TRAUMA TO BABY TEETH

Trauma to primary anterior teeth (baby front teeth) occurs reasonably frequently. Fortunately, most children receive little, if any, visible damage to his/her primary anterior teeth. However, there is the possibility of problems developing following a traumatic dental incident.

The following are signs and/or changes that you will need to look for in the coming weeks and months:

1. **Color change:** The traumatized tooth/teeth may discolor. The discoloration may vary from light gray or yellow all the way to a dark gray or brown.

2. **Abscess:** A “gum boil” may form above the traumatized tooth/teeth.

3. **Swelling:** Generalized swelling may occur in the vicinity of the traumatized tooth/teeth and can cause temporary lip or facial disfiguration.

4. **Mobility:** The traumatized tooth/teeth may become very loose after they have initially tightened following the original traumatic incident.

5. **Discomfort:** Complaints of discomfort associated with the traumatized primary tooth/teeth can occur. An example would be your child not wanting to use his/her front teeth for biting and chewing.

Please keep your child on a soft diet for the first five to seven days following the traumatic incident. Acetaminophen (“Tylenol”) or Ibuprofen (“Advil”) may be taken every 4-6 hours as needed for discomfort. In most cases, Dr. Elliott and Dr. Molina will want to examine your child within 4 to 10 weeks following the initial traumatic incident. In addition, a follow-up x-ray of the traumatized teeth usually will be required. This x-ray is necessary to monitor the condition of the pulpal tissue (nerve and blood supply) of the traumatized tooth/teeth.

If any of the changes listed above occur, or if you have any additional questions, please contact our office as soon as possible.