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Oral Hygiene Right from the Start



# Contents

## The Start

Introduction by Dr. Yvonne Wagner and Peter Röhrig.....	4
<b>Chapter 1: Pregnancy</b> .....	6
<b>Chapter 2: 0–3 Months</b> .....	10
<b>Chapter 3: 4–6 Months</b> .....	14
<b>Chapter 4: 7–9 Months</b> .....	20
<b>Chapter 5: 10–12 Months</b> .....	24
<b>Chapter 6: Year 2</b> .....	30
<b>Chapter 7: Year 3</b> .....	36
<b>Oral Care Products</b> .....	40
<b>Mini Teethers</b> .....	42
<b>Teethers</b> .....	44
<b>MAM Principle</b> .....	46
<b>Masthead</b> .....	47





**Dr. Yvonne Wagner**

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MAM Founder

# The start

There is so much to enjoy. So much excitement. Every day with baby is a wonderful new adventure. If only it wasn't for the parental need to always get it right. Of course we want to, but the question is how?

Take oral hygiene and dental health for example: their importance from very early on – even before birth to be precise – is widely known. Not least because nowadays, healthy teeth are an integral part of a healthy adult lifestyle.

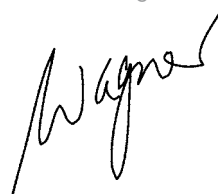
But when should you really begin with babies? What is the correct method? How much is too much?

The MAM 'Oral Hygiene' brochure is here to help. We have compiled the brochure together with Dr. Yvonne Wagner, dentist at the Jena University Clinic for Preventive Dentistry to make getting it right easy. This is a step-by-step guide from pregnancy up to three years of age, which easily explains oral and dental development.

It also contains valuable knowledge and practical tips about what is important for

- Breastfeeding
- Breathing
- Sucking
- Feeding
- Cleaning
- Skin Care

So that babies get the best start in life.  
For a winning smile that lasts.



Dr. Yvonne Wagner



Peter Röhrig

# Chapter 1: Pregnancy

## The teeth are already there.

As early as the 6<sup>th</sup> week of pregnancy. Some mothers still don't know they are expecting. The tiny baby is already growing teeth. More precisely, the foundation for teeth, the so-called dental ridge is forming. Inside the dental ridge, the baby teeth are developing and shortly afterwards the permanent teeth begin to develop.

Between the 4<sup>th</sup> and 6<sup>th</sup> month of pregnancy, after the first hard tooth structures (tooth cementum) are formed, they start to mineralise. Babies are born with nearly finished tooth crowns, which move towards the surface during the first months of life. Only the roots need more time – until the child is between two and three years of age.

## Starting early.

Unbelievable, how fast nature works:

- In the 9<sup>th</sup> week of pregnancy all internal organs are developed.
- Shortly afterwards the legs, arms and fingers are already visible.
- In the 18<sup>th</sup> week parents can watch the unborn baby sucking its thumb.
- In the tummy sensory experiences begin including hand movements, swallowing and sucking.
- Baby learns about touch: by feeling, sucking, rubbing and pushing baby discovers his surroundings.
- By taking in and pushing out small amounts of amniotic fluid the infant is practicing breathing long before birth.
- At the same time the unborn baby is experiencing smells and tastes – mum's food intake determines the aromas.





### **Oral Care during pregnancy: important for mother and baby.**

From pickled gherkin to chocolate cake and back again – a myth? No. There really is something to the tales of the strange eating habits of pregnant women, and this is primarily due to the changing hormonal balance.

This physical adjustment also affects the oral health of mothers. Additionally, diseases such as Gingivitis and Periodontitis, which are triggered by bacteria in plaque can often develop in the 2<sup>nd</sup> trimester and affect both mother and child. Therefore, maintaining good oral hygiene is now particularly important.

This is easy to do with proper care and know-how:

- Thorough brushing is twice as important now since it is keeping two people healthy.
- Always brush in the morning and in the evening after eating.
- A soft brush and fluoride-toothpaste are ideal.
- The usual toothpaste suddenly tastes funny? Try alternatives such as mild pastes without menthol.



# MAM Med-Info

- Pregnant women often like to snack more – that’s fine, but unfortunately, this is more likely to lead to cavities if it is not followed by brushing. Oral care chewing gum helps prevent cavities.
- The opposite of hunger: morning sickness. When you just have to get it out it’s important to remember that a stannous-fluoride mouth-rinse helps re-mineralise tooth enamel, soothes gums and is anti-bacterial.
- Drink plenty of water. This promotes the production of protective saliva. Plan at least one dental check-up – the best time is between the 14<sup>th</sup> and 20<sup>th</sup> week.
- Combine the visit with a professional oral hygiene treatment – they go hand in hand.



