

ADA NSW FACT SHEET ON HOW OFTEN YOU SHOULD SEE A DENTIST

Regular routine check-ups are important - not just for the teeth but also the gums and the mouth as a whole. If there are any changes that need to be treated, such as tooth decay or gum disease, these can often be detected in the early stages, making treatment more straight-forward. Regular visits can also help identify risks so that preventive strategies can be put in place.

Most dentists recommend a routine dental check-up every 6 to 12 months, but a cookie cutter approach does not necessarily work for everyone. Some may need to visit a dentist more or less frequently and the dentist will advise how often a check-up is required.

Important things that will be checked include:

- Oral hygiene and Diet
- Health of teeth, lips, cheeks and gums and risk of tooth decay and gum disease
- Signs of tooth wear
- Growth and alignment of the teeth and jaws and problems with the bite

Childhood

It is recommended that children have their first dental check by their first birthday¹. If it is not possible to get to a dentist, the first dental check may be done by a child health professional with training in oral health². Low risk children should visit their dentist at least once a year, while other children may need to visit the dentist every 3 to 6 months until their risk of decay has been stabilised.³ Timing can be important for correction of orthodontic (bite) problems, so regular dental check-ups are important during the transition from baby teeth to adult teeth.

Other important things that may be checked include:

- Infant feeding patterns
- Habits such as dummy sucking or thumb sucking

Adolescence

Adolescence may be a time with greater diet and social risk factors, such as soft drink or alcohol consumption, and smoking. Teenagers may also have poor tooth brushing habits, with around 45% of teenagers brushing their teeth less than twice a day⁴. Adolescents at low risk of tooth decay should visit their dentist at least once a year, while those at higher risk may need to visit the dentist every 3-6 months until their risk of decay has been stabilised³. Regular dental checks are necessary during early teenage years to see if braces or other bite correction may be required. Adolescents with braces also need regular check-ups with their general dentist to ensure they stay decay-free.

Other important things that may be checked include:

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- Habits such as grinding/clenching the teeth or smoking
- Oral piercings

Adults

Each individual's risk of tooth decay, gum disease and oral cancer needs to be regularly monitored throughout life. Existing dental work also needs to be checked as maintenance and replacement of fillings or other dental work will be necessary over time.

A dentist will also consider the effects of other risk factors such as smoking, diabetes and medications that can influence oral health.

Adults with a very low risk of oral disease may only need to visit a dentist every 1 to 2 years⁴ but those at high risk of gum disease or tooth decay may need to visit the dentist every 3 months^{4,5}. A dentist will advise how often visits are required.

Other important things that may be checked include:

- Screening for oral cancer
- Need for repair or replacement of fillings or other dental work
- Habits such as grinding/clenching the teeth or smoking

References

1. Australian Dental Association Policy Statement 2.3.1- Delivery of Oral Health: Special Groups: Children, 2017
2. Early Childhood Oral Health Guidelines for Child Health Professionals, 3rd Edition, Centre for Oral Health Strategy NSW, 2014
3. The Caries Management System: an evidence-based preventive strategy for dental practitioners. Application for children and adolescents, Evans and Dennison, Australian Dental Journal, 2009; 54: 381-389
4. The Caries Management System: an evidence-based preventive strategy for dental practitioners. Application for adults, Evans et al, Australian Dental journal 2008; 53: 83-92
5. Periodontal risk assessment (PRA) for patients in supportive periodontal therapy (SPT). Lang and Tonetti, Oral Health Prev Dent 1: 7-16 (2003)

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