**Caries preventive guidelines for children and adolescents, Region Halland**

General recommendations:

* 3-year-olds should be always be examined and risk assessed by a dentist
* Recall examinations can be performed by dental hygienists (RDH)
* Dentists should monitor the occlusal development and assess the need for orthodontic care, particularly at the age interval between 10-11 years.
* The use of tobacco should be registered from 12 years
* From age 15, the presence of periodontal pocket should be assessed with a periodontal probe around the 1st permanent molars and the upper incisors

**3-6 years**

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| Risk group | Maximal recall interval | Preventive measures |
| 1. **Low risk**  * No clinical signs of active lesions; ”caries free” * No progression of lesions last 2 years | 18 months | * Tooth brushing twice daily with fluoride toothpaste, performed by parents or custodians |
| 1. **Moderate risk**  * Previous history of caries; fillings or arrested lesions * Some general risk, chronic diseases, social risk and/or suboptimal parental care | 18 months | * Tooth brushing twice daily with fluoride toothpaste, performed by parents or custodians * Professional fluoride varnish applications every 6th month |
| 1. **High risk**  * Active caries development; new initial or manifest lesions * Increased general risk, chronic conditions such as asthma, diabetes, feeding problems, social risk and/or suboptimal parental care | 12 months | * Tooth brushing twice daily with fluoride toothpaste, performed by parents or custodians * Professional fluoride varnish applications every 3rd month * Fissure sealing of newly erupted 1st permanent molars * Individually targeted supplements, such as MI, sugar reduction |

**7-11 years**

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| Risk group | Maximal recall interval | Preventive measures |
| 1. **Low risk**  * No detectable lesions or single minor occlusal/buccal lesions related to tooth morphology * No lesion progression in primary teeth during the last 2 years | 18 months | * Tooth brushing twice daily with fluoride toothpaste, performed or supervised by parents or custodians |
| 1. **Moderate risk**  * 1 new dentin lesion and/or 1-2 new or progressing enamel lesions * Some general risk factors, such as chronic diseases, overweight, obesity, social risk factors | 18 months | * Tooth brushing twice daily with fluoride toothpaste, performed or supervised by parents or custodians * Professional fluoride varnish applications every 6th month * Fissure sealing of newly erupted 1st permanent molars |
| 1. **High risk**  * ≥2 new dentin lesions and/or ≥3 new or progressing enamel lesions * Rapid caries progression in primary teeth * Increased general risk, chronic conditions such as asthma, diabetes, overweight, obesity, social risk factors * Gingivitis not associated with tooth eruption | 12 months | *Caries:*   * Tooth brushing twice daily with fluoride toothpaste, performed or supervised by parents or custodians * Professional fluoride varnish applications every 3rd month * Fissure sealing of newly erupted 1st permanent molars * Individual supplements after motivational interviewing. Example: fluoride mouth rinse (0.05-0.2%)   *Gingivitis*   * Individually targeted care |

**12-19 years**

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| Risk group | Maximal recall interval | Preventive measures |
| 1. **Low risk**  * Caries-free or single minor occlusal/buccal lesions related to tooth morphology * No lesion progression during last 2 years | 18 months | * Tooth brushing twice daily with fluoride toothpaste |
| 1. **Moderate risk**  * 1 new dentin lesion and/or 1-2 new or progressing enamel lesions * Some general risk, such as chronic diseases, social risk, tobacco use | 18 months | * Tooth brushing twice daily with fluoride toothpaste * Professional fluoride varnish applications every 6th month * Fissure sealants, newly erupted molars/premolars |
| 1. **High risk**  * ≥2 new dentin lesions and/or ≥3 new or progressing enamel lesions * Increased general risk, chronic conditions such as asthma, diabetes, overweight, obesity, social risk factors, tobacco use * General gingivitis and/or periodontal pockets ≥5 mm | 12 months | *Caries:*   * Tooth brushing twice daily with fluoride toothpaste * Professional fluoride varnish applications every 3rd month * Fissure sealants, newly erupted molars/premolars * Individual supplements after motivational interviewing. Example: fluoride mouth rinse (0.05-0.2% NaF); high fluoride toothpaste   *Gingivitis/periodontal pockets:*   * Individually targeted care |