Medical background knowledge for expectant mums, plainly explained by Dr. Yvonne Wagner:

## **Gingivitis:**

This is when the gums become very red, swollen and bleed easily. It can develop – primarily in the 2<sup>nd</sup> trimester of pregnancy – because hormonal changes during pregnancy can lead to a dry mouth and an increase in gum inflammations due to plaque. If the inflammation is not treated, you could be weakening the tooth cementum – so be sure to see your dentist for a check up.

## **Periodontitis:**

The term Periodontitis refers to gum irritation caused by inflammation from plaque, which affects the tooth cementum. This is more likely to happen during pregnancy because certain bacteria and their metabolic waste – they particularly like to ‘feed’ on the hormones oestrogen and progesterone during pregnancy – upset the natural balance in the mouth and attack the gums.

Because untreated Periodontitis is risky for both mother and baby (e.g. high blood pressure for mother, premature birth or a low birth weight for baby can be linked to it), a dental appointment is strongly recommended at the first sign of any symptoms.

# Chapter 2: 0–3 Months

## **Tiny mouth, big responsibility.**

Even if shortly after birth there is nothing to see: the teeth are already there, almost complete in the dental ridge. In addition, when baby teeth are examined in laboratories you can even tell when they too were born into the world: during birth, the cells responsible for enamel production (Ameloblasts) take a break – and this can be seen in the enamel as the so-called birth, or neonatal line.

The first cry is the first big task for the tiny mouth. But this is by no means everything the little mouth has to do during development: the mouth is crucial in determining the individual, distinctive facial expression – and performs vital functions such as breathing, chewing, swallowing, tasting, talking and feeling.

**Breathing.** As surprising as it sounds: healthy breathing through the nose only works if everything in the mouth is okay. Parents should ensure that their baby can seal his lips properly – and talk to their doctor about this.

**Chewing.** So that eating becomes an enjoyable and healthy experience later, the muscles required for this are already practicing. Breathing through the mouth or constant thumb sucking must not interfere with this training.

**Swallowing.** For the first few years, babies have their tongue between the teeth when swallowing. Later – and this is important for learning to talk – the tongue will lie on the palate.

**Tasting.** Babies have five times as many taste buds on their tongues than adults – they therefore experience sweet, salty, sour and bitter with far greater intensity.

**Talking.** Oral health and dental development are also vital for ensuring that children are ready for their first words. Speaking is not just about thinking, but also about movement of the tongue and mouth.

**Feeling.** The nerve endings in the mouth and lips are far more sensitive than practically any other body part. No wonder that babies soon like to use them to discover their environment.



## Healthy affection for tiny ones.

- From a very early age it is good for babies if some of the loving attention they are given is devoted to the lips and the inside of the mouth. This way they learn about feeling and that oral care is simply a part of everyday life.
- Cuddling whereby baby's mouth is exposed to adult saliva should be avoided. Caries promoting bacteria do not emerge on their own, they are passed on. Now they can flourish because the newborn has yet to develop his individual, balanced oral flora.
- To avoid these bacteria being passed on, a dropped soother for example, should be cleaned.
- Almost no mother-baby contact is as intimate as breast-feeding. Moreover, it's healthy for the mouth: babies get food that optimally strengthens their immune system, train their facial muscles and it builds the necessary skill that they will later need for eating.
- The MAM Oral Care Rabbit is ideal for this first step. It cleans baby's mouth and removes plaque and bacteria right from the start. Simply slide your index finger into one of the two ears.



Easy use of the Oral Care Rabbit

# MAM Med-Info



Dr. Yvonne Wagner, dentist at the Jena University Clinic and specialist for preventive dentistry, on the healthy bacterial balance of baby's oral flora:

"As adults we live with up to 700 different micro-organisms in our mouths without a problem. Babies are born without such bacteria. It takes time for them to develop their own balanced oral flora. For example discovering their environment orally means putting things that interest them into their mouths. This is good. When the teeth come through and a healthy, balanced oral flora is there to protect them, bacteria that cause caries cannot establish themselves so easily."

**Bacteria that cause caries** are mainly the *Streptococcus mutans* and *Lactobacilli*. They are passed on via saliva – mainly from the people closest to the child. In this context, it is important to say that a soother should only go in baby's mouth, no other!

