

HE'S TOO YOUNG FOR DENTURES

He is too young! He'll never wear dentures! He'll never be able to keep them in? Let's wait until he is 7 or 8! We'll make him an upper denture only around age 7! You're just thinking of yourself! It can't be done!

There are probably many, many more, but these maybe some of the responses that you as parents receive when you take your preschool child for a dental appointment to inquire about dentures to replace missing teeth.

These are most certainly negative responses and does nothing more than frustrate you as a parent especially since you have nowhere else to turn. What the dentist may really be saying is: "I have been making dentures for adults, and you expect me to treat this 2 or 3 year old?" "I'm really uninformed about the nature of the problems associated with Ectodermal Dysplasia". "I've never really made dentures for someone this small". "I was not taught this in dental school". To me these responses indicate the dental profession needs to consider a change in their thinking regarding early treatment for these children. Let me assure you that dentures can be made, should be made and are being made successfully for children at an early age.

It must be realised that the chance of finding a dentist with any experience, let alone extensive experience, in treating the dental needs of children with Ectodermal Dysplasia is going to be rare. The chance of treating a pediatric case during training, even in speciality programmes, is not very great. The chance of seeing cases in the average dental practice is also rare. Most of us have become educated in these cases through trial and error and I admit that I too was somewhat skeptical about proceeding with making dentures for 2 and 3-year olds. When encountering my first patient my feeling was then and remains so today, that we have much more to gain if the dentures are successful than we have to lose if unsuccessful. The basic procedures for denture construction is the same for a child as for an adult, everything is just smaller and we, dentists and parents, have to be aware that treating what the teeth are attached to – the child – is as important as the mechanics involved. The overall experience for the child, family and dentist will make further treatment easier for everyone in the future.

Let's look at some of the positive results that can be accomplished with dentures for the young child affected with Ectodermal Dysplasia.

- 1 Improved jaw development and tissue development around the mouth.
- 2 Improved aesthetics – dentures will create an age appropriate facial appearance. The child does not have the "old man" appearance resulting from over closure of the jaws.
- 3 Improved social well being – the child becomes happy and smiles instead of frowning, for the most part he looks like his peers. He is not afraid to interact with other children.
- 4 Improved psychological well being – the child will feel better about himself and as a result will exhibit more self-confidence. Small children affected with an obvious physical deformity, such as the lack of teeth, run the risk of low self-esteem.
- 5 Improved mastication – there is no doubt that the child will function better with teeth than without teeth and quite possibly will not be affected with some of the digestive disorders which may be associated with having no teeth.

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- 6 Improved speech development – speech will be much improved resulting in an increased vocabulary and communicative skills as well as interpersonal relations.
- 7 Psychological uplift to the entire family.

Early treatment for the child without teeth is important and necessary. By improving the child's appearance, we provide for a more normal physical development through better nutrition and psychological development; through better social and emotional adjustment. The impact can be quite dramatic.

The transition may not be without traumatic incidences. Problems do and will arise. But in most instances, these hurdles can be cleared through a cooperative effort between the child, parents and the dentist.

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