

Breast Milk Decreased Cavities

By Shari Carroll, DMD, MPH

“My dentist showed me awful pictures of teeth and I was so scared I stopped breast feeding that very same night.” I hear

statements like this from moms all too often. My reaction is always the same: I cringe, give Mom a big hug, and then I tell them the truth.

My name is Shari Carroll. I am a board-certified specialist in pediatric dentistry in Redondo Beach, California. I am also a mother of two young children. I wrote this article because I want to set the record straight about the rumors and myths associated with breast feeding and tooth decay.



I breast fed both of my children because of the many health benefits of breast milk. If I had to do it over again, I would not give a second thought to breast feeding my children.

As a Mom, I try my best to balance everything for my kids—school assignments, playdates, speech therapy, grocery shopping, and an endless schedule coordination with my wonderful husband. As a pediatric dentist for almost a decade, I balance my approach to treatment by combing my academic background and specialty training with my own personal experiences and those of my patients’ and their families.

When I became a Mom 6 years ago, my two worlds collided. I was a new Mom striving to breast feed my son with medical issues. Nineteen months later, I found myself in a poor breastfeeding relationship with my daughter as well. Fast-forward many years later, I now find myself a breastfeeding advocate as pediatric dental provider. In fact, it has become my mission to work with Mom’s struggling with breastfeeding due to tongue and lip ties and to correct falsehoods about breastfeeding and dental decay that are coming from misinformed people.

To share in simple terms, I can tell you that human milk does not exclusively cause dental cavities. Cavities are a multi-factorial issue. High-risk factors for cavities include colonization of the bacteria that causes cavities, high sugar diets, poor tooth strength and enamel defects. Breastfeeding can actually help decrease the risk of tooth decay because it promotes proper jaw growth leading to better dental spacing and less malocclusion.

From my practice over the years, I have seen that once we eliminate the major source of liquid nutrition gold (i.e. breast milk), many babies will begin or increase exposure to well-known cavity causers like juice and crackers. In my opinion, breast feeding for as long as desired, coupled with regular follow up with a board-certified pediatric dentist can actually be the combination to help decrease early childhood dental caries. Misinformation being passed to a mom is an unfortunate consequence I frequently see these days due to social media and dental providers that are not keeping up with current research and technology.

I am so thankful and lucky to work with so many amazing moms and their support teams as we reach one outcome—obtaining a healthy and long-lasting breastfeeding relationship. I have met the warrior mom who worked diligently to double her milk production while utilizing SNS to feed a hungry baby and avoid nipple confusion. I've read all of her baby's reports documenting her consults with lactation specialists, chiropractors, cranial-sacral therapists, pediatricians, gastroenterologists, and allergists. I see the dedication and love put forth to reach the end goal for healthy breastfeeding.

My Closing Words of Wisdom:

Human Breast Milk Rocks

Human breast milk has an incredibly high level of health benefits. Give your baby that liquid gold as long as you can. Utilize your local support resources to help you and your baby on your journey. Find a great lactation consultant or IBCLC for advice and try not to do your research on the internet unless the information is from a credible source.

Brush, Brush, Brush

I encourage every parent to give a toothbrush to a baby even before he or she has teeth. This will help your baby get used to having the toothbrush inside the mouth and it also decreases the oral sensitivities often seen in young children.

Find a Board-Certified Pediatric Dentist

Unfortunately, dentists do not get much exposure to pediatric dentistry in dental school. Pediatric dentistry and adult dentistry are very different specialties. Just like every doctor you see (Pediatricians, Primary care doctors, Ob/Gyn doctors), pediatric dentists are board-certified by the American Board of Pediatric Dentistry. Being board-certified assures the public that the doctor attended a two-year residency in pediatrics and then passed a series of rigorous examinations in order to render the highest quality of care. A board-certified pediatric dentist has to renew certification every year, which entails more testing and education on the most current research available. You can look up any dentist by zip code to ensure you are seeing a board-certified pediatric dentist: <https://www.abpd.org/Content/Find-a-Certified-Pediatric-Dentist.aspx>.

A board-certified pediatric dentist can assess a baby by age 1 and discuss in detail dental health issues your baby may have, how to prevent cavities from developing, and also offer different treatment modalities if a child does develop a cavity and needs treatment.



Dr. Shari Carroll received her Doctor of Medicine in Dentistry (DMD) and Masters in Public Health (MA) from AT Still University- Arizona School of Dentistry and Oral Health. Dr. Carroll went on to complete a 2-year post-doctoral specialty education program in pediatric dentistry at Temple University Hospital in Philadelphia. Dr. Carroll is a Diplomate of the American Board of Pediatric Dentistry. Dr. Carroll is also a professor at the USC pediatric dental residency at Children's Hospital of Los Angeles. She is a member of the Academy of Breastfeeding Medicine, International Lactation Consultant Association, and International Affiliation for Tongue Tie Professionals.

Dr. Shari Carroll Pediatric Dentistry
1611 S. Catalina Avenue, Suite 100
Redondo Beach, CA 90277
(310) 357 4414
latchdoctor.com
redondobeachkidsdentist.com

American Academy of Pediatric Dentistry. Policy on Dietary Recommendations for Infants, Children, and Adolescents. 2017;(40)65-67.

Dezio, Maria, Piras, Aleesandra, Gallontini, Livio, Denotti, Gloria. Tongue-tie, from embryology to treatment: a literature review. Journal of Pediatric and Neonatal Individualized Medicine. 2015;4(1):e040101.

Simaremare, Susy Adrianelly, Ria, Ngena, Rosma, Manta, Simaremare, Tiurlan. Breastfeeding and Its Effects on Dentocraniofacial Growth and Development of 4-5 years old children in Batak Ethnics. Journal of Biology, Agriculture, and Healthcare. 2017;(7)2224-3208.