Most children have developed a relatively **stable oral flora** by four years of age. If by this time bacteria forming caries have not been able to establish themselves, then these are the best conditions for lasting healthy teeth.

# Chapter 3: 4-6 Months

## Preparations for the start.

For most children their first tooth comes through at about 6 months. Under the surface however, preparations are underway. Especially now, when babies are enjoying discovery with their mouths – they are going through the so-called 'oral phase' – they strongly feel the sudden new tingling, itching and pushing sensations. Parents can also notice the change when baby kisses become wetter – teething causes increased saliva production.



## The good news.

Mother Nature did not plan teething as a painful process. Real complications – fever or colic – are rare. It is more the new and unfamiliar that irritates babies in their oral phase. Here parents can help by

- Giving the newborn a sense of their mouth with gentle stroking (see chapter '0-3 months').
- Facilitating easy relief with correct cooling and massaging (tips on the following pages under 'What babies need now')
- Not least, by using their own knowledge about teething to relax – thereby not passing any stress onto the child.

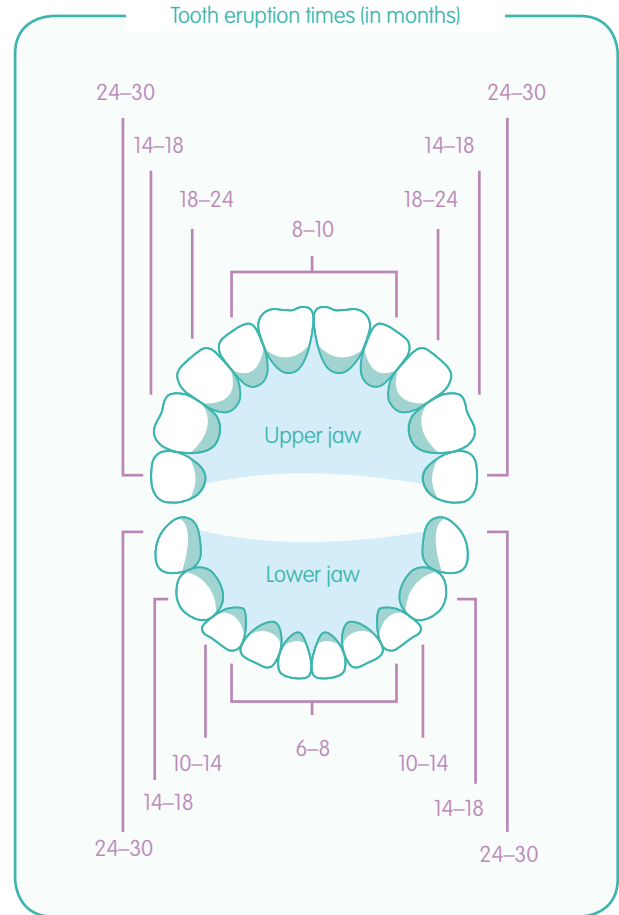
MAM Bite & Relax



### Teething time-planner.

It doesn't take parents long to realize that a child's development does not always stick to given timeframes. For this reason, the following plan is only an approximate guideline for teething:

- In the 6<sup>th</sup> week of pregnancy the formation of the dental ridge is already underway; the substances for baby teeth develop.
- Between the 4<sup>th</sup> and 6<sup>th</sup> month of pregnancy hard tooth structures develop; at birth, the tooth crowns are already finished.
- In individual cases babies are born with a visible tooth – don't worry, even this is within normal boundaries.
- Generally, the preparation for teething starts from 4 to 6 months.
- Between 6 and 8 months of age it is likely that an incisor (bottom middle) will appear first.
- Followed shortly by the top middle incisors, then the side ones.
- Around 14 months the first molars arrive, then the canines.
- Finally, the second molars can be expected from the second birthday.
- The complete set of baby teeth consists of 20 teeth – 8 incisors, 4 canines and 8 molars.





### What babies need now.

When new tingling, itching and pushing sensations are suddenly felt due to growing teeth beneath the surface, babies particularly like to put things in their mouths and chew on them. This provides relief. Everything that cools feels good, usually the next best object within reach, is chewed on until it reaches body temperature. There are household remedies and medicinal products, but they have their down side:

- Bread crusts don't look particularly attractive to babies, and attention must always be paid that they are only chewed and not swallowed (risk of choking).
- Cooling, pain relieving gels or teething suppositories from the chemists are medicinal – okay for occasional and brief usage, but definitely not a long-term solution.

