MEMORANDUM OF CALL — Previous editions usable

TO: Melanie

☑ YOU WERE CALLED BY– ☐ YOU WERE VISITED BY–

Christy Macy

OF (Organization)

☑ PLEASE PHONE ▶ ☐ FTS ☐ AUTOVON

410-664-4864

☐ WILL CALL AGAIN ☐ IS WAITING TO SEE YOU

☐ RETURNED YOUR CALL ☐ WISHES AN APPOINTMENT

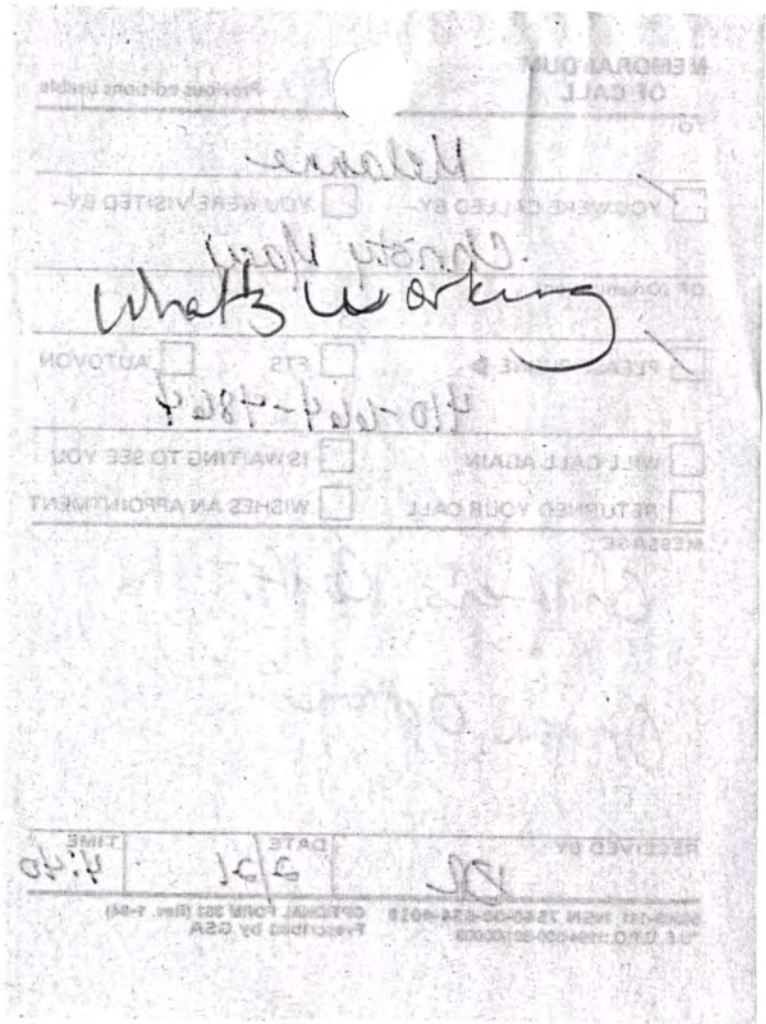
MESSAGE

Children's Conf.

Oregon Option

RECEIVED BY	DATE	TIME
KR	2/21	4:40

50363-111 NSN 7540-00-634-4018 OPTIONAL FORM 363 (Rev. 1-94)
*U.S. G.P.O.:1994-300-891/00003 Prescribed by GSA



To Nicole

Date 1-17-96 Time 11:20

WHILE YOU WERE OUT

M Linda Stark No. Carolina

of Congressman Thunderburke

Phone 919-442-0112
Area Code Number Extension

TELEPHONED		PLEASE CALL	X
CALLED TO SEE YOU		WILL CALL AGAIN	
WANTS TO SEE YOU		URGENT	
RETURNED YOUR CALL			

Message Do you have any information about a Day Care Provider Conference in April?

YP
Operator

AMPAD EFFICIENCY® 23-021 - 200 SETS 23-421 - 400 SETS CARBONLESS

To Nicole

Date 1/19/96 Time 8:35

WHILE YOU WERE OUT

M Julie Johnson

of S. Dakota

Phone 605 - 338 1324

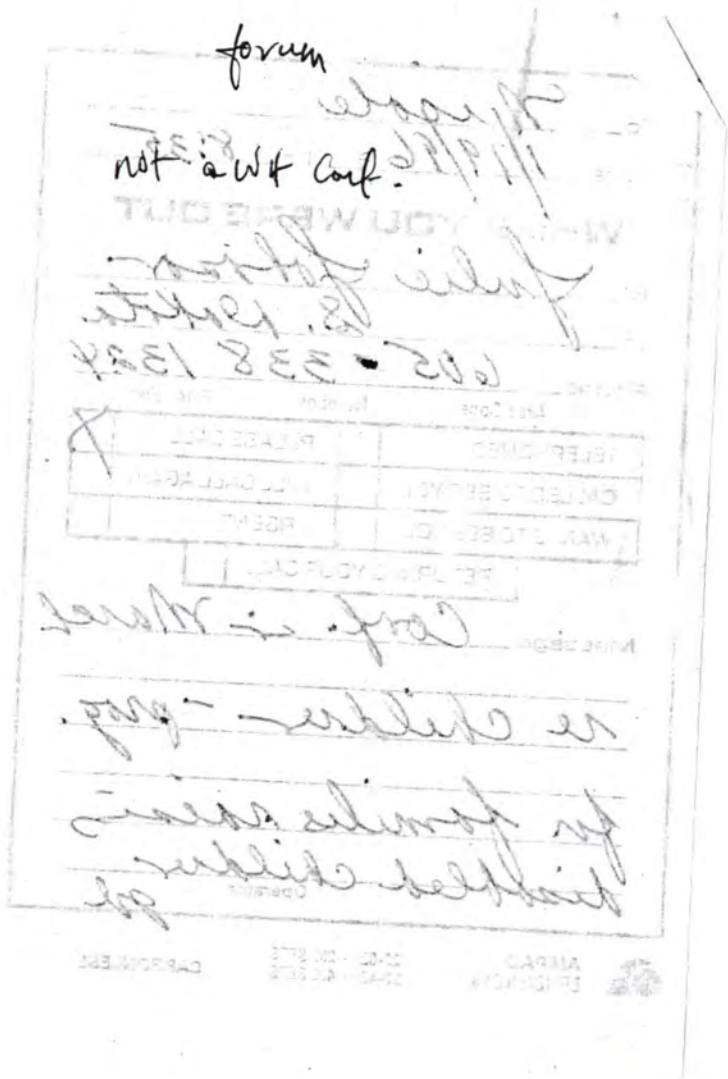
Area Code Number Extension

TELEPHONED		PLEASE CALL	X
CALLED TO SEE YOU		WILL CALL AGAIN	
WANTS TO SEE YOU		URGENT	
RETURNED YOUR CALL			

Message Conf. in March re children - prog. for families raising disabled children

Operator gk

AMPAD EFFICIENCY® 23-021 - 200 SETS 23-421 - 400 SETS CARBONLESS



Calls re: convening on Children's Issues

Jim Halley
U.S. Kids TV
P.O. Box 369
Centerville, VA 22020
[child-run anti-violence campaign]
703/263-0386

Cory Harden
Office of Congresswoman Delauro
225-3661
[wanted to rec. someone]

-Madge-
Here are my calls re: Children's conf.

H 237-5917
W 225-3661
Cory, Cong. Delauro
Harden
• wants to recommend someone for family conf.

Interested in Children's Conf.

- Alta Beasley
~~[illegible]~~
10700 McCall Road
Georgetown, Ohio 45121
ph 513/378-6308

Madge -
wd you pls
put her on
list to set
info when it's
figured out.
NR

— file children's corr'ce

THE WHITE HOUSE
WASHINGTON

Melanne —

HRC would like Pat Holt, SF Chronicle, invited to her children's reception in the spring.

Pat's telephone # is 415-777-7043

Liz

—

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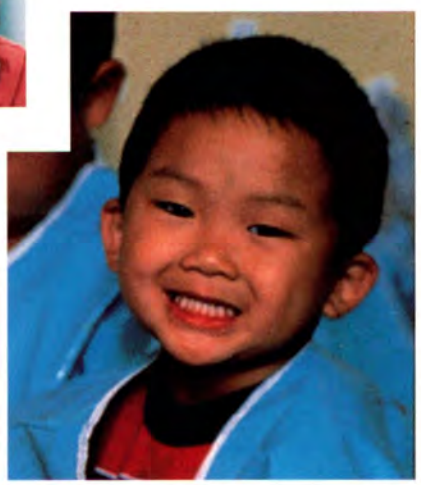

Colgate®

Bright Smiles, Bright Futures

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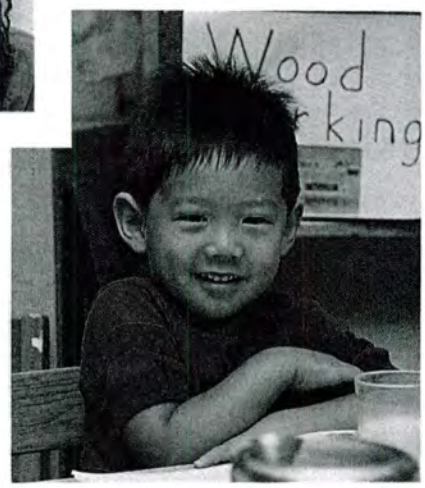
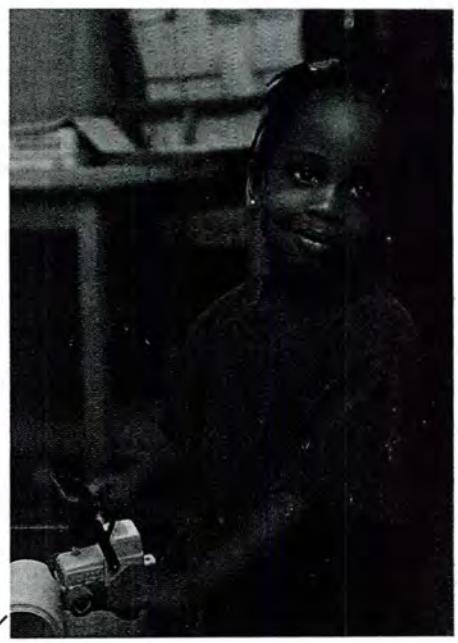
Colgate®

Bright Smiles, Bright Futures



Colgate

Bright Smiles, Bright Futures



BRIGHT SMILES, BRIGHT FUTURES

COLGATE-PALMOLIVE COMPANY
300 Park Avenue
New York, NY 10022-7499

UniWorld Group, Inc.

February 14, 1996

Ms. Flo McAfee
Special Assistant to the President
for Public Liaison
The White House
Old Executive Office Building
Room 122
Washington, DC 20502

RE: COLGATE-PALMOLIVE COMPANY'S "BRIGHT SMILES, BRIGHT FUTURES™" PROGRAM

Dear Ms. McAfee:

During a recent ABC News "20/20" segment, First Lady Hillary Rodham Clinton stated she will sponsor a conference focusing on children.

As part of your program, please consider an innovative public/private partnership, developed by Colgate-Palmolive Company, that is combatting the critical problem of poor dental health among inner-city children. The program is called ***"Bright Smiles, Bright Futures™"*** and it has reached more than *2.5 million* inner-city children to educate them on the importance of proper oral health care with its in-school curriculum, mobile dental vans and community awareness activities.

