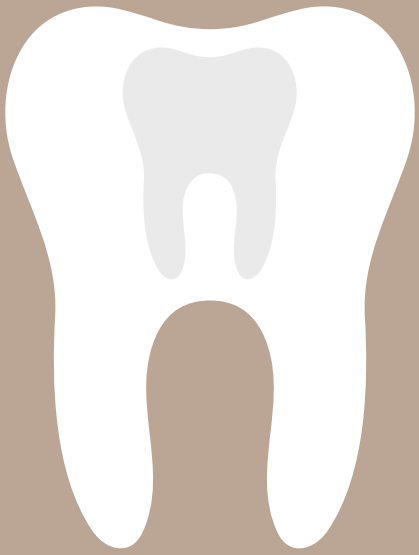


LET'S TALK ABOUT

LITTLE TEETH

A PARENT'S SIMPLE GUIDE TO:
BABY TEETH • TEETHING •
BRUSHING • HEALTHY HABITS

Little Mouths by
Oxenbridge Oral Health.

OXENBRIDGE_ORAL HEALTH

5 THINGS I WISH EVERY PARENT KNEW ABOUT BABY TEETH

01 — THEY MATTER FROM THE VERY FIRST TOOTH.
BABY TEETH AREN'T SIMPLY TEMPORARY TEETH WE WAIT TO LOSE. THEY HELP YOUR CHILD EAT, SPEAK AND MAINTAIN SPACE FOR THEIR DEVELOPING ADULT TEETH.

02 — DECAY CAN START EARLIER THAN YOU THINK.
YOU DON'T NEED A FULL MOUTH OF TEETH FOR DENTAL PROBLEMS TO BEGIN. PREVENTION STARTS WITH THE FIRST TEETH.

03 — TEETHING DOESN'T EXPLAIN EVERY SYMPTOM.
DROOLING, CHEWING AND TENDER GUMS CAN OCCUR WITH TEETHING. HIGH FEVERS, DIARRHOEA OR A GENUINELY UNWELL BABY SHOULDN'T AUTOMATICALLY BE DISMISSED AS "JUST TEETHING.

04 — YOU DON'T HAVE TO GET EVERYTHING PERFECT.
BRUSHING BATTLES HAPPEN. BOTTLES DON'T DISAPPEAR OVERNIGHT. KIDS AREN'T ROBOTS. SMALL, CONSISTENT CHANGES MATTER.

05 — YOUR CHILD'S MOUTH CAN TELL US MORE THAN YOU REALISE.
HOW THEY EAT, BREATHE, SLEEP AND USE THEIR MOUTH CAN ALL BE WORTH PAYING ATTENTION TO AS THEY GROW.
THEN AT THE BOTTOM, IN A LITTLE HANDWRITTEN-STYLE OR ITALIC SECTION:
MY GOAL WITH THIS GUIDE?
TO HELP YOU UNDERSTAND WHAT MATTERS, WHAT DOESN'T, AND WHEN IT MIGHT BE WORTH ASKING FOR HELP.

— KASEY X

INTRODUCTION

Hi, I'm Kasey — Oral Health Therapist and founder of Little Mouths.

During my own postpartum journey, I noticed how many parents were left with unanswered (and often conflicting) questions about their baby's teeth — from teething and speech development to whether their child might need braces one day. With years of experience working closely with babies, children, and families, I've seen firsthand how early guidance can make a powerful difference. The right support early on can help prevent unnecessary pain, stress, and dental treatment later in life — well into adulthood.

I'm also a mum of two, which means I truly understand how overwhelming oral health advice can feel in those early years. My goal is to offer realistic, evidence-based care that fits into busy family life — without pressure, guilt, or the expectation of perfection.

THIS GUIDE IS DESIGNED TO GIVE PARENTS CLARITY AND CONFIDENCE — NOT OVERWHELM.



CHAPTER I

WHY BABY TEETH MATTER?

Baby teeth are essential, not “ ”Just temporary”

Baby teeth help maintain space for developing adult (permanent) teeth.
When a baby tooth is lost earlier than expected, nearby teeth can drift into that space. This may reduce the room available for the adult tooth and contribute to crowding or alignment concerns as your child grows.

Support eating, speech, and sleep.

Healthy teeth help children chew comfortably, explore different foods and support clear speech.
Keeping little mouths healthy and pain-free can also make everyday things like eating and sleeping more comfortable.

It not about perfect, its about starting early.