Oral care accessories developed especially for infants are better for the job. Babies like them and they offer good relief. With the Bite & Relax Mini Teethers, MAM has created two especially small teethers to perfectly fit baby's age and development. Thanks to their special shape the Mini Teethers are ideal for reaching the front and back teeth which make them perfect companions for the two phases of teething.





MAM Cooler

Looks cool – and is cooling: the MAM Cooler teether with cooling water-filled element. Safer than household remedies and medicine, it offers babies just what they are looking for: it is easy to hold and completely safe to chew on. The different surfaces are fun to experiment with. In addition, the shape is such that the cooling element can comfortably reach even the molars. The MAM designers thought about practicality too and it's possible to attach a clip to the Cooler – this way the MAM Cooler stays clean.



The MAM Massaging Brush is not only ideal for cleaning the very first teeth. Parents can also use it to give their child an oral massage, which helps combat itching and tingling. The shape and brush head make it possible to reach all parts of the mouth and the right spots accurately. The long handle invites babies to hold on and join in.

# MAM Med-Info



Some tips from Dr. Yvonne Wagner about the first tooth:

“Before the first teeth come through it is normal for children to have what is for them, a new and irritating feeling in their mouths. Suitable baby products such as massaging brushes or cooling teethers can help them relax. Only in very rare cases are there real complications, such as eruption cysts. You will recognize them as bluish tight swellings on the dental ridge. This small problem above the emerging tooth can be quickly, completely and painlessly removed by your dentist.”

Caries prevention with fluoride is important at this stage. When the child is 6 months old and the water available to him at home has less than 0.3 ppm fluoride you can start with a daily fluoride dosage of 0.25 mg. Children's toothpaste containing fluoride (500 ppm) can be used or fluoride tablets can be taken and sucked daily. But please don't overdo it: long-term over dosage of fluoride causes a harmless but unattractive yellowish brown discolouring of the tooth enamel to appear later on.



# Chapter 4:

## 7–9 Months

**Baby teeth: they only last a few years, yet are important for a lifetime.**

It will probably be an incisor, in the middle at the bottom that appears first. This first tooth and the 19 other baby teeth need plenty of care from day one – not only because the enamel-mineral coating is thinner than that of the second, permanent teeth. They also fulfil many important functions that last into adulthood.

- Having a healthy set of baby teeth influences the development of facial features as well as the child's ability to learn to talk properly.
- The first teeth are indispensable 'place-keepers' for the second, permanent set; especially the canines and baby molars: they ensure that in the final set of teeth, everything will be in its proper place.

It is really worth taking care of the child's baby teeth from now until puberty when the 'last of the first' fall out. In addition, the dentist bills quickly add up if problems with baby teeth have to be treated orthodontically.

**Good habits learnt early.**

The ideal position for oral care during the first months is to lay the child on the changing table or bed so that all tooth surfaces are visible. Push the lips away a little and then always clean from 'red to white'. That is, from the gum to the tooth.

If babies have gained a sense of their mouth from a very early age (see chapter 0–3 months), brushing will now be relatively easy. If there are a few tears, stay at it. Lots of love and patience as well as a customary evening ritual help every child get used to this good habit.



recommended amount of toothpaste  
small child



recommended amount of toothpaste  
baby



### First class care for first teeth.

Up until the first teeth appear, oral care accessories like the MAM Oral Care Rabbit are ideal. Parents can use it to easily and gently clean baby's mouth. Babies comfortably get used to the hygiene programme.

- As soon as the first small white tooth has arrived, things really get moving. MAM massaging brushes and baby toothbrushes have the perfect shape and the bristles are really effective.
- Teething is also a sign that supplementary food is becoming necessary because breast milk alone no longer provides all of the nutritional requirements. Usually, babies are able to sit and eat from a spoon at around 9 months or soon after.
- Important for food preparation: baby's spoon should only go in baby's mouth and no other since caries promoting bacteria could otherwise be passed on.
- Start a regular meal plan, which also supports regular tooth brushing. Frequent, uncontrolled breast-feeding or an always available bottle, particularly at night, should be avoided.
- Infants should have a daily brushing time in the evening after eating. For small children there should be an additional time for brushing in the morning.

