Early Childhood Caries: Parent’s Knowledge, Attitude and Practice Towards Its Prevention in Malaysia

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1. Introduction

Early childhood caries (ECC) is defined as the presence of 1 or more decayed, missing or filled tooth surfaces in any primary tooth in a child 71 months or younger (Drury et al., 1999). ECC is the most common chronic disease in young children and may develop as soon as teeth erupt (Douglass et al., 2004). It is a significant public health problem and certain segments of society, such as the socially disadvantaged have the highest burden of disease (Vargas & Ronzio, 2006). In the US, although prevalence of caries was decreasing overall, the severity was increasing in these groups of people (Douglass et al., 2002).

A number of risk factors are associated with ECC, which can be broadly classified into biological and social risk factors (Berg & Slayton, 2009). Biological risk factors include nutritional variables, feeding habits and early colonization of cariogenic micro-organisms. Social risk factors comprise low parental education, low socio-economic status and lack of awareness about dental disease (Hallett & O'Rourke, 2003). ECC affects the quality of life of families and their affected children due to dental pain and subsequent tooth loss resulting in difficulty in eating, speaking, sleeping and socializing (Edelstein et al., 2006; Pahel et al., 2007). Treatment of ECC has numerous inherent difficulties. It is costly (Casamassimo et al., 2009; Kanellis et al., 2000) and takes up time of the child and caretaker (Casamassimo et al., 2009; Vargas & Ronzio, 2006). Not all dentists are trained to handle children and many general practitioners are not keen to treat young children (Vargas & Ronzio, 2006). Treatment necessitates extensive rehabilitation under general anaesthesia and recurrence rates of caries are high thus requiring retreatment (Almeida et al., 2000; Tate et al., 2002). Hence the dental profession favours a preventive approach towards management of ECC (Ismail, 2003; Vargas & Ronzio, 2006). The earliest form of prevention can be achieved by educating parents and primary caregivers about ECC. Preventive guidelines towards ECC are found in many countries and most have their own individualized programs which aim at training parents to recognize ECC early and seek treatment. Anticipatory guidance is one of the approaches used at antenatal visits and for new mothers (Meyer et al.; Plutzker & Spencer,