



# GREAT SMILES

PEDIATRIC DENTISTRY & ORTHODONTICS

## Guide for Parents with Children who have Dental Signs of GERD

### **GER – Gastroesophageal Reflux**

### **GERD – Gastroesophageal Reflux Disease**

The effect of GERD on the teeth: When stomach acid (pH 2) arises into the mouth, the teeth can be affected. We have observed areas of dental erosion in your child's teeth. This takes the form of "reverse architecture" in that what were once cusp tips are now areas of pot holes or moon cratering. These "pot holes" may become sensitive to touch or temperature. These erosion areas can expand and deepen to the point they cause fillings to be washed out. The acid can expose the nerve inside the tooth. Stomach acid also makes untreated cavities worse.

### **Pediatric Symptoms resulting from GERD**

- Child reports burning or acidic taste in mouth
- Child reports frequent "hot burps" or "baby vomit"
- Child reports burning in the area of their heart or a stomach ache
- Child had frequent belching after meals
- Child's breath has an acidic odor especially in the morning before breakfast
- Child is continuously coughing during sleep (usually GERD, not Asthma)
- Child has chronic hoarseness / laryngitis / pharyngitis
- Child reports that it is painful to swallow

### **Associated Conditions**

- Asthma / ADHD / Cerebral Palsy / Premature birth / Failure to thrive

### **Dental Manifestations**

- Enamel erosion (pot holes or moon craters) from the stomach acid washing over the teeth
- Tooth sensitivity can develop once the enamel covering is gone
- Acid reflux can make untreated cavities worse
- Dental fillings (amalgams or resins) will start to appear taller than surrounding tooth structure
- In severe cases of GERD, the tooth nerve can be exposed – OUCH!

### **Eliminate other potential causes of enamel erosion**

- Do not eat sour candies (sour skittles, sour gummies, sour patch kids, sour war heads etc.)
- Avoid acidic drinks (sodas, juices)

## **Suggested Dietary Changes to help reduce GERD**

- Avoid fried foods, spicy foods, mints, acidic juices (OJ with pulp) and sodas
- Avoid over eating(super sizing) and eating too fast --- enjoy every bite
- Do not lie down after eating (it takes 2 hours for the stomach to empty)
- Do not eat near bedtime
- Place a 2X4 under the head of the bed vs. two pillows

## **Other Tips**

- Read up on GERD (On the internet - type "GER" or "GERD" into the search engine)
- Work with your child to assist him/her to be able to accurately describe:
  - what it feels like when reflux occurs
  - how often reflux occurs
  - what time of day it occurs (bedtime, after meals, upon awakening, etc)
  - weather certain foods trigger reflux (make a list - pizza, spaghetti, fried chicken, sodas)

## **What to do now**

- If you confirm that your child does indeed have symptoms of GERD, contact your physician for an evaluation.
- Your physician may recommend trying medication or further diagnostic tests. Your physician may recommend a referral to a Pediatric GI Specialist for diagnostic testing (endoscopy, 24 hour pH probe, etc)

## **Medical Treatments for GERD may include**

- Zantac, Prevacid, Prilosec, Reglan (all medications to prevent reflux)
- Surgical correction - Nissen fundoplication / pyloroplasty

**Long-term Dental Risks** - If untreated, GERD can cause irreversible tooth structure loss

**Long-term Medical Risks** - chronic untreated GERD can lead to esophageal (throat) problems in adulthood

## **References:**

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