benefit from it as he or she starts developing teeth. When you're at the dentist, skip the fluoride if you're TTC. You can always get it at your next visit if you are pregnant.

During pregnancy, wait until your second trimester to do any dental procedures (if that's possible). Your dentist will discuss the risks vs. benefits of having dental procedures during the first and third trimesters. If you have a serious oral issue that could end up harming the fetus, it may be better to have the procedure done sooner than the second trimester.

After having your baby and during nursing, you don't have to worry about any toxins with toothpaste, mouthwash, or flossing your teeth. Dental procedures are okay too including x-rays, Novocain, lidocaine, and even sedatives. If you need a long dental surgery, nurse your baby before it, and then after you are awake enough to hold your baby.

Additionally, we all know that dental work strikes when it wants, not when we want. If you have an emergency and need to visit a weekend dentist you may end up having to ingest something that isn't on the approved list for breastfeeding. The solution is just to learn from the doctor how long it will be in your system and avoid breastfeeding during that period.

For more information on Dental Care & Pregnancy

<https://www.emergencydentistsusa.com/dental-care-pregnancy/>