- To prevent caries children's toothpaste with adequate fluoride levels (500+ ppm) can be applied to both the MAM Oral Care Rabbit and the brush bristles. Tempting fruit flavours are not such a good idea – they make you want to snack instead of clean.
- How much toothpaste? For infants only a thin layer is needed. Apply a 'hin' of toothpaste to the area marked on the bristles. For toddlers, a pea-sized amount works well.
- As soon as babies are able to hold onto things easily the MAM Training Brush puts them on the right track for healthy oral hygiene: parent and child hold and guide the long handle together – this way learning is also lots of fun.

Last but not least, the arrival of the first tooth also signals that it's time for the first dental appointment. If baby gets used to these early, then regular dental check-ups are no big deal and just a part of having healthy teeth. Dentists not only check the proper development of teeth and jaw, check for caries and protect susceptible baby teeth with a fluoride sealing, they also advise parents about oral care for babies, food for healthy teeth and successful treatment programmes.

# MAM Med-Info



Dr. Yvonne Wagner, dentist and MAM medical partner, recommends caries prevention for even very small teeth:

“Early Childhood Caries (ECC) is the most widely spread infectious illness in children – it affects approximately a fifth of all two and three year olds. ECC results from certain microorganisms that find a hold in the mouth and then turn sugar – including fructose! – from food intake, to acid. Significant damage can be done to the very first baby teeth and only the dentist is in a position to recognize problems early.”

Important for prevention and treatment:

- Daily oral hygiene, regular dental appointments – right from the start.
- Fluoride intake – in toothpaste or as a fluoride sealing at the dentists. Important: get specialist advice about dosage because too much can cause tooth stains.
- Sweetened or acidic drinks and fruit juices should only be given at mealtimes – the ‘constant rinse’ from an always-available bottle is harmful, as is uncontrolled nightly breast-feeding.
- Medicine can quickly imbalance the oral flora – talk to the doctor about a dental treatment programme if baby has to take medication.
- Caries promoting bacteria not only come from food, but can also be passed on. For this reason: baby should have a personal baby spoon. Always clean the soother well.
- Parents should also take good care of their teeth – primarily because they can pass infectious bacteria on, but also to set a good example.

# Chapter 5:

## 10–12 Months

### Easy and fun learning.

At 9 months babies are pretty good at using their hands to hold things and guiding movements with their hands. This means they can also brush their teeth. Of course not perfectly and not alone, that will have to wait until they are between six and eight years old, but well enough to make the regular oral care routine an adventure to join in on.

Special toothbrushes for learning, like the MAM Training Brush, are ideal at this stage: the shape and material of the brush head are designed so that all areas of the mouth can be easily reached. The brush handle is extra long and made especially so that parent and child can guide the brush together.

It is important that the daily ritual (for infants 1x a day was enough, now it is slowly time to adjust to 2x a day) is not just necessary but also fun, exciting and playful. Creative parents will have plenty of ideas. For example:

- an easy tooth-counting rhyme,
- a special song,
- a companion from the family of cuddly toys, who naturally brushes his teeth too,
- pictures related to oral care – a beaver gnawing his tree trunk or a rabbit with his carrot,
- demonstrative examples that show how brushing teeth is part of life – always and anywhere, like cleaning under the bonnet when washing a toy car.





## Good examples make good habits.

The most important thing is that parents, relatives and close friends set a good example. Particularly in the first three years babies find 'imitation' extremely interesting. Behaviour that they take on in this phase whether it is good or not will stay with them a long time. Children should therefore see where possible, how mum and dad regularly

- clean their teeth – the 'COI' technique is best – first the chewing surfaces, then the outer tooth surface followed by the inner tooth surface – so that children have a memory aid for imitation
- watch their diet
- visit the dentist (and like to!).



## Healthy variation in baby's food.

Shortly before the first birthday a huge amount is learnt very quickly, every day. Not only are the parents excited about this progress but also the child is just as proud. Progress can also be made with food.