"Bright Smiles, Bright Futures", a multicultural grassroots community-based program, targets inner-city children from birth through age 12 and their families. Now in its fifth year, **"Bright Smiles, Bright Futures"** partners with the National Dental Association (NDA), the country's largest organization of African-American dentists. As well, since 1992 Colgate has partnered with the National Head Start Bureau providing every Head Start child an opportunity to be exposed to oral health messages at an early age through the **"Bright Smiles, Bright Futures"** pre-school oral health curriculum.

In a study conducted by the National Institute of Dental Research, approximately 61% of African-American children have cavities and 75% of African-American children between the ages of two and four have never been to a dentist.

MORE

100 Ave. of the Americas, New York, N.Y. 10013, (212) 219-1600, FAX (212) 274-8565

Many parents are not aware that proper dental hygiene for children actually begins during infancy. The First Lady's upcoming children's conference would provide an excellent opportunity to share this important oral health care information with families and caregivers throughout our nation.

Under the guidance of Marsha Butler, D.D.S., Director of Global Oral Health Improvement and Consumer Education, Colgate-Palmolive Company, **"Bright Smiles, Bright Futures"** has grown to become a fully operational program in New York City, Philadelphia, San Francisco/Oakland, and now Atlanta. It conducts awareness programs in more that 20 cities nationally.

In each city, **"Bright Smiles, Bright Futures"** teams with local boards of education, community organizations, and municipal officials. Local dentists volunteer to conduct free dental screenings aboard the fully equipped **"Bright Smiles, Bright Futures"** Dental Van. This unique dental van travels to elementary schools, community-based activities, Head Start and other day care programs. It also participates in various ethnic community events and festivals to help raise awareness of proper oral health care. **"Bright Smiles, Bright Futures"** serves as a model for Colgate's worldwide oral education program which reaches *25 million* children in 28 countries across the globe.

On February 2, 1995, Colgate-Palmolive's **"Bright Smiles, Bright Futures"** program formed a partnership with U.S. Department of Health and Human Services Maternal and Child Health Bureau's national Healthy Start program under the guidance of Thurma McCann, M.D., M.P.H., Director, Division of Healthy Start, Maternal and Child Health Bureau of the Health Resources and Services Administration.

"Bright Smiles, Bright Futures" and **Healthy Start** will administer a comprehensive program to pregnant mothers and their children from birth to two years old in New York City, Philadelphia, Oakland and Washington, D.C., providing them with vital material on how to take care of their oral health and the infants' oral care needs.

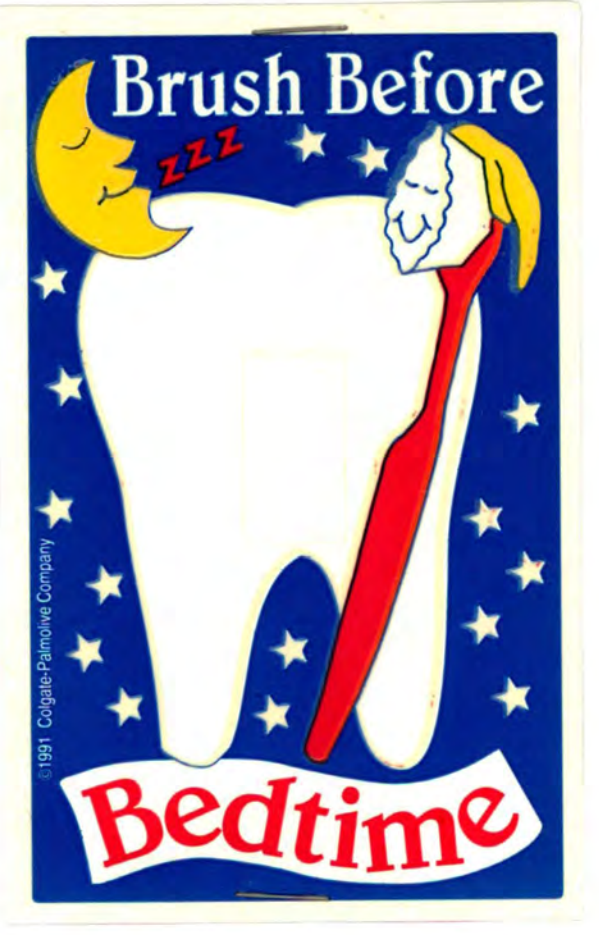
I have included a **"Bright Smiles, Bright Futures"** press kit that will give you more background on the program. Please call me with any questions at 212-219-7159.

Sincerely,

Keith Hudson

Keith Hudson
Enclosures

cc: **C-P:** Marsha Butler, Cathy Phillips, Maria Diaz
UWG: Lynne Scott, Fern Gillespie, Blevis Vargas, Tongey Isaacs


Brush Before
ZZZ
Bedtime
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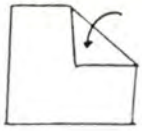
HELP YOUR CHILD'S SMILE

GET A HEALTHY START

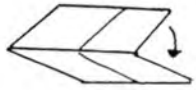
HAPPY TEETH

1 Color in lips, tongue and skin
2 Cut along dotted line
3 Place printed side face down
4 Fold four corners to center

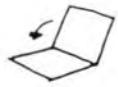


5 Turn face down again
6 Again, fold four corners to center

7 Fold in half

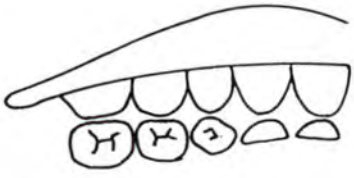


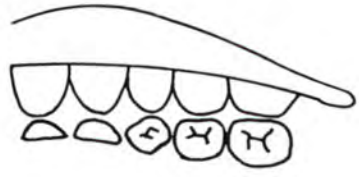
8 Fold in half again

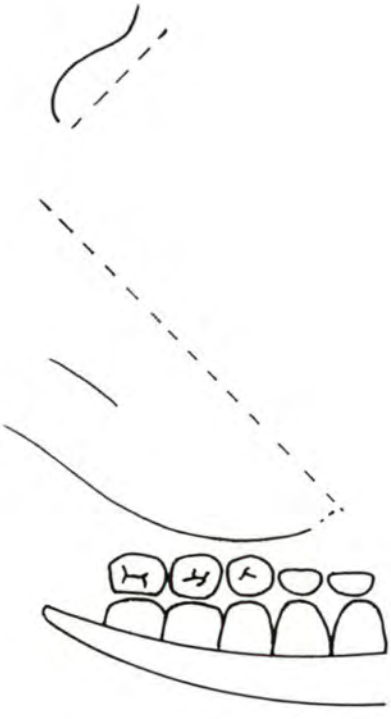


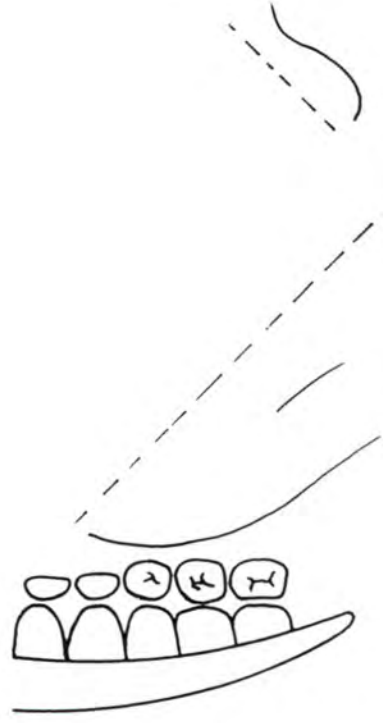
9 Slide thumb and three fingers beneath paper flaps

10 Spread "teeth" apart with fingers and make mouth "talk"!





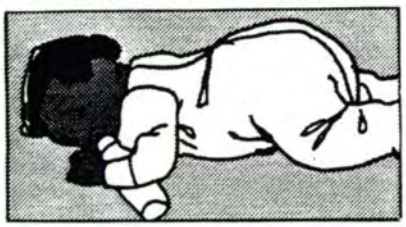




Sleeping With Bottle Can Seriously Damage Your Baby's Teeth

By Marsha E. Butler, D.D.S.

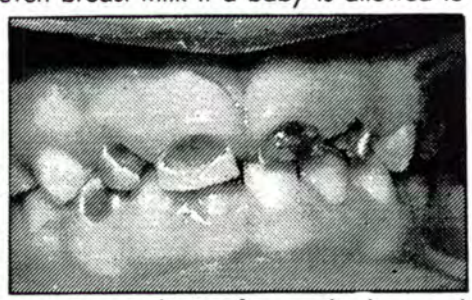
For many parents, grandparents and baby-sitters this is a familiar routine: It's time for the child to get some rest, so they put the child to bed with a bottle of milk. The bottle pacifies the child, and helps him rest. But it can also cause serious and painful damage to a child's teeth. This damage is known as baby bottle tooth decay, and it happens when a child sleeps, rests or walks around with a bottle in his mouth.



The process of decay is simple. Milk and other liquids can collect in the mouth as the child falls off to sleep. As it rests there, bacteria inside the mouth produce acids that start the process of decay. This decaying process can begin in as little as 20 minutes.

Although baby bottle tooth decay is a problem nationally, it frequently occurs particularly in the Black community.

Any sweet liquid, not just milk, can cause baby bottle tooth decay. This includes soda, all fruit juices, and even breast milk if a baby is allowed to sleep with the mother, nursing at will. In fact, the only liquid which does not promote tooth decay is plain water.



Treatment of baby bottle tooth decay can be painful for your baby and expensive for you, but the earlier treatment begins, the better. In advanced stages, saving damaged teeth can involve drilling and filling, cementing crowns, or even root canals. But frequently damaged teeth cannot be saved and must be pulled out. This can leave gaps that affect not only your child's dental health, but your child's ability to speak properly.

You can protect your child from baby bottle tooth decay with a few simple measures:

- For the newborn, avoid putting the child to bed with a bottle. Infants who are accustomed to going to sleep with a bottle should be given water, or try a soothing song or back rub until the infant falls asleep.
- Try to limit nursing your newborn or infant for prolonged periods of time. And in the case of toddlers, make sure they don't walk around with a bottle in their mouth. Also try to avoid using the bottle as a pacifier.
- Begin weaning your child from breast or bottle to training cup as early as possible. Start at 9 months and try to have the baby totally weaned by age 1.
- Oral care should begin with your newborn. Clean your newborn and infant's teeth and gums with a small damp cloth after feeding.

With your help, your child can have a healthy, beautiful smile that lasts a lifetime.

The Smile File series has been reviewed and endorsed by the National Dental Association and is provided as a community service by the COLGATE- PALMOLIVE COMPANY.

Bright Smiles, Bright Futures™

New Dental Technology Can Keep Your Child Cavity Free

By Marsha E. Butler, D.D.S.

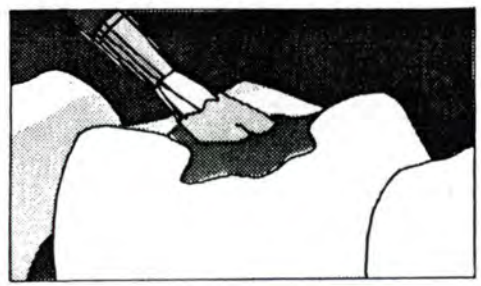
About 50% of American children will get cavities. For a number of reasons, this percentage increases to approximately 60% among African-American children. However, with proper oral care and the use of fluoride, pit and fissure sealants can prevent cavities 100% on children's back teeth.

