REACHING OUT. PROVIDING HELP. GIVING HOPE.

## Dentistry

- An individual with CdLS should have regular evaluations and immunizations with the primary care provider.
- A pediatric dentist, or family dentist familiar with patients with special needs, should provide an evaluation every six months, starting at 12 months of age or when the first primary (baby) tooth erupts into the mouth.
- For adults, dental evaluation should be every four to six months, depending upon specific oral health issues, such as, oral hygiene and caries risk. Ideally, this should take place with a pediatric dentist or family dentist familiar with patients with special needs.
- Standard of care includes routine examination, cleanings, periodic x rays and sealants on all posterior teeth.
- If cleanings and procedures are unable to be done in the office, because of limited compliance, sedation or general anesthesia is recommended in an appropriate clinical or hospital setting.
- Follow up with appropriate subspecialists as needed.
- When surgery or treatment under general anesthesia is recommended, it is advantageous to inform other involved specialists in order to coordinate as much treatment and diagnostic studies as possible under one anesthetic experience.

Support organization information should be given to the family whenever a diagnosis is made: The CdLS Foundation 1-800-753-2357 www.CdLSusa.org.

- It is important that individuals with CdLS who express gastroesophageal reflux disorder (GERD) be evaluated on a regular basis for enamel erosion and dental caries. Oral pain/discomfort can cause behavioral changes and should be ruled out as a causative factor. Management and treatment guidelines are available www.cdlsusa.org.
- Ensure that the family has the CdLS Medical Alert Card, available from the CdLS Foundation Web site, which would be helpful in an emergency situation (e.g. risk for volvulus).