

Development and Eruption of Teeth

Teachers and school Nurses at the Elementary School level will often have students coming to them with teeth that are loose. Sometimes these teeth can be painful if the process of loss is not going as smoothly as we would like. The tooth may or may not be fully loose if the permanent tooth is coming in crooked but a good part of the primary or baby tooth may be dissolved. It is important to be aware of when a tooth is coming out (exfoliating) normally where you can assist or when a parent should be called for them to obtain professional dental care for their child. The pages that follow in this section list the development times for the different types of teeth. The chart for deciduous or baby teeth also lists the age that the teeth are shed, or come out.

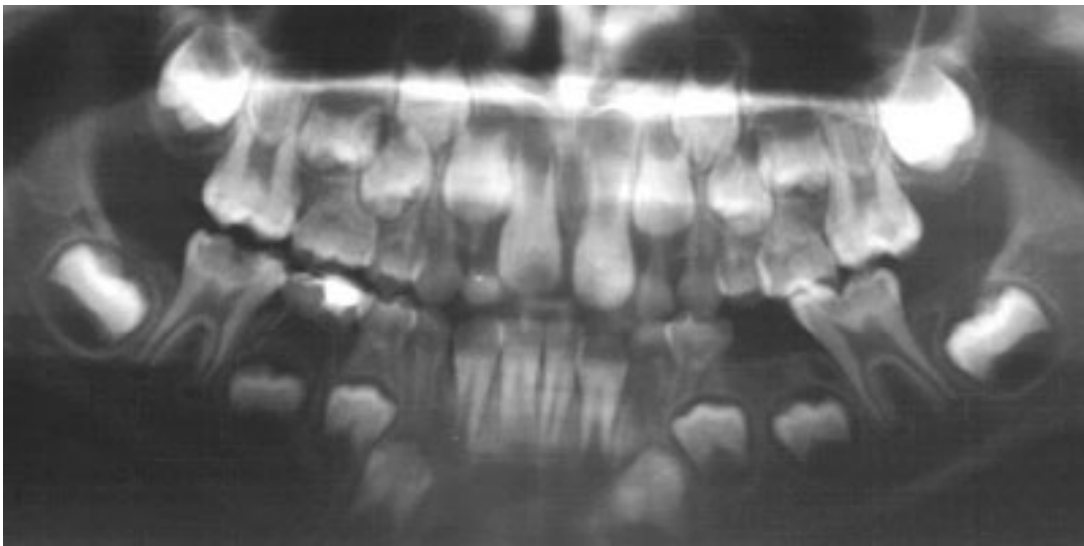
Sometimes tooth loss is very obvious as the tooth is about to fall out. A baby tooth once the roots have dissolved may only be attached by the gums. With the tooth moving up and down, the gums can get very sore. Bleeding may be present from the area. If the tooth is moving quite a bit it may only be the discomfort that is keeping the child from getting the tooth to come out. It may be as simple as letting the student put a piece of ice on the gum to numb it, and give them a tissue to twist and remove the tooth. You should have gloves on hand (if you have latex gloves note that a small amount of children are latex sensitive or allergic and require latex free gloves) and cotton as the irritated gums may bleed for a short time. Anything more than this should be in the parent's hands (and their dentist if needed).

Teeth vary in size, shape and their location in the jaws. These differences enable teeth to work together to help you chew, speak and smile. They also help give your face its shape and form. At birth the teeth have yet to come in, and infants will usually get 20 primary (baby) teeth, which often erupt as early as six months of age. They are then shed at various times throughout childhood. By age 21, all 32 of the permanent teeth have usually erupted. Baby or deciduous teeth serve important functions and should not be removed before the permanent teeth are ready as routine treatment. Changes in position of the remaining teeth may block the path that permanent teeth require, or eliminate the guidance needed, for the adult teeth to come in straight, or at all.

There are times when a dentist will decide to remove a baby tooth before it's time. Baby teeth that get deep cavities that require more than fillings and crowns are occasionally removed after careful planning by a dentist. A device is often inserted that holds the missing space until the permanent tooth can come in. On the other hand sometimes removing a tooth can actually encourage a permanent tooth to come in straighter. The dentist uses x-rays to assist in the decision making process, evaluating teeth already in the mouth and the developing teeth which have yet to come in.

When permanent teeth come in a child can be sore in the area as well. You may or may not see the tip of the tooth starting to come in. Sucking on a piece of ice can help to numb the gum until the child can get home and the parent can take them in for professional care if it does not subside.

You can also find the eruption charts online at the ADA Website at http://www.ada.org/public/topics/tooth_eruption.asp



A panoramic x-ray showing a child who only has baby teeth, their permanent six year molars, and six of eight incisors erupted. This child has severe decay issues and has prematurely lost a tooth and has problems likely causing them pain at this time.

(source <http://www.geocities.com/drkhosla1/xray.html>)



A panoramic x-ray showing 28 erupted teeth and developing 3rd molars (wisdom teeth)
Use your tooth development chart to determine the likely age of this individual.
(Source <http://www.orthonj.com/images/de102/de102pnxpost.jpg>)