Fluoride has been very successful in preventing cavities on the smooth surfaces of the teeth, but is not effective on the biting surfaces of back teeth where 66% of all cavities occur. This is where pit and fissure sealants can play an important role in maintaining your child's oral health.

Pit and fissure sealants, part of a new dental technology, are a thin, protective coating that covers the biting surface of back teeth. Sealants are most effective on children, although in some cases, adults too can benefit.

This simple and painless procedure requires no needles and can be completed in one visit. The cost of the sealant varies from dentist to dentist, but generally is half the cost of a filling. The long-term benefit to your child makes it most cost-effective.

I have applied pit and fissure sealants



for over ten years and have many success stories of children who have reached adulthood with no cavities. Nevertheless, a study conducted by the National Institute of Dental Research indicates that only 7.6% of all American school children have dental sealants.

Pit and fissure sealants are recommended by both the American and National Dental Associations. Ask for dental sealants for your children at their next dental visit, and request insurance coverage of sealants from your company or union benefits department.

With proper oral care, your child can have a smile that lasts a lifetime.

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Bright Smiles, Bright Futures.™

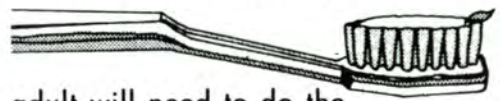
Early Oral Care For Your Baby Begins at Home

By Marsha E. Butler, D.D.S.

It's never too early to think about helping your baby develop and keep a beautiful smile. After nursing, clean your baby's tongue and gum pads with a clean, damp wash cloth. Also, to guard against the rapid, destructive decay of babies' front teeth, avoid putting them to bed with a bottle. Bottles are fine, but not at bedtime. When we sleep, we swallow very infrequently, so our glands make very little saliva. When a baby falls asleep with a bottle of formula, milk, juice, or sweetened liquid, the liquid stays in the mouth a very long time. The liquid actually changes into acid, which causes very rapid decay of the teeth, especially the top front teeth. Some children have more than 12 decayed teeth before they are 18 months old.

Make sure your baby gets a nutritious diet, including plenty of calcium for healthy bones and teeth. Babies also need fluoride in their diets. If you're not sure, ask your doctor or dentist if there is fluoride in your water. If there is, that will help your baby have strong decay-resistant teeth. If your water isn't fluoridated, your doctor or dentist can give you a prescription for fluoride drops. Babies who are breastfed or who are given canned formula also need fluoride supplements.

For most babies, their first tooth is a bottom front tooth. At about 12 to 16 months the molars (back teeth) will come in. Now it's time to use a toothbrush. An



adult will need to do the brushing for the first few years, because most children don't have the muscle coordination to do a thorough job until they are about six years old. Just brush gently, back and forth, along the intersection of the tooth and gum, as well as on the biting surfaces.

What about toothpaste? You can begin to use a very small amount (about the size of a small pea) of fluoride toothpaste when your child is about a year old. Remember, babies usually swallow what's in their mouths, so use only a little toothpaste.

With early oral care, your baby can have a smile that lasts a lifetime.

The Smile File series has been reviewed and endorsed by the National Dental Association and is provided as a community service by the Colgate-Palmolive Company.

Bright Smiles, Bright Futures™

A Child's First Dental Visit Leaves Lasting Impressions

By Marsha E. Butler, D.D.S.

The American Academy of Pediatric Dentistry and the National Dental Association recommend that a child's first dental visit occur between 6 and 12 months of age. At this visit, the dental professional will take a complete medical and dental history. He or she will also examine the child's mouth and help the parent or caregiver understand what to do to keep the child's teeth healthy. The dentist's staff will suggest a time for your child's next visit. This may be in a few months if there is a problem or in a year or two if the child appears healthy.

Your child can avoid tooth decay, gum problems and crowded or poorly spaced teeth with an early dental program. That's why it is so important to take your child for a dental visit before his or her first birthday.

When is a good time for the child to start coming to the dentist on a regular basis? Most parents bring their child to the dentist for routine dental care when the child is about three years old. At this age, most children will easily separate from their parents and will cooperate with the dentist and hygienist during the visit. You may want to bring your child to the dentist's office for a "look and see" visit, or on a visit with you or a sibling to introduce your child to the dental office. Avoid talking about negative experiences in front of your child. Early dental visits should provide him or her with positive experiences.

When your child begins regular visits, the dentist will again examine the mouth. A dental hygienist will clean your child's teeth. The purpose of this cleaning is to remove plaque and stain from the teeth and to polish them. Your child may also receive a fluoride treatment to help strengthen the teeth and protect against decay.

If there is tooth decay or another dental problem, or if there are no spaces between the teeth, the dentist will suggest X-rays. X-rays help the dentist see dental disease and plan the right treatment for your child.

Upon your first visit, the dental team will give you oral hygiene instruction for your child. This will include instruction on toothbrushing and flossing. Flossing is necessary even for children because it is the only way to clean between teeth. The parent or caregiver should brush and floss the child's teeth until the child is old enough to do the job right. Ask for instructions on brushing and flossing someone else's teeth, which may be a little different from brushing and flossing your own.

The dental team will discuss the child's diet and make suggestions for good eating habits. Your dentist can also tell you whether or not your child needs additional daily fluoride. This will depend on whether or not your community has fluoride in the water, and other individual dental needs.

Studies have shown that a child will develop a fear of the dentist only when he or she associates the dentist with dental problems. Today's advances in dentistry mean that your child can grow up without cavities or dental problems. Early and regular dental visits are critical to a lifetime of dental health. Remember, it is easier to prevent dental disease than to treat it.

The Smile File series has been reviewed and endorsed by the National Dental Association and is provided as a community service by the COLGATE-PALMOLIVE COMPANY.

Bright Smiles, Bright Futures™

Your Child's Baby Teeth Are More Important Than You Think

By Marsha E. Butler, D.D.S.

Until recently, many doctors and parents did not understand how important it was for children to have healthy primary ("baby teeth"). Unfortunately, decayed primary teeth were often extracted, or pulled, causing permanent teeth to come in crooked. But with proper care, in many cases decayed primary teeth can be saved.

Primary teeth are important for proper speech development. It is difficult for children to learn to pronounce certain sounds (such as "th" and "f") without their front teeth. Healthy teeth are also important for an attractive appearance. If teeth are decayed, children may not want to smile, interfering with their social development. Broken or decayed front teeth can also cause a child to have a poor self-image.

Primary teeth are necessary for good nutrition as well. If teeth are missing or painful, children will not eat properly, and so can miss important nutrients, which may lead to further health problems.

Additionally, the primary teeth serve as "space savers" for permanent teeth and help to guide the permanent teeth into proper position as they erupt. Otherwise, permanent teeth may erupt in the wrong space, resulting in crooked teeth.

To be sure your child has healthy pain-free teeth, choose a well-balanced diet, brush his or her teeth until he or she can do it well, use a fluoride toothpaste, and take your child to a dentist for regular preventive care as early as one year of age. Don't wait until you see a problem or there is pain. Children may have injures to their mouths and teeth from falling or playing sports. If your child falls on his or her teeth or lips, consult a dentist promptly. Many times broken or displaced primary teeth can be saved.

It is very important that a dentist treat any infections involving primary teeth. An abscess from a decayed or broken primary tooth can spread to the developing permanent tooth, causing permanent damage. The primary teeth are very important to your child's health; they lay the foundation for a lifelong beautiful and healthy smile.

The Smile File series has been reviewed and endorsed by the National Dental Association and is provided as a community service by the COLGATE-PALMOLIVE COMPANY.

Bright Smiles, Bright Futures.™

Gum Disease Can Afflict Children, Too

By Marsha E. Butler, D.D.S.

Usually gum diseases are adult problems. But some children and teens, particularly teenage Black and Hispanic girls, are prone to gum diseases.

Gum diseases are caused by bacteria which live in plaque, a sticky film that adheres to teeth. These bacteria produce toxic substances which irritate the gum tissue. If the plaque is not removed by regular, thorough brushing and flossing, it can change into a hard mineral substance which attaches firmly to the tooth. This hard substance is called calculus, or tartar. Once tartar forms, only your dentist or dental hygienisi can remove it.

When plaque and tartar are present on teeth for several weeks, gum disease begins. At first, the gums may swell and bleed — a disease called gingivitis. Gingivitis is fairly common in children and adolescents, but it can be cured by professional cleaning as well as regular brushing and flossing. Flossing is necessary to clean areas be-tween the teeth, which can't be reached with a toothbrush. Begin flossing your child's teeth when the teeth have grown close enough to each other that you can't see between them. In some teenagers and in most adults, if gingivitis is not treated, more severe problems will result. The

gums and the fibers that hold the teeth in the mouth become irritated, and then infected. This is called periodontitis, and can proceed to loosening of teeth, abscesses and eventual tooth loss. However, if periodontitis is treated early, the teeth can be saved and the infection resolved.

If you notice that your child's teeth seem to be loosening before it's time for the baby teeth to fall out, have your dentist perform an examination. Also, be suspicious of bleeding. Prompt attention to red, puffy, or bleeding gums can save your child's smile. Remember, a smile is meant to last a lifetime.

The Smile File series has been reviewed and endorsed by the National Dental Association and is provided as a community service by the COLGATE-PALMOLIVE COMPANY.

Bright Smiles, Bright Futures.

What Every Parent Should Know About Children's Teeth

By Marsha E. Butler, D.D.S.

It is important for every parent to understand basic facts about the growth and health of children's teeth. This chart gives the general time when teeth will first appear:

TOOTH	TIME TO EXPECT
Lower front tooth	6 months
Other front tooth	8-9 months
First back tooth	12-14 months
Eye tooth	16-18 months
Second back tooth	2 years

Girls teeth usually come in sooner than boys teeth do. Differences of up to six months earlier or later than the times noted above are normal. Knowing this general schedule can help you anticipate when your child may be teething.

Prior to any teeth appearing, keep the gums clean by wiping with gauze or a washcloth. This will help reduce teething pain.

Once teeth have appeared, avoid putting the child to bed with anything other than water in the bottle. Juice, sugared water, soda or any kind of milk or formula resting in your child's mouth can cause your child to have severe tooth decay and can actually ruin an entire tooth in a very short period of time. Studies show that this can also happen if the child is breast-fed for a prolonged period of time.

Even though it may be difficult to do, try to prevent your baby from sucking his or her fingers or using a pacifier. These habits can cause problems in the way the teeth grow into the mouth. Crooked or badly formed teeth can cause health problems for the child and can be costly to correct.

Start dental visits early. The best time to begin is six months of age, but definitely no later than the age of three. Regular early dental care from an oral health professional means problems can be avoided before they occur.

If your child falls or gets hurt in a way that affects his or her mouth, go to a dentist immediately. You should try to be at the dentist's office within half an hour of the accident. In this way, your dentist may be able to take care of a problem at its onset and possibly save a tooth that might otherwise be lost.

The secondary or permanent teeth will begin to come in when the child is around six or seven years old. The lower front teeth and the first back teeth come in first. As with infants' teeth, the secondary teeth may come in sooner or later than the ages noted. This is generally not a cause for concern.

If a baby tooth has not fallen out, but a permanent tooth is trying to appear in the same place, see your dentist. It is important that the baby tooth be taken out so that the next tooth can come in and be healthy.

Sweet foods, including sugared cereals, candy, fruit roll-ups and fun fruits are very bad for your child's teeth. Sugar sticks to the teeth and allows germs to feed on it. These germs cause a harmful film called plaque to form in the mouth which causes tooth decay. If you wish to give your child a treat, try fresh fruit. If he or she must have sugared foods, be sure they are eaten at the same time as a regular meal rather than between meals. After meals, the body prepares the saliva to fight off acids caused by eating. When sugary snacks are eaten between meals, the saliva is not as prepared to help fight decay as it is immediately after a meal.