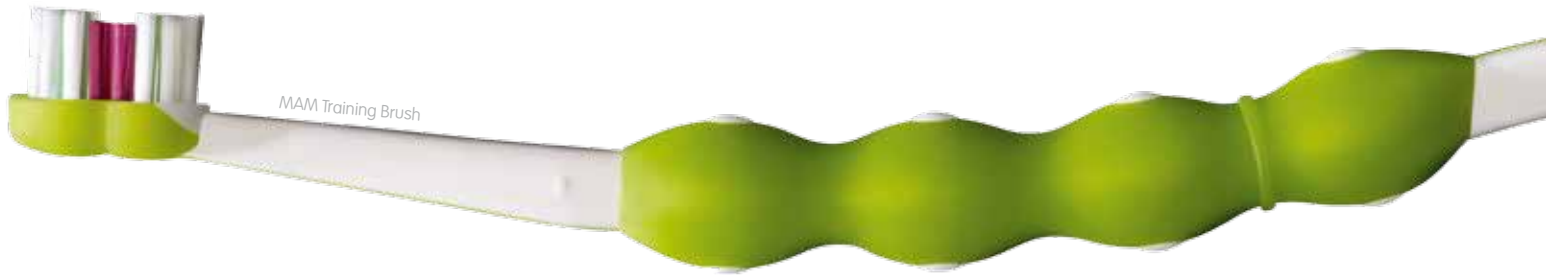
- Drinking yourself is always easier. Training cups developed with developmental psychologists, like the Learn To Drink cup by MAM, offer ideal support, promote coordination and prepare for the transition to a glass or cup.
- Babies optimally train their facial muscles if they learn to chew early – so now and again more solid food should join the menu.
- The more variety meals have, the more exciting they are – parents support the child's development if they practice the chewing and swallowing of different types and consistencies of food with them.
- And naturally, mealtimes are best and the most fun when as many loved ones as possible are at the table.



## Taste can be learnt.

Whether babies will become grown-up snackers or fans of a balanced diet is decided during their first year. It depends on how parents plan meals.

- Babies learn that not everything is to their liking before they are born – they experience different tastes in their mother’s diet just like infants who feed on breast milk.
  - Parents that enable their child to experience and accept plenty of different flavours lay very important foundations for the child’s health.
  - Bitter and sour tastes are the most difficult at first, but often this has more to do with early childhood neophobia (fear of new things), than actual refusal. Preferences are ultimately influenced by learning and experience.
  - Babies like tastes that they know which is why breast-fed babies are more open to new tastes. Breast milk gives them diversity.
- A preference for sweet things is inherent. Sweet tastes take the infant back to being breast-fed and convey a feeling of security.
  - Too many sweet things are unhealthy, and not only for the teeth. Babies should first get used to other flavours like fruits and vegetables before they get ice cream or sweets.
  - This applies to drinks too: if the bottle with its sugary content is always easy to get hold of, tooth bacteria have a heyday. Fruit juices (fructose is a sugar!) or acidic drinks are also not a good alternative. The best: water or neutral herbal teas (fruit tea = sour, so not good long-term).
  - With all this diversity: babies do not need strong seasoning – with five times as many taste buds on their tongues than adults they taste flavours much more intensely.



## MAM Med-Info



Dr. Yvonne Wagner, dentist at the Jena University Clinic and specialist for preventive dentistry, on sensible dietary supplements:

- After birth, a vitamin K prophylaxis is recommended (against vitamin K deficiency bleeding).
- If infants don't get enough sunlight, vitamin D can become depleted. Tablets for the first year or up to the second birthday keep levels up.
- Only take fluoride tablets for caries prevention if the drinking water and the baby's toothpaste are not sufficiently fluoridated – dentists are happy to provide advice.
- Other vitamin and mineral nutrient tablets are generally not necessary; research shows that the majority of children already have adequate supplies if their diet contains enough fruit and vegetables.
- Only take vitamin and fluoride tablets in consultation with your doctor.

# Chapter 6:

## Year 2

### Healthy teeth are more attractive.

For adults it goes without saying that healthy looking teeth are part of a well-groomed appearance. For children though, this is often seen much more loosely, with the understanding that they're only baby teeth, which will soon fall out. This is a huge underestimation of the importance of the first teeth. Children that already have caries in their baby teeth run an increased risk of suffering from them in their permanent set.

- Baby teeth function as important space keepers for the second, permanent set of teeth – if they are well looked after, the replacements will not slip out of line.
- Occasionally, even adults still have a baby tooth because no permanent tooth followed – such a thing can happen and is just another reason to take good care of the 'first'.
- Dental development is facial development: in the second year when the first molars come through the position of the upper and lower jaw relative to one another slowly changes – and with it, the face. Between now and the child's 4th birthday the 'baby face' will get more mature child-like features.
- How well children can speak is also dependent on whether their teeth are healthy and in the designated position.
- Healthy teeth chew correctly – this is obvious. Another developmental step reliant on dental health is swallowing: a baby has his tongue between his teeth for swallowing, a small child (like an adult) on the palate.
- Growth impulses triggered by dentition can make some babies grind their teeth. Do not be concerned as this is normal.



