

WHY, AND WHAT SHOULD I DO?

EARLY CHILDHOOD TOOTH LOSS

Losing baby teeth is a natural part of every kid's childhood, but with children with hypophosphasia (HPP), early tooth loss is a clinical hallmark of this rare metabolic bone condition.

WHY?

The reason this happens with children with HPP has nothing to do with the bone, but instead, part of the metabolic process which disrupts the layer of cementum that anchors the tooth in place. These observations tend to reinforce the view that alkaline phosphatase is, among other functions, associated with the production of the organic matrix for enamel formation and with the production of collagen.¹

WHAT SHOULD I DO?

Regardless of what form of HPP your child has, teeth can fall out at any time for no reason at all. Some dentists have attempted to splint teeth with no real long term effect. The best advice is to recognize that this is normal for children with HPP and that most children learn to adapt easily to their tooth loss. With this in mind, **don't panic! If you stay calm, this will help your child remain calm too.**

Many parents can relate to the fear and anxiety that come with early tooth loss and how it may impact a child's self confidence. The Soft Bones community can provide advice and share experiences of how families have turned this into a positive experience, including making children feel extra special with visits from the Tooth Fairy.

When children with HPP shed their primary teeth, many adapt their diets and eat softer foods or some develop tough gums and surprise their parents with what they are willing or able to eat. Some parents opt for partials or dentures to help their child with eating, or for cosmetic reasons, until permanent teeth come in.

Many parents try to keep their child's teeth in as long as possible, but in the end, little has been shown effective to keep teeth rooted.

In most cases, the tooth will painlessly come out with roots intact, there will be little or no blood showing. This can be scary for parents since the teeth are very long and look different but this is completely normal.

Sometimes a tooth may partially fall out or some remaining piece of the tooth might be stuck to the gum. This is also normal. You can try to remove the piece of the tooth yourself or see your dentist for further care.

After a tooth falls out or is pulled you may see a blood clot. These form in the socket to protect the bone and nerves underneath. Sometimes that clot can become dislodged or dissolve a couple of days after the exfoliation of the tooth.



Prematurely exfoliated primary teeth from a child with HPP

ORAL HYGENE

It is recommended with all children that a pediatric dentist is seen as soon as teeth start coming in. This is no different with HPP, however, ask your dentist if he or she has experience treating children with HPP. Oral hygiene is essential for HPP patients and more frequent visits may be required to keep teeth healthy.

Reference

1. Ritchie GM. Hypophosphatasia: A Metabolic Disease with Important Dental Manifestations. *Archives of Disease in Childhood* 1964;39:584-90. doi:10.1136/adc.39.208.584