The use of fluoride can help strengthen your child's teeth against decay. Be sure your child brushes his or her teeth at least twice a day using a fluoride toothpaste. Find out if there is fluoride in the water in your neighborhood. If not, ask your dentist about fluoride tablets or rinses which your child can use.

Remember to see your dentist regularly, and feel free to ask any questions you may have about your child's teeth. By following these simple rules, you can help make sure that your child has a bright smile now and in the future. Your child's smile is meant to last a lifetime.

The Smile File series has been reviewed and endorsed by the National Dental Association and is provided as a community service by the COLGATE-PALMOLIVE COMPANY.

Fluoride is Especially Important for Your Child's Health

By Marsha E. Butler, D.D.S.

Many parents are not aware that with appropriate use of fluoride and regular preventive visits to the dentist, most children can avoid having any cavities. Fluoride is an important nutrient for people of all ages, but since most new cavities develop before age 20, it is especially essential for children and teens. Fluoride use is even more important for Black and Hispanic children, who tend to have higher tooth decay rates than the general population.

Cavities develop when acids are formed in the plaque on our teeth. Plaque is a sticky film adhering to teeth. It is made by bacteria which are present in every human's mouth. The bacteria live in the plaque and produce acids which are held onto the tooth surfaces in the plaque. Plaque is hard to see and can only be removed by effective brushing and flossing. Good oral hygiene can reduce the number of bacteria, but without fluoride use, virtually all children will develop cavities.

The enamel on the outside of teeth is the hardest part of the human body. However, when exposed to acids, the minerals of the enamel wash away. This leaves a porous surface, which bacteria and sugars and starches can stick to. Each time we eat foods containing sugar or starches (carbohydrates), more minerals are removed form our teeth. Fluoride can actually replace those minerals, making those teeth harder and stronger than before. It heals the porous areas, making them more resistant to decay.

What fluorides should your child have? There are two kinds of fluorides to help prevent decay: *systemic* (swallowed) and *topical* (applied to the surface of the teeth). Many communities have fluoride added to the water to meet our needs for systemic fluoride. Ask your child's doctor or dentist if you have fluoride in the water. If you don't, the dentist can write a prescription for a fluoride supplement such as vitamins with fluoride added. Systemic fluoride is most important for children under 12, because it goes into the teeth as they form, before they come into the mouth. The most common way to meet our needs for topical fluoride is by using fluoride toothpaste. This fluoride concentrates in the saliva, which allows the fluoride to bathe the teeth when they have been damaged by the acids.

Fluoride toothpaste should be used by everyone, at least twice a day. Be careful that very young children do not use too much toothpaste. Put an amount the size of a pea on the brush, and encourage them to rinse and spit after brushing.

Your child's dentist may also apply a topical fluoride, especially if your child is prone to decay. Fluoride is the single most important factor in reducing the risk of tooth decay. Your child's smile is meant to last a lifetime.

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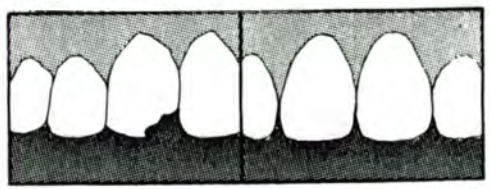
What You Should Know About Children's Tooth Injuries

By Marsha E. Butler, D.D.S.

Children are at a great risk for injuries which affect the teeth. Toddlers constantly fall as they learn to walk. Older children run, ride bikes and skateboards, and play contact sports such as hockey, soccer and football. It is easy to see why one out of five children has some type of accident involving the teeth.

Boys are two times more likely to have an accident than girls are. Children aged 6 to 12 have more accidents than children in other age groups. A child with front teeth which stick out is at a higher risk for injuries to the face or teeth.



If your child has an accident which involves the teeth, bring him or her to the dentist right away. The dentist examines the injury, takes X-rays if necessary, and treats the tooth. The dentist may treat a tooth differently depending on whether it is a baby tooth or a permanent tooth. Here are some possible injuries and the corresponding treatment your dentist will likely perform:

- A small breakage of either a baby tooth or a permanent tooth can be filed down. If the crack is deep, your dentist can use a tooth-colored material to fix it and also to make it look natural.
- A nerve which is exposed by a dental injury must be treated immediately. Your dentist will decide on the treatment based on the maturity of the tooth. Chances are he or she will remove the nerve and restore the tooth.
- The dentist will usually not treat a tooth which has been pushed up into the gums. Usually, the tooth will come out again by itself.
- If a tooth is knocked out of position, the dentist will reposition it.
- In some cases, the dentist will put extra support behind a permanent tooth if necessary until the tooth is stable. He or she will sometimes need to work on it over time to bring it back into its proper position.
- If a baby tooth is knocked out of the mouth, do not try to place it back into the socket. If a permanent tooth comes out completely, it is important to get to the dentist within a half hour. During this time, the socket is generally still clear and the tooth can be replanted. After about thirty minutes, the socket begins to clot and it may not be possible to reinsert the tooth. The tooth should be kept in milk or the patient's own saliva until he or she can get to the dentist.

More and more children are engaged in vigorous activities today. This can cause an increase in facial injuries. The dentist has many skills to help restore teeth that may be injured. Remember, a smile is meant to last a lifetime.

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Pregnancy and Oral Care for Mother and Child

By Marsha E. Butler, D.D.S.

Pregnancy is a time to be especially health-conscious. Taking good care of yourself is a way of taking care of your child. Many mothers-to-be are surprised to learn that the teeth of their baby are already developing when they are just 4 1/2 months pregnant.

During pregnancy it is important to eat a nutritious and healthy diet. Your baby especially needs calcium for normal development of bones and teeth. Some women (particularly some African-American women) cannot drink regular cow's milk, but their unborn babies still need lots of calcium for healthy teeth and bones. Even those with lactose intolerance are able to tolerate dairy products such as yogurt with "live cultures" or milk with acidophilus cultures (check the labels). If milk is a problem for you, let your doctor know so that you can get enough calcium. Also, many doctors recommend special vitamins during pregnancy.

If you are planning to conceive, it is a good idea to have a dental check-up first. That way you will not have extra problems when you are pregnant. If you don't get a chance to do that, see your

dentist early in the pregnancy and remember to tell your dentist you are expecting. Some women do experience gum problems during pregnancy. A professional cleaning and good oral hygiene can minimize the risk of discomfort later. If your gums swell or bleed at any time in your pregnancy, see your dentist.

Most dentists prefer not to take non-emergency X-rays or do complicated treatments in your first trimester. Because it may be uncomfortable for you to lie in the dental chair for long periods in you last trimester, the second trimester is usually best if you need elective care treatment.

When your baby is born, 32 teeth are developing in the bones under the gums. Until your baby's teeth come in, you can keep baby's mouth clean with a damp, clean wash cloth. In fact, you can clean your baby's teeth in this way until he or she is about 12 months old. Then it's time for a small toothbrush and fluoride toothpaste. Babies swallow what we put in their mouths, so use very little toothpaste (about the size of one pea).

Some parents elect to offer their babies a pacifier. If you want to do this, make sure it is sturdy and there are no small parts that may come loose and be swallowed. Never dip the pacifier in anything sweet. That causes rapid decay of the front teeth. Also, try to avoid putting your baby to bed with a bottle. The formula, milk, juice or sugar-water inside can also decay the teeth very rapidly.

Be sure not to forget the dentist. You need to go within six months of giving birth, and baby needs a "well-baby dental check-up" before the first birthday.

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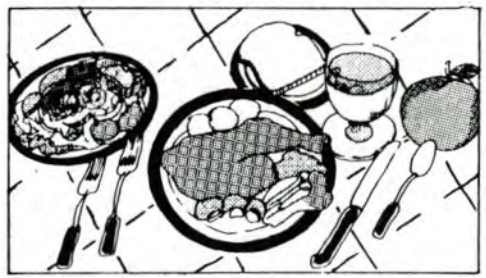
Good Nutrition is Crucial to Your Child's Oral Health

By Marsha E. Butler, D.D.S.

"We are what we eat", as the old saying goes, and that certainly holds true for children and teens. Good nutrition and a healthy diet are important for growth and development in the years from conception to adulthood. Many mothers are not aware that many of their child's teeth are already formed by the time their baby is born. So, it's essential for pregnant mothers to get enough of the required nutrients, especially calcium. If milk is a problem for you, ask your doctor how you can get enough calcium.

Young children also need lots of calcium to support the continuing growth of their bones and permanent teeth. Children have faster metabolisms (they use their calories at a faster rate) than adults do, so they may often ask for snacks between meals. Two or three snacks a day is not a problem for their teeth, as long as an adult makes sure the snacks are healthy. Good choices are milk, cheese, fresh fruit, carrots, celery, and peanuts.



Occasional sweets are fine, too, but most children will develop cavities if they eat sweets more than two or three times a day. Many parents don't realize that dried fruits and granola bars are very high in sugar and may help cause tooth decay. Too many starches, like potato chips and pretzels, can also be bad for teeth and can add too much salt (sodium) to the diet.

Parents can help reduce the chances of early tooth decay by making sure they never put their baby to bed with a bottle of formula, milk, juice, or sugar water. The sugars in these liquids can quickly ruin your baby's smile. Try to wean your baby to a cup at about age one and this danger will be greatly reduced.

What about candy? It's a normal part of childhood to like candy, and most parents would not want to deny that pleasure to their children. As long as the number of times a child eats sweets and starches is limited, there should not be a problem. It's better for teeth if you eat the whole candy bar at once than to eat a bit now and a bit one hour or more later.

Children and teens need a balance among proteins, carbohydrates (starches and sugars), and fats. There is a lot of concern that Americans need to reduce the amount of fat in their diets, particularly fat that comes from animals. Beans and grains are nutritious and affordable replacements for meats. Fruits and vegetables are good sources of many important vitamins and minerals, which are important for healthy gums. Paying attention to your child's nutritional needs is an important part of developing a healthy smile. And your child's smile is meant to last a lifetime.

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Dormir Con Biberón Puede Causar Daños Serios A Los Dientes De Su Bebe

por Jorge L. Sintes, D.M.D.

Muchos padres, abuelos y niñeras siguen esta rutina: a la hora de poner a dormir al bebé, lo colocan en la cama a la vez que le dan el biberón. El biberón tranquiliza al bebe y le ayuda a descansar pero puede causarle un daño serio y doloroso en sus dientes. A este mal se le conoce como "caries de

biberón" y tiene lugar cuando el niño duerme, descansa o camina con el biberón en la boca.

El proceso de la caries dental es sencillo: la leche u otros líquidos quedan retenidos en la boca mientras el niño se duerme. Durante ese tiempo, las bacterias orales producen ácidos que inician el proceso de la desintegración de los dientes. Este proceso puede iniciarse en unos segundos y continuar al menos durante veinte minutos.

Aunque la caries del biberón es un problema en todo el país, se da con frecuencia en las familias negras e hispanas, entre las que un por ciento de los niños padece de alguna forma de esta enfermedad.

Cualquier líquido dulce, y no sólo la leche, puede originar caries del biberón: sodas o refrescos, todos los jugos de frutas, agua con azucar e incluso la leche de pecho, si deja que el niño se duerma con la madre y, mientras, sigue mamando a su antojo. En realidad, el único líquido que no produce caries es el agua simple.