### **The most beautiful smile.**

Baby teeth have a thin enamel layer. They are therefore particularly susceptible to Early Childhood Caries (ECC) and it can even happen that an ECC infection will spread – this means that tooth decay is not the only health problem. The first set of teeth must be carefully looked after and supported with a healthy diet and regular check-ups.

The first signs of caries are hardly visible to non-professionals; only dentists can find their foothold and treat it.

Parents sometimes find dark, garland-shaped discolorations on baby's teeth that are hard or impossible to clean away. Relax: these are normally not a sign of caries, just a typical baby tooth plaque that the dentist can remove easily – so babies keep their bite and beautiful smile.

### **The first personal toothbrush.**

If parents have integrated oral care into daily life from day one, children find it an exciting learning experience. They now like to imitate what grown-ups do, so give them a training brush (MAM Training Brush with an extra long handle for holding and guiding together) to hold themselves now and then. If they are able to use it a little, they can have their first very own brush – the MAM First Brush with a short, compact handle – for brushing like a grown-up.

Naturally, between one and two years, babies' body control and coordination is not sufficient to manage everything themselves – they probably will not manage this until they go to school. However, with every day tooth brushing the 'COI' way (chewing surfaces, outer tooth surface then inner tooth surface – see page 26) gets better.

A tip for parents when helping: mother, father or another caretaker should take turns to support brushing – then, small individual technique differences will be evened out.





### Doing everything the grown-up way.

Just the way that children imitate their parents when brushing their teeth, they also imitate mum, dad, older brothers and sisters and close friends for other activities – the grown-up lifestyle therefore influences the little person's habits. For healthy baby teeth, this 'model' function can be used in many ways:

- Eating together, at regular times when possible
- Plenty of healthy variation on the plate
- Fruit juices and other sweet or acidic drinks only with main meals, not in-between
- For drinks between meals water or unsweetened tea are best
- Check the ingredients for things like hidden sugar when buying food
- Keep snacking under control: do not distribute the consumption of sweet things throughout the day; it is preferable to have a dessert after a main meal
- When eating sweets, be as 'tooth friendly' as possible (doctor or pharmacist will advise)
- Neutralise sugary or sticky foods (means: it's best to clean your teeth as soon as possible afterwards).

Very important for small children: reduce the number of snacks; drinks for in-between should be tooth friendly (tea without sugar, water – pre-boiled the night before). This strengthens one of the most important guardians that the child's teeth have: the saliva (see MAM Medical-Info).

Normally, about half an hour after eating, saliva is back to its optimal pH-neutral composition, which is good for teeth. However, every snack, every titbit or unsuitable drink in addition to regular meals again upsets the system – and removes a very important bodyguard.



## MAM Med-Info



Dr. Yvonne Wagner, specialist for preventive dentistry at the Jena University Clinic, on the 'magical powers' of saliva:

"Without saliva we could not taste, smell, chew, swallow or speak. It is indispensable for oral health because it neutralises acids resulting from eating, promotes the build-up of tooth enamel (re-mineralization) and prevents caries. The sensitive tooth surfaces are covered with a protective film that keeps bacteria away. Additionally, saliva contains immune-globules with which it fights viruses."

# Chapter 7:

## Year 3

### **The first set of teeth is complete.**

In the third year of life all the baby teeth have come through. Small gaps in-between are to be expected. After all, these small first teeth are reserving spaces for much bigger second teeth. This next, permanent set of teeth, which in addition to the 20 replacement teeth includes twelve further teeth, have been ready a long time – sometimes the replacement is directly under the baby tooth's splayed roots.

Here's another reason for healthy baby teeth. They not only play an important role in facial development and for speech, caries can work their way through to the replacement tooth and damage it before it becomes visible.

Oral hygiene should have become a familiar, well-preserved habit in the meantime, and practiced at least twice daily. Coming up to their third birthday children are already having fun using their own toothbrush (a stylish First Brush from MAM, for example). Naturally, parents must still help out – probably up until they go to school. A tested rule of thumb is: children that can hold a pen and write well can also use a toothbrush well.



### **Lots of sweets? It'll turn bad.**

As before: it's the example set by parents that is important. The motivation for rational oral care, regular dental check-ups and a healthy diet is not yet there, so the grown-ups have to help the child along by setting a good example.