Dental problems can start early

34% of children aged 5–6 years have experienced decay in their primary or baby teeth.
27% of children aged 5–10 years have untreated decay in their primary teeth (ADA, 2024). Early decay often develops quietly without obvious symptoms, which is why prevention and early habits matter.

CHAPTER I

WHY BABY TEETH MATTER?

THE FIRST TOOTH HAS ARRIVED... NOW WHAT?

01 Start brushing

Once that first little tooth appears, it's time to make brushing part of your child's daily routine.

Don't worry about perfection in the beginning. The goal is to build familiarity and consistency.

02 Make it part of their routine

Introducing brushing calmly and early can help children become familiar with having their teeth cleaned.

Let them hold and explore the toothbrush — but remember, an adult still needs to do the brushing.

03 Think prevention, not treatment

Small habits started early can help reduce the risk of common dental problems and the need for treatment later in childhood.

You don't need an elaborate routine.

Start early. Keep it simple. Stay consistent.

04 Plan their first dental visit

Don't wait for something to hurt before introducing your child to dental care.

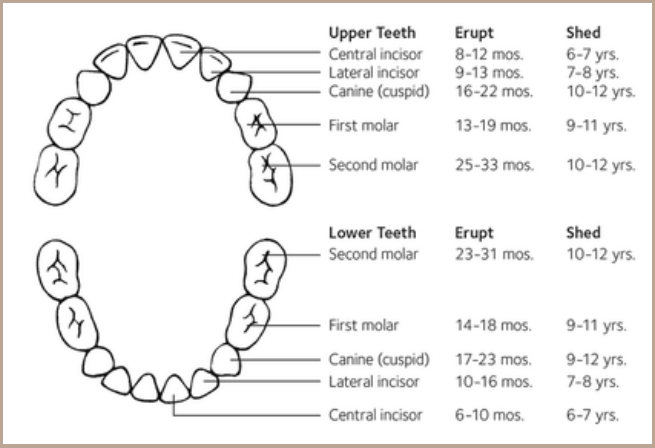
Early visits give your child an opportunity to become familiar with the environment and give parents a chance to ask questions before there's a problem.

KASEY'S TIP

Don't stress if your baby only lets you brush for a short time at first.

CHAPTER II

WHEN DO BABY TEETH COME IN?



DON'T ASSUME IT'S "JUST TEETHING"

Most babies get their first tooth around 6–10 months, but every baby is different.

Some babies may get their first tooth as early as 3 months, while others may not have one until around 12 months.

Drooling, chewing on hands and fussiness are also common parts of normal baby development, so these signs don't always mean a tooth is on the way.

Look for changes around the gums too — such as tenderness, redness or swelling where a tooth may be starting to emerge.

Top 5 teething symptoms

COMMON SIGNS OF TEETHING

✓ Tender or slightly swollen gums

✓ Increased drooling

✓ Chewing or biting more than usual

✓ Mild irritability or unsettled behaviour

✓ Changes to sleep or feeding

NOT EVERYTHING IS "JUST TEETHING"

High fever • Diarrhoea • Widespread rash • Your child appearing genuinely unwell

These shouldn't automatically be dismissed as teething. Seek appropriate healthcare advice when needed.

Age 3, most children have 20 baby teeth.

CHAPTER III

TEETHING: WHAT ACTUALLY HELPS

Teething can be uncomfortable for some babies, but it doesn't have to be overwhelming.

WHAT ACTUALLY HELPS

Gentle gum pressure: Gauze with cold water, clean fingers, silicone teethers etc

Something cool to chew

Try a chilled teething ring or age-appropriate chilled foods. Cool temperatures can be soothing on tender gums

Extra comfort: Cuddles, feeding and routine help babies feel secure.

Pain relief when needed

If your baby seems particularly uncomfortable, speak with your pharmacist, GP or other healthcare professional about appropriate pain relief for their age.

WHAT TO AVOID

❌ Using teething gels or medicines without checking first

Not all teething products are suitable for every child. Check the active ingredients and age recommendations, and ask your pharmacist, dental practitioner or doctor if you're unsure.

❌ Dismissing illness as "just teething"

Teething should not cause severe illness. If your child has fever, diarrhoea or appears unwell, seek medical advice rather than assuming teething is the cause.

CHAPTER IV

CLEANING & BRUSHING BASICS

WHAT TOOTHBRUSH?

Look for:

- ***Small head • Soft bristles • Age appropriate***



FIRST TOOTH TO 17 MONTHS
BRUSH/CLEAN THE TEETH ONCE OR TWICE DAILY. FOR A CHILD AT LOW CARIES RISK, NO TOOTHPASTE IS RECOMMENDED. IF CARIES RISK IS HIGHER, THE ADA'S PRACTICAL GUIDELINE ALLOWS A SMEAR OF LOW FLUORIDE TOOTHPASTE (500 PPM) FROM ERUPTION ON PROFESSIONAL ADVICE.