El tratamiento de la caries del biberón además de doloroso para el niño puede resultar caro, pero cuanto mas temprano comience el tratamiento, mejor. En estados avanzados, salvar el diente destruido puede envolver perforar, colocar empastes, cementar coronas y hasta requerir tratamientos de canal; pero a menudo no hay posibilidad de salvar el diente echado a perder y es preciso extraerlo. Esto deja espacios libres entre los dientes que afectan no sólo la salud oral del niño sino también su capacidad de hablar adecuadamente.

Usted puede proteger a su niño de la carie del biberón tomando unas cuantas precauciones sencillas:

- Si se trata de niños muy pequeños, no lo ponga a dormir con el biberón en la boca. A los niños mayorcitos que están acostumbrados a ir a dormir con el biberón hay que darles solo agua en el biberón, o bien, cantarles algo que los tranquilice o acariciarles la espalda hasta que se duerman.

- Evitar dar el biberón o el pecho durante mucho rato. En el caso de bebés que caminan, no permitir que anden con el biberón en la boca. Tampoco hay que usar el biberón como medio para calmarlos; como un chupón.
- Destetar al niño o quitarle el biberón lo antes posible y darles de beber en vaso: comenzar a los nueve meses y procurar que para el primer cumpleaños ya no mamen o tomen biberón.
- El cuidado de la boca ha de comenzar desde que el bebé es recién nacido: limpiar encías (y dientes) del bebé, ya desde que es muy pequeño, con un paño húmedo luego de haberlo alimentado.

Con la ayuda de quienes lo cuidan, el niño podrá gozar de una sana y linda sonrisa que podrá durar toda su vida.

La serie Sonrisas Sanas ha sido modificada y adoptada por la Asociacion Dental Hispana y la proporciona como servicio a la comunidad la firma COLGATE-PALMOLIVE COMPANY.

Los Nuevos Avances Tecnológicos Prometen Bocas Sin Caries En Los Niños

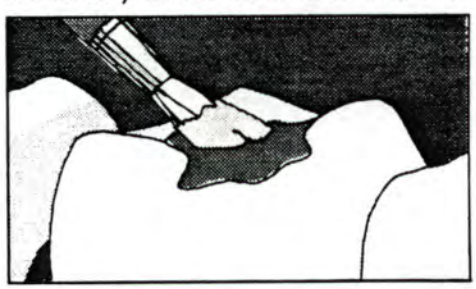
por Jorge L. Sintes, D.M.D.

Un 50 por ciento de los niños de Estados Unidos padecerán de caries. Por distintas razones, este porcentaje se eleva a aproximadamente el 83 por ciento entre los niños latinos (entre los 5 y los 17 años). Sin embargo, mediante un cuidado bucal adecuado y la aplicación de fluoruro y sellado de cavidades y fisuras es posible prevenir el cien por ciento de las caries en premolares y molares. El fluoruro resulta muy útil para prevenir las caries en las superficies blandas de los dientes, pero no es efectivo en las superficies masticadoras de los dientes posteriores, que es donde se dán el 66 por ciento de las caries. Es aquí donde los selladores de cavidades y fisuras pueden desempeñar un papel importante en mantener sana la boca del niño.

Los selladores de cavidades y fisuras, parte de la nueva tecnología dental, consisten en una delgada capa protectora que recubre las superficies masticatorias de los dientes posteriores. Los selladores resultan muy efectivos en los niños, aunque en algunos casos también los adultos pueden beneficiarse.

Este procedimiento, sencillo y no doloroso, no requiere de inyección y se puede completar en una sola visita. El costo del sellador varía según el dentista, pero generalmente cuesta la mitad de un amalgama y el beneficio duradero lo hace redituable.

Yo he aplicado selladores de cavidades y fisuras desde hace diez años



y cuento con muchos casos bien logrados de niños que hán llegado a la adultez sin caries. De todas formas, un estudio efectuado por el Instituto Nacional de Investigación Dental señala que sólo el 7.6 por ciento de todos los niños en edad escolar de Estados Unidos llevan selladores dentales.

Estos selladores de cavidades y fisuras son recomendados por las Asociaciones Dentales Americana, Nacional e Hispánica. En la siguiente consulta dental pregunte por los selladores y solicite de su sindicato o de su compañía la cobertura del seguro.

Hoy los niños pueden crecer sin caries. Los selladores dentales desempeñan un papel importante para evitar las caries en los niños.

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Cuidado Bucal Para Su Bebé Comienza En El Hogar

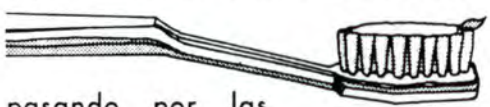
por Jorge L. Sintes, D.M.D.

Nunca es demasiado temprano para ayudar a su bebé a desarrollar y mantener una bella sonrisa.

Después de darle pecho a su bebé, limpie su lengua y sus encías con un paño húmedo y limpio. Y para proteger a sus dientes frontales de un rápido deterioro, evite acostar a su hijo con un biberón. Los biberones son buenos, pero no a la hora de acostarse. Cuando dormimos, no tragamos frecuentemente, por lo tanto nuestras glándulas producen muy poca saliva. Cuando un bebé se duerme con una botella de fórmula pediátrica, leche, jugo, o algún líquido azucarado, el líquido se queda en la boca durante mucho tiempo. Este líquido se trasforma en un ácido, que causa el rápido deterioro de los dientes, especialmente de los dientes frontales superiores. Algunos niños tienen más de 12 dientes deteriorados antes de cumplir los dieciocho meses.

Asegúrese de que su bebé tenga una dieta nutritiva, que incluya mucho calcio, para que desarrolle huesos y dientes saludables. Los bebés también necesitan tener fluoruro en su dieta. Si no está segura que el agua en su comunidad tiene fluoruro, pregúntele a su doctor. Si el agua contiene fluoruro, su bebé tendrá dientes fuertes, resistentes al deterioro. Si el agua no tiene fluoruro, su doctor o dentista le pueden dar una receta médica para gotas de fluoruro. Los bebés que reciben pecho o que no son alimentados con fórmula de lata, también necesitan suplementos de fluoruro.

Los primeros dientes que le salen a la mayoría de los bebés son los dientes frontales de abajo. A los 12 - 16 meses, salen las muelas. Ahora es el momento de usar un cepillo de dientes. Un adulto tendrá que cepillarle los dientes al niño durante los primeros años, porque la mayoría de los niños no tienen la coordinación muscular para hacerlo bien hasta que cumplen los 6 años. Sólo cepille suavemente, de un lado a otro,



pasando por las intersecciones entre el diente y la encía, y en las superficies de mordida.

¿Y la pasta dental? Comience usando una pequeña cantidad (del tamaño de un guisante) de pasta dental con fluoruro, cuando su hijo tenga un año. Recuerde, los bebés generalmente se tragan lo que tienen en la boca, así que sólo utilice un poco de pasta dental.

La denticion puede ser difícil, tanto para los padres como para el bebé. Si su hijo está molesto, un chupete de dentición enfriado debe de calmarlo. Si no ayuda,

puede tener un problema diferente, y debe consultar a su doctor. Muchos padres le ofrecen un chupete a sus hijos para ayudarlos a no chuparse los dedos. Si usted quiere usar un chupete, asegúrese de que no tenga pedacitos que se podría tragar su bebé

Es recomendable que lleve a su bebé a un dentista (revisión dental de niño sano) cuando cumpla un año. ¿Por qué? Es mejor que su hijo vea al dentista a una edad temprana, antes de que hayan problemas. Ya que la mayor parte del deterioro dental en los niños puede ser prevenido, asegúrese de que su dentista le ayude a darle a su hijo todas las oportunidades posibles para evitar las caries.

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Sonrisas Brillantes, Futuros Brillantes™

La Primera Visita Del Niño Al Dentista

por Jorge L. Sintes, D.M.D.

La Academia Americana de Odontología Pediátrica recomienda que la primera visita del niño al dentista tenga lugar entre los seis meses y el año de edad. Durante esa visita, el dentista hará la historia médica y dental completa del niño: examinará la boca del pequeño y le explicará al adulto cómo proceder para mantener sanos los dientes. En el consultorio le señalarán el tiempo para la segunda visita, que puede ser de unos cuantos meses, si hay algún problema, o un año y hasta dos si el niño parece estar sano de la boca.

Si desde temprano es sometido a tratamiento, el niño puede librarse de la caries, daños en las encías y dientes amontonados o mal espaciados. Por eso es importante llevar al niño al dentista antes de que cumpla el año.

¿Cuándo es el momento oportuno de que el niño vaya con el dentista de una manera regular? Los padres suelen llevar al niño para visitas de rutina cuando éste ya tiene los tres años. En esa edad, fácilmente se separa de sus padres y coopera con el dentista. Podráa ser conveniente que llevara al niño al consultorio sólo para que viera cómo es o aprovechar el momento en que usted va o que lleva a un hermanito para familiarizar al niño con lo que es un consultorio dental. No hable de malos momentos con el dentista en presencia del niño. Esta primera visita debe aportarle al niño una experiencia positiva.

En las visitas ordinarias, el dentista examinará cada vez la boca del

pequeño; el higienista dental le limpiará los dientes. El propósito de esta limpieza es eliminar las placas y sarro de los dientes. Posiblemente se le dará un tratamiento de fluoruro para fortalecer los dientes y resguardarlos de caries.

En caso de caries o cualquier otro problema, o si no hay espacios entre un diente y otro, el dentista recomendará una radiografía; ésta le permitirá ver al dentista el daño de los dientes y preparar el tratamiento adecuado.

Desde la primera visita al dentista, el personal de éste le instruirá a usted sobre cómo cuidar los dientes del niño. Le enseñarán a cepillar los dientes del pequeño y el uso del hilo dental. El empleo de éste es necesario, incluso con el niño, porque es la única manera de limpiar entre los dientes.

Serán los padres o quienes cuiden al niño los que cepillen los dientes de éste y le apliquen el hilo dental hasta que sea lo bastante grandecito para hacerlo por sí mismo. Por lo tanto, hay que solicitar que le enseñen a uno cómo cepillar los dientes de otro, porque esta operación, y la del uso del hilo dental, puede ser algo diferente que cuando las realiza uno mismo para sí.

En el consultorio se le indicará también la dieta del niño y se le señalarán buenos hábitos alimenticios. Será también el dentista quien le aconseje si el niño necesita fluoruro extra cada día; lo cual dependerá de si el agua del servicio público del lugar lleva o no fluoruro. El dentista también le explicará otros cuidados dentales que sean necesarios.

Según estudios, el niño sólo sentirá miedo al dentista si asocia a éste con problemas dentales. Pero los actuales avances en la Odontología permiten prever que el niño crezca sin caries ni otros problemas bucales. Si el niño acude al dentista desde que es pequeño y luego lo hace de manera regular, tendrá unos dientes sanos el resto de su vida. Recuerde que es más fácil prevenir las enfermedades dentales que tratarlas.

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La Importancia De Los Dientes Primarios

por Jorge L. Sintes, D.M.D.

Hasta hace poco, muchos doctores y padres de familia no sabían lo importante que era la salud de los dientes primarios (de leche). Desgraciadamente, muchas veces los dientes primarios deteriorados se sacan o se halan, ocasionando que el diente permanente entre torcido. (Pero con el cuidado apropiado, se pueden salvar los dientes primarios deteriorados).