One of the fundamental aspects is how sugar is used in food and drink:

- Sugar and fructose! – causes the natural oral bacterial flora to mix a caries promoting cocktail.
- Often sugar is 'hidden' in food – and 'sugar-free' is sometimes only half the truth. Check the ingredients carefully!
- Chocolate spreads, ketchup, cream puddings and the like are goodies children crave with their inherent preference for sweet things. Not allowing their consumption doesn't help, it simply increases their appetite. It is better to serve them as a dessert after a healthy main course.
- Sweet, sticky desserts can be neutralized afterwards with some buttered bread, cheese or a glass of milk.

- Or even better after sweet snacking: brushing their teeth.
- Well-stocked supermarkets have tooth-friendly sweets for children, which do not upset the pH-neutral value of protective saliva. Your dentist will know about these too.

### **Specifically about drinks.**

An accessible drink can be practical for both the child and parents. It is not a long-term solution however, as constant drinking confuses the metabolism and the healthy 'now I am hungry' and 'now I am full' feelings.

Switching to self-sufficiency now and again is okay, provided that the cup or bottle is filled with a drink like water or unsweetened tea; a drink that is neutral to the teeth. Too many sweet things have an immediate impact: they cause tooth decay and leave a lasting impression on your taste buds, which can cause excess weight gain, which then strains the cardiovascular system. Arguably, all parents want to spare their children these unpleasant consequences.



# MAM Oral Care Overview

**BPA  
FREE**

BPA free: All MAM products are made of BPA free materials.

MAM design makes tooth brushing a pleasant experience

**0+**  
months

Oral Care Rabbit



early  
oral  
care

- Soft microfibre material for cleaning and massaging gums before the first tooth
- Even back areas can be reached
- Intuitive finger shape

**3+**  
months

Massaging Brush



early  
oral  
care

- Reaches and massages all areas of the mouth
- Perfect for cleaning gums and first teeth
- Toothbrush-like shape prepares for brushing routine

**6+**  
months

Training Brush



very  
soft  
bristles

- Long handle for holding the brush together – baby can be guided through the correct brushing motions
- Round head is gentle in baby's mouth

First Brush



very  
soft  
bristles

- Short and compact handle – perfect for imitating adult tooth brushing
- Round head is gentle in baby's mouth





All brushes also available with safety shield



# MAM Mini Teethers

## Bite & Relax Phase 1



- Especially developed for front teeth; with four different surfaces for instant relief
- Extra light-weight and therefore easy to hold especially for small babies. Ideal for on-the-go!

## Bite & Relax Phase 2



- Especially developed for back teeth; four different surfaces offer various biting possibilities and soothe teething pain
- Extra light-weight and thanks to the special 3-D shape ideal to train baby's fine motor skills. Ideal for on-the-go!



# MAM Teethers

## Starter & Clip



- Won't go missing thanks to the innovative combination with clip.
- Fine surface structures develop the sense of touch.

## Mini Cooler & Clip



- Unique shaped and extra-small cooling part to easily reach the molars.
- Light-weight and curved that even small babies can lift it promoting coordination and movement.

## Bite & Brush



- Cleans baby's first teeth while chewing and massages sensitive gums.
- Biting on the special chewing element trains oral muscles.

Cooler



- 4+**  
months
- for  
back  
teeth
- BPA  
FREE**

- Cool relief for the molars thanks to the unique shape of the water-filled part.
- Easy to hold thanks to the ring's curvature, promoting coordination and movement.

Bite & Play



- 5+**  
months
- for  
back  
teeth
- BPA  
FREE**

- Curved so that the middle is raised, making it easy to pick up.
- Sharpens the visual sense because baby can watch the colour change when the rattle turns.

# The MAM Principle

Parents are demanding. We at MAM are too. That's why, for over 35 years, we've been developing products that are unique in design and function. Our products are the result of intensive teamwork between experts from medicine, research and technology. This means MAM products support the individual development of every child and make every day baby life easier. Every MAM innovation follows this principle. So parents can feel confident. And babies feel good.



## Join the MAM Club at [mambaby.com](http://mambaby.com)

We want to share our knowledge and experience with you in our brochures, on [mambaby.com](http://mambaby.com) and with other members of our MAM Club. Discover the fabulous world of MAM and enjoy exclusive benefits and surprises.\*

\* Becoming a member of our MAM club has lots of advantages. You'll get exclusive access to information, news, promotions, competitions, and services. Check out our monthly development calendar – yours via e-mail – to let you chart the joyful experiences and development of your baby's early years.



More products for every step your baby takes on  
[mambaby.com](http://mambaby.com)



# Masthead

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MAM Bite & Play



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