18 MONTHS TO 5 YEARS INCLUSIVE
BRUSH TWICE DAILY USING A SMALL PEA-SIZED AMOUNT OF LOW-FLUORIDE TOOTHPASTE CONTAINING (500–550 PPM) FLUORIDE. THE CHILD SHOULD SPIT IT OUT, NOT SWALLOW AND NOT RINSE.



6+ YEARS
BRUSH AT LEAST TWICE DAILY USING STANDARD FLUORIDE TOOTHPASTE (1000–1500 PPM FLUORIDE).
SPIT, DON'T SWALLOW AND DON'T RINSE.
PARENT HELP MATTERS
CHILDREN GENERALLY NEED HELP AND SUPERVISION WITH BRUSHING UNTIL AROUND 8 YEARS OF AGE.



First dental visit is ideal around first birthday or once the first teeth arrive.

Routine

Make it routine & fun.

- Times
- Sticker charts
- Music or songs

“ THIS IS JUST THE BEGINNING”

STAY TUNED FOR MORE INFORMATION AND EDUCATION

THINGS WORTH MENTIONING TO A HEALTH PROFESSIONAL

MOUTH BREATHING: DOES YOUR CHILD REGULARLY BREATHE THROUGH THEIR MOUTH RATHER THAN THEIR NOSE?

SNORING: REGULAR SNORING ISN'T SOMETHING I'D SIMPLY IGNORE — PARTICULARLY IF YOU'RE ALSO NOTICING RESTLESS SLEEP OR DAYTIME CONCERNS.

FEEDING & CHEWING: DIFFICULTY CHEWING, AVOIDING CERTAIN TEXTURES, POCKETING FOOD OR CONSISTENTLY CHEWING ON ONLY ONE SIDE MAY BE WORTH DISCUSSING.

SPEECH: IF YOU'RE CONCERNED ABOUT YOUR CHILD'S SPEECH OR HOW THEY'RE USING THEIR TONGUE AND MOUTH, IT'S OKAY TO ASK QUESTIONS.

DENTAL CHANGES: PAIN, SENSITIVITY, UNUSUAL SPOTS OR CHANGES IN THE APPEARANCE OF THE TEETH DESERVE ATTENTION.

DENTAL TRAUMA: LITTLE PEOPLE FALL! IF A TOOTH IS KNOCKED, CHIPPED, DISPLACED OR INJURED, CONTACT A DENTAL PROFESSIONAL FOR ADVICE.

5 THINGS PARENTS OFTEN DON'T REALISE

Common things loving parents do without realising the impact.

- REGULAR SNORING & MOUTH BREATHING ARE WORTH NOTICING

An occasional snore when your child is sick is one thing.
But regular snoring, mouth breathing or sleeping with an open mouth is worth mentioning to an appropriate health professional — especially if you're noticing other sleep, breathing or daytime concerns.

- TAKING A BOTTLE TO BED CAN AFFECT TEETH

Once teeth arrive, frequently falling asleep with a bottle containing milk or other drinks can increase the amount of time teeth are exposed to sugars overnight.
The goal isn't perfection — it's gradually working towards water being the only drink offered in bed.

- JUICE & POPPERS AREN'T EVERYDAY DRINKS

Even drinks marketed towards children can contain sugars and/or acids that increase the risk of tooth decay and erosion.
Water is the best everyday drink.

- “THEY'RE ONLY BABY TEETH” ISN'T A REASON TO SKIP BRUSHING

Those little teeth have important jobs to do for years.
Starting healthy habits early can help protect them while also making brushing simply part of everyday life.

- DON'T WAIT FOR PAIN TO THINK ABOUT DENTAL CARE

A dental visit doesn't need to start with a problem.
Early preventive care gives parents an opportunity to ask questions, identify concerns and help children become familiar with dental visits before something hurts.

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The author is a registered Oral Health Therapist with experience working with infants and children. This guide reflects current knowledge and clinical experience but is not a substitute for individualised clinical assessment.

Telehealth Australia Wide
In person consultations Yeppoon

Little Mouths
by Oxenbridge Oral Health

Children's Oral Health &
Myofunctional Care

Telehealth Australia-wide
In-person consultations | Yeppoon

0413925631

littlemouthsbyoxenbridge@gmail.com

www.littlemouths.com.au