Los dientes primarios son importantes para el desarrollo del habla. Es muy difícil pronunciar ciertos sonidos (como la "c" y la "s") sin los dientes primarios. Tener dientes saludables también es importante para la apariencia. Cuando tienen los dientes deteriorados, los niños a veces no sonríen, y así impiden su desarrollo social. Y si tienen los dientes frontales rotos o deteriorados, pueden desarrollar una mala imagen de sí mismos.

Los dientes primarios son necesarios para una buena nutrición. Los niños no comen bien si les faltan o les duelen los dientes, y por lo tanto pueden no comer nutrientes importantes, lo cual puede

resultar en más problemas de salud.

Además, los dientes primarios sirven como "guarda espacios" para los dientes permanentes, y ayudan a guiar a los dientes permanentes a su posición adecuada cuando salen. Sin los dientes primarios, los dientes permanentes pueden salir en el espacio equivocado, resultando en dientes chuecos.

Para asegurarse de que su hijo tenga una dentadura saludable, sin dolor, escoja una dieta balanceada, cepillele los dientes hasta que lo pueda hacer correctamente por sí mismo, utilice una pasta dental con fluoruro, y lleve a su hijo a un dentista para que reciba cuidado preventivo regular cuando cumpla un año. No espere a que haya un problema o dolor. Los niños pueden recibir heridas en la boca y en los dientes al caerse, o al participar en deportes. Si su hijo se cae de boca, consulte a un dentista rápidamente. En muchos casos se pueden salvar los dientes primarios rotos o desplazados. Es muy importante que un dentista trat cualquier infección de los dientes primarios; un abceso de un diente primario roto o deteriorado puede llegar hasta el diente permanente en desarrollo, causando daño permanente. Los dientes primarios son muy importantes para la salud de su hijo; son la base de una sonrisa bella y saludable que durará toda su vida.

La serie Sonrisas Sanas ha sido adaptada y adoptada por la Asociación Dental Hispana y la proporciona como servicio a la comunidad la firma COLGATE-PALMOLIVE COMPANY.

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SONRISAS SANAS NUMERO SEIS

Los Niños Y Las Enfermedades De Las Encias

por Jorge L. Sintes, D.M.D.

Generalmente las enfermedades de las encías son problemas de adultos. Pero algunos niños y adolescentes, especialmente las niñas de origen negro o hispano están predispuestas a tener enfermedades de las encías (periodontales).

Las enfermedades de las encías son causadas por bacterias que viven en la placa bacteriana, una capa delgada pegajosa que se adhiere a los dientes. Estas bacterias producen sustancias tóxicas que irritan los tejidos de las encías. Si la placa no se elimina mediante el cepillado de dientes y el uso regular de hilo dental, puede convertirse en una sustancia mineral dura que se adhiere firmemente a los dientes. Esta substancia se llama sarro. Una vez que se forma el sarro, sólo puede ser erradicado por un dentista o higienista dental.

Cuando la placa bacteriana y el sarro están presentes en los dientes durante varias semanas, comienza la enfermedad de las encías. Al principio, se manifiesta con la inflamación de las encías y sangrado — una enfermedad llamada gingivitis. La gingivitis es bastante común en los niños y adolescentes, y puede ser curada con una limpieza dental profesional, junto con el cepillado y uso del hilo dental. El hilo dental es necesario para limpiar las áreas entre los dientes que no alcanza el cepillo. Comience usando el hilo dental en los dientes de sus hijos, cuando vea que sus dientes hayan crecido lo suficiente para que no se pueda ver el espacio entre ellos. En el caso de la mayoría de los adolescentes y adultos, la falta de tratamiento de la gingivitis puede resultar en problemas mucho más severos. Las encías y las fibras que sostienen a los dientes dentro de la boca se irritan y eventualmente se infectan. Esto se llama periodon-titis , y puede causar el aflojamiento de los dientes, la for-mación de abcesos y eventualmente la pérdida de dientes. Sin embargo, se pueden salvar los dientes y curar la infección, si la periodontitis se trata a tiempo.

Si usted nota que los dientes de su hijo parecen estar flojos antes de tiempo, asegúrese de que lo vea su dentista. Además, está alerta a cualquier sangrado de las encías. El cuidado rápido de encías rojas, inflamadas o sangrantes, puede salvar la sonrisa de su hijo. Recuerde, una sonrisa debe durar toda la vida.

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Lo Que Todo Padre Debe Saber Sobre Los Dientes De Su Hijo

por Jorge L. Sintes, D.M.D.

Es importante que todo padre tenga nociones fundamentales sobre el crecimiento y salud de los dientes de sus hijos.En la siguiente tabla se presenta el tiempo normal de la primera dentición:

DIENTES	TIEMPO
Incisivos inferiores frontales	a los 6 meses
Los demás dientes frontales	a los 8 o 9 meses
Premolares	a los 12 o 14 meses
Colmillos o caninos	a los 16 o 18 meses
Molares	a los 2 años

A las niñas les suelen salir los dientes antes que a los varoncitos. Si hay diferencias de seis meses, por adelanto o retraso, de los tiempos arriba señalados se está dentro de la normalidad. La tabla de arriba le puede servir de pauta para saber Cuándo su hijo puede tener la dentición.

Ya desde antes de que asomen los dientes, procure mantener limpias las encías del bebé limpiándolas con una gasa o paño húmedo, pues de esta manera el niño tendrá menos dolores.

Una vez que hayan aparecido los dientes, no acueste al niño con ninguna otra cosa salvo agua en el biberón. Si en la boquita del niño queda jugo, agua azucarada, soda o cualquier tipo de leche natural o de fórmula, puede iniciarse el proceso de una caries severa que acabe arruinando todo un diente en un período muy breve. Según estudios realizados, puede ocurrir otro tanto si el niño recibe el pecho mucho tiempo.

Aunque resulta difícil lograrlo, procure impedir que el bebé se chupe el dedo o incluso evite darle el biberón. Estos hábitos pueden causar distorsiones en el crecimiento de los dientes. Los dientes torcidos o mal formados acarrean problemas de salud y enderezarlos es costoso.

Inicie pronto las visitas al dentista. El mejor momento es a los seis meses de edad, pero de ninguna manera luego de los tres años. El llevar a cabo un cuidado dental regular con la ayuda de un profesional de la salud oral significa evitar posibles problemas antes de que ocurran.Si el niño se cae y sufre daño en la boca, acuda de inmediato al dentista. Procure estar en el consultorio de éste antes de que pase media hora del accidente. De esta manera, el dentista podrá resolver cualquier problema desde su inicio e incluso salvar un diente que, de otra forma, podráa perderse.

La segunda dentición o dentición permanente comezará a la edad de 6 o 7 años. Los primeros dientes en salir son los incisivos inferiores frontales y los premolares. Esta segunda dentición, lo mismo que la dentición de leche, puede presentarse antes o después de los tiempos considerados corrientes para su aparición y, en general, no ha de ser causa de preocupación.

Si un diente de leche no acaba de caer, pero viene empujando el diente permanente en el mismo lugar, consulte al dentista. Es importante sacar el diente de leche para dejar lugar a que salga el segundo diente y en buen estado de salud.

Los dulces, los cereales azucarados, los caramelos, rollos de dulces o imitaciones de frutas son muy malos para los dientes del niño. El azúcar se pega en los dientes y hace que las bacterias se alimenten de dicho azúcar. Esos microbios forman una pelicula perjudicial llamada placa iniciandose el proceso llamado caries. Si quiere darle a su hijo algo nutritivo, déle frutas frescas. Procure que los dulces los coman en las comidas normales y no entre comidas. Luego de las comidas, el cuerpo prepara la saliva para combatir los ácidos causados por la comida.

La aplicación de fluoruro contribuye a fortalecer los dientes en contra de la caries. Procure que el niño se cepille los dientes al menos dos veces al día con una pasta dentífrico que contenga fluoruro. Entérese de si en el lugar donde vive, el agua pública lleva fluoruro; de lo contrario pídale al dentista tabletas de fluoruro o enjuagues bucales que pueda usar el niño.

No olvide la visita regular al dentista y no tenga reparo en preguntarle todo lo que desee saber sobre los dientes del niño. Si sigue estas sencillas reglas conseguirá que su pequeño tenga una brillante sonrisa ahora y para siempre. La sonrisa de su hijo es para toda la vida.

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La importancia Del Fluoruro Para La Salud De Su Hijo

por Jorge L. Sintes, D.M.D.

La mayoría de los padres no están conscientes de que pueden prevenir las caries de sus hijos con el uso apropiado del fluoruro y visitas regulares preventivas al dentista. El fluoruro es un nutriente importante para personas de todas las edades, pero ya que la mayoría de las caries nuevas se forman antes de los 20 años, es esencial para los niños y los adolescentes. El fluoruro es aun más importante para los niños de origen negro o hispano, los cuales tienden a tener un índice más alto de deterioro de dientes.

La caries se desarrolla cuando se forma ácido en la placa bacteriana de nuestros dientes. La placa bacteriana es una capa delgada pegajosa que se adhiere a los dientes, formada por las bacterias que se encuentran en la boca de todos los seres humanos. Estas bacterias viven en la placa bacteriana, y producen ácidos que se adhieren a la superficie de los dientes. La placa bacteriana es muy difícil de ver, y sólo se puede prevenir con el cepillado y el uso del hilo dental. Una buena higiene oral puede reducir el número de las bacterias, pero sin el uso del fluoruro, la mayoría de los niños desarrollaran caries.

El esmalte en el exterior de los dientes es la parte más dura del cuerpo humano. Sin embargo, cuando este esmalte es expuesto a ácido, va perdiendo sus minerales. Esto deja una sustancia porosa, a la cual se pueden adherir bacterias, azúcares y almidones. Cada vez que comemos alimentos que contienen azúcares o almidones (hidratos de carbono), nuestros dientes pierden más minerales. El fluoruro puede reemplazar los minerales, endureciendo y fortaleciendo nuestros dientes. El fluoruro sana las partes porosas, volviéndolas más resistentes al deterioro.

¿Qué tipo de fluoruro debe darle a su hijo? Hay dos tipos de fluoruro que pueden prevenir el deterioro de los dientes: El sistémico (ingerido) y el tópico (aplicado a la superficie de los dientes). Muchas comunidades le añaden fluoruro al agua para satisfacer la necesidad del fluoruro sistémico. Pregúntele al médico, o al dentista de su hijo si hay fluoruro en el agua donde usted vive. Si no es así, el dentista le puede dar una receta médica para que consiga un suplemento de fluoruro, (como en el caso de las vitaminas con fluoruro añadido). El fluoruro sistémico es muy importante para los niños menores de los 12 años, ya que penetra los dientes durante su formación, antes de que salgan en la boca. La manera más común de satisfacer la necesidad del fluoruro tópico es usar pasta dental. Este tipo de fluoruro se concentra en la saliva, lo cual permite que el fluoruro bañe a los dientes cuando han sido dañados por los ácidos.

Todo el mundo debe usar pasta dental, al menos dos veces por dia. Tenga cuidado de que los niños muy pequeños no usen demasiada pasta dental. Ponga una cantidad del tamaño de un guisante en su cepillo, y enséñeles a enjuagarse la boca y a escupir después de cepillarse los dientes.

El dentista también puede aplicarle fluoruro tópico a los dientes de su hijo, si está predispuesto al deterioro dental. El fluoruro es el factor más importante para la reducción del deterioro de los dientes. Recuerde, la sonrisa de su hijo debe durar toda la vida.

