

EVIDENCE-BASED CARIES RISK MANAGEMENT FROM AN EARLY STAGE – IN 3 STEPS*



Step 1 **In-office caries risk assessment**

From the list below, identify general and intra oral caries risk factors in your patient. Once you have identified the factors, classify them in the right-hand table using the same row.

Head and neck radiation
 Hypo-salivation / gross indicators of dry mouth
 PUFA (exposed pulp, ulceration, fistula, abscess) – dental sepsis

Dry mouth
 Inadequate oral hygiene
 Deficient exposure to topical fluoride
 High frequency / intake of sugary drinks / snacks
 Symptomatic-driven dental attendance
 Socio-economic status / health access barriers
 For children: high incidence of caries in mothers or caregivers
 Thick plaque: evidence of sticky biofilm in plaque stagnation areas
 Appliances, restorations and other causes of increased biofilm retention
 Exposed root surfaces

Lack of any caries risk factor

Step 2 **Classification of active caries lesions**

Select the appropriate caries stage of your patient.

Active moderate or extensive caries lesions	Active initial caries lesions	No active caries lesions
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Based on steps 1 and 2, select the likelihood.

High likelihood	High likelihood	Moderate likelihood
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High likelihood	Moderate likelihood	Low likelihood
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Moderate likelihood	Moderate likelihood	Low likelihood
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* Adapted from ICCMS™ Guide for Practitioners and Educators, December 2014, Nigel B. Pitts, Amid J. Ismail, Stefania Martignon, Kim Ekstrand, Gail V. A. Douglas, Christopher Longbottom.

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Step 3 Managing the patient's risk factors

	LOW LIKELIHOOD	MODERATE LIKELIHOOD	HIGH LIKELIHOOD	HOW COLGATE® CARES
PATIENT CARE	<ul style="list-style-type: none"> Brush teeth 2x per day with 1000-1450 ppm fluoride toothpaste Floss daily 	<ul style="list-style-type: none"> Brush teeth 2-3x per day with a high fluoride toothpaste (5000ppm fluoride)** Brush teeth with 1000 - 1450 ppm fluoride paste 2-3x per day if under 10 years Use a fluoridated mouthrinse at a time separate to brushing (≥150 ppm F⁻) Improve oral health behaviour Interdental cleaning 		<p>**Neutrafluor 5000 Plus Toothpaste (Restricted Medicine)</p>
DENTAL TEAM CARE	Motivational engagement (discuss with patients how to improve oral health behaviour)			
	Visit interval 12 – 24 months	<ul style="list-style-type: none"> Diet counselling on reducing sugar intake and/or frequency of snacking Discuss current medication situation/hypo-salivation management techniques Discuss use of recreational drugs Sealants Fluoride gels or solutions 		<p>Duraphat Varnish (For Professional Dental Use Only)***</p>
		<ul style="list-style-type: none"> Visit interval 6 months Fluoride varnish 2x per year 	<ul style="list-style-type: none"> Visit interval 3 months Fluoride varnish 4x per year 	

* Adapted from ICCMS™ Guide for Practitioners and Educators, December 2014, Nigel B. Pitts, Amid I. Ismail, Stefania Martignon, Kim Ekstrand, Gail V. A. Douglas, Christopher Longbottom. **Not for use in patients with known allergies or hypersensitivity to any of the ingredients of Neutrafluor 5000. Allergic reactions have been rarely reported with the use of fluoride toothpastes. Contains Sodium Fluoride 11.05mg/g. Indications: Dental caries preventative for individuals at high risk for caries, when used as part of a preventative regimen recommended by a dental professional or doctor. *** Not for use in patients with hypersensitivity to colophony (natural resin), ulcerative gingivitis, stomatitis, and bronchial asthma. Not for systemic treatment. Do not swallow. Not recommended for use in pregnant or lactating women. Contains: Sodium fluoride 5mg/mL. Indications: Prevention of caries. Treatment of sensitive teeth