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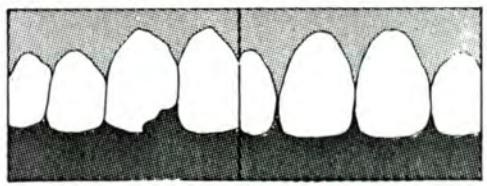
Guia Para Los Padres En Caso De Lastimaduras

por Jorge L. Sintes, D.M.D.

Los niños corren mucho riesgo de sufrir daño en los dientes. Los pequeños constantemente se caen al aprender a caminar. Ya de mayorcitos, se dedican a correr, a ir en bicicleta o patineta y practican juegos rudos, como puede ser el hockey, el fútbol o el soccer. Es fácil de comprender que uno de cada cinco niños sufre accidentes en que los dientes resultan lastimados. Es doblemente probable que sufre accidentes los niños que las niñas. Si consideramos los grupos de edad, entre los 6 y los 12 años es cuando más accidentes ocurren. Además, un niño cuyos dientes incisivos están ya salidos



corre mayor riesgo de daños en el rostro o en los propios dientes.

Si su hijo es víctima de un accidente en que los dientes resultan lastimados, hay que llevarlo de inmediato al dentista. Este examinará el daño, si es preciso tomará una radiografía y tratará las piezas lastimadas. Dicho tratamiento será diferente si el daño lo ha sufrido un diente de leche o un diente permanente. He aquí algunas de las posibles lastimaduras y los remedios más aconsejables:

- Si ha ocurrido una pequeña rotura en un diente de leche o en un diente permanente, se puede limar. Si es una rotura profunda, es posible adherirle material del color del diente para hacerlo lucir natural.
- Si por causa del accidente el nervio ha quedado expuesto, hay que tratarlo de inmediato. El dentista decidirá sobre el tratamiento según la madurez del diente. En determinado caso tratará el nervio y reparará el diente.
- De ordinario, el dentista no tratará un diente que se haya subido en la encía, pues lo más común es que el diente recobre por sí mismo su posición.
- Si un diente se disloca, el dentista lo enderezará.
- En algunos casos, el dentista recerrirá a algún reforzamiento de un diente permanente durante el tiempo que sea necesario hasta que el diente quede estable. A veces será preciso trabajar con dicho diente hasta que quede debidamente enderezado.
- Si un diente de leche salta de la boca, no hay que volverlo a colocar en el alvéolo; pero si se trata de un diente permanente que se ha escupido de la boca, es importante recurrir al dentista en el transcurso de la primera media hora desde el accidente, porque en ese lapso aún está claro el alvéolo y es posible reimplantar la pieza. Al cabo de unos treinta minutos, el alvéolo presenta grumos y a lo mejor ya no es posible la reinserción. El diente se mantendrá en leche o en la saliva del paciente hasta llegar al dentista.

Cada vez son más los niños que practican actividades vigorosas, lo que puede acarrear un aumento de lastimaduras en el rostro. El dentista, sin embargo, dispone de muchas posibilidades de curar un diente que ha sufrido algún daño. Recuerde que la sonrisa es para toda la vida.

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El Embarazo Y El Cuidado Bucal Para Madre E Hijo

por Jorge L. Sintes, D.M.D.

El embarazo es un período durante el cual la mujer debe estar muy consciente de su salud. Al cuidarse, está cuidando a su hijo. Muchas mujeres embarazadas se sorprenden al averiguar que los dientes de su bebé ya se están desarrollando en el cuarto y medio mes de su embarazo.

Durante el embarazo, es importante seguir una dieta nutritiva y saludable que incluya calcio. Su bebé necesita el calcio especialmente, ya que es esencial para el desarrollo normal de sus dientes y huesos. Algunas mujeres (particularmente algunas mujeres de origen hispano) no pueden tomar leche de vaca, sin embargo el bebé que se está desarrollando dentro de ellas necesita mucho calcio para tener dientes y huesos saludables. Aun las mujeres que no pueden tolerar la lactosa, sí pueden comer ciertos productos l_cteos como el yogurt con cultivos activos, o la leche con cultivos de acidofilus (vea las etiquetas). Si la leche es un problema para usted, dígaselo a su doctor, para que le proporcione otras fuentes de calcio. Además, muchos doctores recomiendan vitaminas especiales durante el embarazo.

Si está planeando concebir, es buena idea ir al dentista primero. Así, no tendrá problemas adicionales cuando está embarazada. Si usted no tiene esa oportunidad, visite a su dentista al principio de su embarazo y dígale que está embarazada.

Algunas mujeres tienen problemas de las encías durante el embarazo. Una limpieza profesional y una buena higiene oral, reducirán el riesgo de tener problemas más adelante. Si se inflaman o sangran sus encías durante su embarazo, vea a su dentista.

La mayoría de los dentistas prefieren no tomar radiografías (excepto en casos de emergencia), o realizar tratamientos complicados durante el primer trimestre. En realidad, el segundo trimestre es el mejor período para recibir tratamiento, ya que, durante el tercer trimestre, puede ser incómodo estar sentada durante tanto tiempo en la silla del dentista.

Cuando nace su bebé, tiene dientes desarrollándose en los huesos debajo de las encías. Puede mantenerle la boca limpia, hasta que le salgan los dientes, con un pañito limpio humedecido. De hecho, puede limpiarle la boca de esta manera, hasta que su bebé tenga alrededor de 12 meses. Entonces será el momento para limpiarle la boca con un cepillo de dientes pequeño y pasta dental con fluoruro. Los bebés se tragan lo que se les pone en la boca, así que use muy poca pasta dental (como del tamaño de un guisante).

Algunos padres eligen darle un chupete a sus hijos. Si usted quiere hacerlo también, asegúrese de que está entero y firme, y de que no tenga partes pequeñas que puedan aflojarse y ser tragadas. Nunca sumerja el chupete en algo dulce. Esto causa el deterioro rápido de los dientes.

Además, trate de evitar acostar a su bebé con una botella. La fórmula pediátrica, leche, el jugo o agua con azúcar también pueden causar el rápido deterioro de los dientes.

Y recuerde, no se le olvide ir al dentista. Necesita ir a los seis meses después de dar a luz, y su bebé necesita una revisión dental de niño sano antes de su primer cumpleaños.

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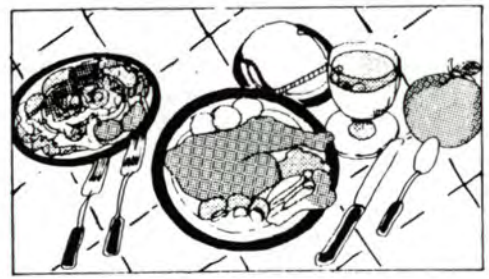
La Nutrición Y La Salud Oral De Su Hijo

por Jorge L. Sintes, D.M.D.

"Somos lo que comemos", dice un viejo refrán, y es muy cierto en el caso de los niños. Una buena nutrición y una dieta saludable son muy importantes para el crecimiento y el desarrollo de su hijo, desde su concepción hasta llegar a ser un adulto. Muchas madres no saben que la mayoría de los dientes de sus hijos ya están formados cuando nacen. Por eso es esencial que las mujeres embarazadas obtengan los nutrientes necesarios, especialmente el calcio. Si la leche es un problema para usted, pregúntele a su doctor la mejor manera de obtener suficiente calcio.

Los niños pequeños también necesitan mucho calcio para mantener el crecimiento continuo de sus huesos y de sus dientes permanentes. Los niños tienen el metabolismo más acelerado (utilizan las calorías más rápidamente) que los adultos, y por eso a veces piden un bocadillo entre comidas. Comer entre comidas 2 ó 3 veces al día no debe constituir un problema para la salud o los dientes de los niños, siempre y cuando un adulto se asegure de que los bocadillos sean saludables. Hay muy buenas opciones como leche, queso, fruta fresca, zanahorias, apio y maní (cacahuates). Un dulce de vez en cuando, también es aceptable, pero la mayoría de los niños des arrollarán caries si comen dulces más de 2 ó 3 veces al día. La mayoría de los padres no se dan cuenta que las frutas secas y las barras de granola tienen bastante azúcar y pueden causar el deterioro de los dientes. El exceso de almidón, como papas fritas, galletas y "pretzel," también pueden ser dañinas para los dientes, e introducir demasiada sal (sodio) a la dieta.



Los padres pueden ayudar a reducir la probabilidad del deterioro temprano de los dientes, asegurando no acostar a los bebés con una botella de fórmula pediátrica, leche, jugo, o agua con azúcar. El azúcar en este tipo de alimentos arruinará la sonrisa de su bebé inmediatamente. Intente reducir la cantidad que ingiere su hijo a una taza para cuando tenga un año, y correrá mucho menos peligro.

¿Y los caramelos y chocolates? El gusto por los dulces es una parte normal de la niñez, y muchos padres no quieren negarle ese placer a sus hijos. No debe haber problema, con tal de que se limite el número de veces que su hijo coma dulces y almidones. Es mejor para los dientes si se come una barra de chocolates de una vez, y no un poquito ahora y otro poquito una hora después.

Los niños y los adolescentes necesitan un balance entre proteínas, hidratos de carbono (almidones y azúcares), y grasa. Hay una preocupación sobre la cantidad de grasa que ingieren los norte americanos, y la necesidad de reducir la grasa de sus dietas, especialmente la grasa que proviene de los animales.

Las frutas y los vegetales son buenas fuentes de vitaminas y minerales importantes, los cuales son indispensables para la salud de las encías. La atención a las necesidades de nutrición de sus hijos forma una parte muy importante en el desarrollo de una sonrisa saludable. Y, la sonrisa de su hijo debe durar toda su vida.

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Colgate

Bright Smiles, Bright Futures

An Inner-City Oral Health Improvement Program

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"BRIGHT SMILES, BRIGHT FUTURES™" COMES TO ATLANTA TO GIVE YOUTH A HEALTHY START ON A LIFE-LONG SMILE

ATLANTA, GA, October 30, 1995 -- The Honorable Mayor Bill Campbell of Atlanta (foreground) was recently on hand at Emma Hutchinson Elementary School to proclaim **Bright Smiles, Bright Futures Week** in Atlanta. **"Bright Smiles, Bright Future™"**, developed by Colgate-Palmolive Company, is an inner-city, multi-cultural oral health education program designed for youth from birth though age 12.

The **"Bright Smiles, Bright Futures"** launch took place at Emma Hutchinson Elementary School. To help Atlanta's Mayor Bill Campbell to proclaim **Bright Smiles, Bright Futures Week** were (from l - r) Drs. Anderson Kizzie, Local Coordinators, Dr. Kim Turner, North Georgia Dental Society, Cathryn Phillips, National Program Manager, Colgate-Palmolive Company, Dr. Marsha Butler, Director Global Oral Health Improvement and Consumer Education, Colgate-Palmolive Company, Saddie Daynard, Atlanta Board of Education representative, Dr. David Lamothe, President North Georgia Dental Society, Vic Carter, WSB-TV, Ms. Wanda Thomas, Bright Smiles, BS/BF Advisory Committee and Dr. Walter Young, Atlanta dentist.

Now in its fourth year, **"Bright Smiles, Bright Futures"** provides oral health screenings and education, parent education workshops and treatment referrals. Colgate's customized **"Bright Smiles, Bright Futures" Dental Van** was present to give free dental screenings to children from Emma Hutchinson Elementary School.

Since 1991, **"Bright Smiles, Bright Futures"** has reached 2.5 million children in more than 20 cities with important oral health information through its in-school curriculum, mobile dental van and community outreach programs. In addition to Atlanta, the program is operational in Oakland, CA, Philadelphia, PA and New York City. The program continues its national goal of providing important, exciting and fun oral health education for youth and their families.

# # # #

"BRIGHT SMILES, BRIGHT FUTURES™" COMES TO ATLANTA:

Mayor Bill Campbell of Atlanta (at right) was on hand to proclaim **Bright Smiles, Bright Futures Week** as Colgate-Palmolive Company introduced its **"Bright Smiles, Bright Futures™"** program to the Atlanta community. Recipients of the proclamation included Dr. Marsha Butler and Cathy Phillips, Colgate-Palmolive Company, members of the North Georgia Dental Society, a constituent chapter of the National Dental Association, WSB-TV news anchor Vic Carter, School Principal Dr. Augustine McDaniel and a host of Atlanta community members. The **"Bright Smiles, Bright Futures™"** launch took place at Emma Hutchinson Elementary School. **PHOTO CREDIT: Bill Hollins**

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BRIGHT SMILES, BRIGHT FUTURES™ AND "DR. RABBIT" EDUCATE ATLANTA'S YOUTH ABOUT PROPER ORAL HEALTH CARE

ATLANTA, GA, October 30, 1995 -- Atlanta's youth can look forward to a brighter future because "Dr. Rabbit" is here to educate them about proper oral health care. With the help of "Dr. Rabbit", Atlanta's youth will have a bright smile and bright future. "Dr. Rabbit" is part of Colgate-Palmolive Company's **"Bright Smiles, Bright Futures™"** Program, a multi-cultural oral health education community program designed to reach inner-city youth from birth through age 12.

On hand to help "Dr. Rabbit" at the launch were (from l - r): Dr. Augustine McDaniel, Principal, Emma Hutchinson Elementary School; Dr. David Lamothe, President North Georgia Dental Society; Cathryn Phillips, National Program Manager Oral Health Improvement, Colgate-Palmolive Company; Dr. Marsha Butler, Director Global Oral Health Improvement and Consumer Education, Colgate-Palmolive Company and Dr. Anderson Kizzie, Bright Smiles, Bright Futures Local Coordinator.

Now in its fourth year, **"Bright Smiles, Bright Futures"** provides oral health screenings, parent education workshops and treatment referrals, providing children with a healthy start on a healthy smile. Colgate's customized **"Bright Smiles, Bright Futures" Dental Van** was present to give free dental screenings to kindergarten, first, second and third grade children from Emma Hutchinson Elementary School, who hosted a special presentation attended by Atlanta Mayor Bill Campbell..

Since 1991, **"Bright Smiles, Bright Futures"** has reached 2.5 million children in more than 20 cities with important oral health information through its in-school curriculum, mobile dental van and community outreach programs. In addition to Atlanta, the program is also fully operational in Oakland, CA, Philadelphia, PA and New York City. The program continues its national goal of providing important, exciting and fun oral health education for youth and their parents.

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"DR. RABBIT" EDUCATES ATLANTA'S YOUTH ABOUT PROPER ORAL CARE:
Atlanta's youth can look forward to a bright future with "Dr. Rabbit." Dr. Rabbit is part of Colgate-Palmolive's **"Bright Smiles, Bright Futures™"** Program, a grass-roots multi-cultural oral health education program for youth from birth - age 12. On hand to help "Dr. Rabbit" were (from l-r): Dr. Augustine McDaniel, Emma Hutchinson Elementary School, Dr. David Lamothe, North Georgia Dental Society, Cathryn Phillips, Colgate-Palmolive Company, Dr. Marsha Butler, Colgate-Palmolive Company and Dr. Anderson Kizzie, Local BS/BF Coordinator. **"Bright Smiles, Bright Futures™"** was launched in Atlanta at Emma Hutchinson Elementary School.
PHOTO CREDIT: Bill Hollins

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COLGATE HONORS WINNERS OF 1995 "WHY MY SMILE IS IMPORTANT TO ME" POSTER CONTEST

NEW YORK, NY, May 1, 1995 -- Colgate-Palmolive Company announced the winners of its 1995 **"Why My Smile Is Important To Me" Poster Contest** in recognition of National Children's Dental Health Month, February 1995. **The winners will be honored at a ceremony at P.S. 236, located at 6302 Avenue U in Brooklyn, NY, on Monday, May 8, 1995 from 10 - 11AM**. The contest was conducted with the support of The New York City Board of Education, Division of School Health Services, and the New York City Health and Hospitals Corporation, Oral Health, Programs & Policy for New York City.

The Grand Prize winners are Carolyn Spiro (Kindergarten) from P.S. 236 in Brooklyn and Kara Jellinek (Kindergarten) also of P.S. 236 in Brooklyn, whose theme is "A Smile Is My Best Friend." First prize was awarded to Carlos Intriago (Second Grade) from P.S. 152 in Woodside. Second prize was given to Cheuk Yin Lai (Second Grade) from P.S. 152 in Woodside and Third prize to Kalif Lawrence (First Grade) from P.S. 160 in the Bronx.

Each winner will receive a U.S. Savings Bond (Grand Prize Winners - $500 each, 1st Place - $300, 2nd Place - $200, 3rd Place -$100,) and Colgate premiums. The winning school, P.S. 236 in Brooklyn, will receive a gift certificate toward the purchase of a color television and a vcr, complete with Colgate videos.

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Contestants for the **"Why My Smile Is Important To Me"** poster contest included children from kindergarten through Grade 3 in elementary schools throughout the five boroughs. The contest, first conducted in 1994, is presented in concert with leading health institutions and health professionals and is part of Colgate's **"Bright Smiles, Bright Futures"™ (BS/BF)** oral health improvement program for inner-city youth and their families. **"Bright Smiles, Bright Futures"™** fosters positive self-esteem by empowering children to take care of their teeth, thus helping them develop good oral habits that will last a lifetime.

The winning posters along with the eight (8) honorable mentions will be displayed in public spaces throughout New York City. These 12 posters will be included in Colgate's 1995-1996 bi-lingual (English and Spanish) **"Bright Smiles, Bright Futures" Back To School** Poster Calendar. The 1995-1996 **"Bright Smiles, Bright Futures" School Calendar** will be distributed to elementary schools throughout New York City during the back-to-school season while supplies last.

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WINNERS OF COLGATE-PALMOLIVE POSTER CONTEST HONORED AT P.S. 236:

The winners of Colgate-Palmolive Company's 1995 "Bright Smiles, Bright Futures™" "Why My Smile Is Important To Me" Poster Contest were recently honored at a ceremony at P.S. 236 in Brooklyn. The winners (front row, left to right) are Kalif Lawrence (3rd prize, P.S. 160 in the Bronx), Carolyn Spiro and Kara Jellinek (Grand Prize winners, both from P.S. 236 in Brooklyn), Cheuk Yin Lai (2nd prize from P.S. 152 in Woodside) and Carlos Intriago (1st prize from P.S. 152 in Woodside). On hand to help present the awards were (back row left to right) Dr. Diane Toppin, Deputy Director of Management and Operations, and Dr. Jeffrey Leeds, Deputy Director of Clinical Affairs, both from the New York City Health and Hospitals Corporation, Oral Health, Programs & Policy for New York City, Dr. Marsha Butler, Director, Global Oral Health Improvement and Consumer Education, Colgate-Palmolive Company, and Ms. Georganne Del Canto, Director, School Health Services, New York City Board of Education. Each winner received a U.S. Savings Bond and Colgate premiums.

PHOTO CREDIT: Lee White

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COLGATE-PALMOLIVE'S "BRIGHT SMILES, BRIGHT FUTURES™" PROGRAM COMES TO LOS ANGELES TO BENEFIT INNER-CITY CHILDREN

NEW YORK, NY, April 10, 1995 -- Colgate-Palmolive Company will bring the **"Bright Smiles, Bright Futures™"** program to local sites in Los Angeles to increase oral health awareness of this community-based outreach effort. The program will be in the Los Angeles area from **Saturday, April 15 - Saturday, April 29.** The program is presented in partnership with the Angel City Dental Society, the local chapter of the National Dental Association (NDA).

"Bright Smiles, Bright Futures™" provides oral health screenings and education, parent education workshops and treatment referrals, to help children get a healthy start on a life long smile. Colgate's **"Bright Smiles, Bright Futures™" Dental Van** will make daily stops at elementary schools, churches, Head Start and community centers in Long Beach, Watts, East Los Angeles, and Compton to reach inner-city youth, from birth through age 12, and their parents.

Anthony Thomas, Los Angeles Field Representative for Mayor Richard J. Riordan, will present Cathy Phillips, National Manager for Oral Health Improvement, Colgate-Palmolive Company, with a proclamation declaring the weeks of **Monday, April 17 -Saturday, April 29 "Bright Smiles, Bright Futures Weeks"** in Los Angeles. He will present the proclamation on **Thursday, April 20, 1995, from 8:30AM - 9:30AM, at the 92nd Street Elementary School located at 9211 Grape Street in Los Angeles**.

On **Saturday, April 15,** the Colgate Dental van will make a stop at the McDonald's Restaurant at 1150 E. Rosecrans Avenue, in Compton, CA, from 10:00AM - 3:00PM. Then on **Saturday, April 22**, there will be a **"Keep That Smile Day"** event at the **Challenger's Boys & Girls Club** located at **5029 Vermont Avenue in Los Angeles** from **12:00PM - 4:00PM**.

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The "Bright Smiles, Bright Futures" Los Angeles awareness program will culminate on **Saturday, April 29,** when the **"Bright Smiles, Bright Futures™" Dental Van** will visit the **Weingart Urban Center YMCA** located at **9900 South Vermont Avenue in Los Angeles**, from **10:00AM - 3:00PM**. Each Saturday will be a day of fun as children participate in various children's activities including clowns conducting balloon sculptures and facepaintings.

Now in its fourth year, the **"Bright Smiles, Bright Futures™"** program is a grass-roots, multicultural program that is fully operational in Oakland, CA, Philadelphia, PA and New York City. With awareness programs in Washington, D.C., Baltimore, MD, Louisville, KY, Kansas City, KS, Kansas City, MO, New Jersey and Hartford, CT, **"Bright Smiles, Bright Futures™"** continues its national goal of providing important, exciting and fun oral health education for youth and their parents.

In 1995, more than 1,000,000 children will be exposed to **"Bright Smiles, Bright Futures™"** through its in-school curriculum, mobile dental van and community outreach programs.

# # # #

The Future Is Bright: Bright Smiles, Bright Futures Comes To Los Angeles:

The Colgate-Palmolive Company brought its **"Bright Smiles, Bright Futures™"** program to Los Angeles recently to provide oral health screenings and education to youth and their parents. On hand to welcome them at the 92nd Street Elementary School were Anthony Thomas (center), Field Representative for Mayor Richard J. Riordan of Los Angeles, who presented Dr. Mary Davis, "Bright Smiles, Bright Futures" Coordinator, and a host of well wishers, with a proclamation declaring it **"Bright Smiles, Bright Futures" Week in Los Angeles**. **"Bright Smiles, Bright Futures™"** provides oral health screenings and education, parent education workshops and treatment referrals, providing children with a good start on a healthy future. Colgate's **"Bright Smiles, Bright Futures™" Dental Van** made daily stops at elementary schools, churches, Head Start and community centers in Long Beach, Watts, East Los Angeles, and Compton to reach inner-city youth, from birth through age 12, and their parents. The program is presented in partnership with the Angel City Dental Society, the local constituent chapter of the National Dental Association (NDA).

PHOTO CREDIT: Fareed Muwwakkil

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