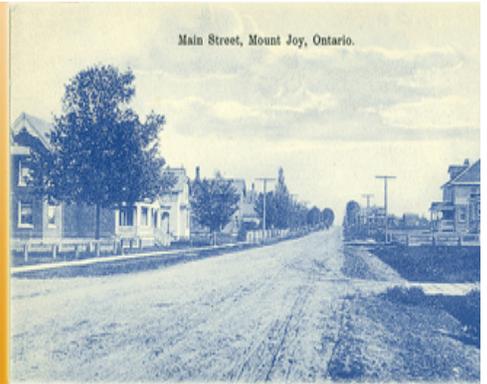




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# The Growth & Development of our Teeth & Face

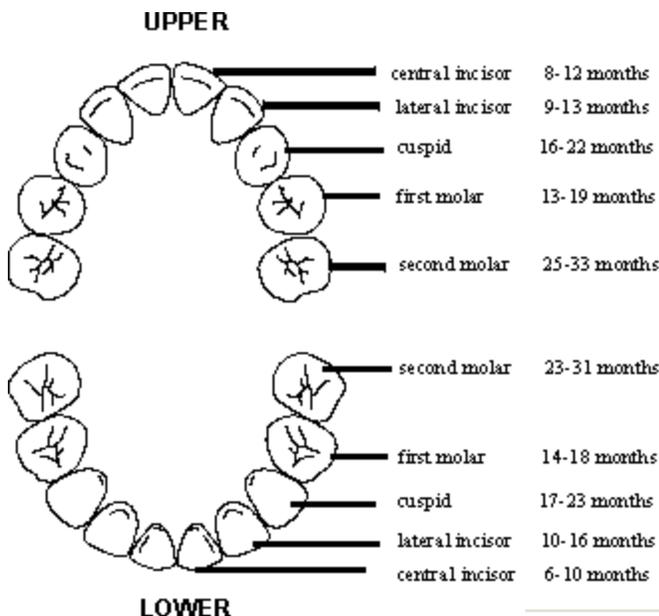


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ON...  
YOUR  
DENTAL  
HEALTH**

Undoubtedly, you are aware that there are two sets of teeth that we develop in our lifetime. The first set is called our primary teeth or dentition, often referred to as our baby teeth. Our permanent teeth (only permanent if we look after them) are our secondary dentition.

Baby teeth start to develop before we are born. They usually will start to erupt around six months of age and all twenty baby teeth are usually in place by the time we are 30 months. As they erupt, a child can often have a number of "teething" problems such as irritability, fever, flushing of the cheeks, profuse drooling and diarrhoea. Recently, there has been an observation that babies can be prone to inner ear infections as a result of teething.

The bone surrounding the baby teeth is very soft and pliable. Therefore, minor bumps or injuries to the baby teeth often result in no major problem. As well, this soft bone will allow the baby teeth to be easily moved out of their alignment by habits such as thump sucking or sucking on a pacifier.



**The illustration to the left describes the eruption sequence of baby teeth.**

Our second set of teeth start to erupt at around age six. We lose our baby teeth in two stages. The first stage is typically between ages 6 to 8 and during this stage, we lose the upper and lower incisors (8 teeth) and get eight permanent incisors and four permanent molars. These are our first molars, often called our six-year molars. This stage is accompanied by a lot of facial growth. At the end of this stage, a dentist can usually determine if any orthodontic problems are occurring.

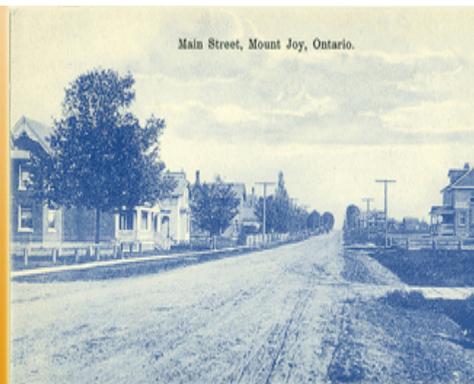
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## The Growth & Development of our Teeth & Face

The second stage of losing baby teeth is usually from age 10 to 12. Here, we lose the remaining 12 baby teeth at the back of our mouths and get their replacements. These are our cuspids and pre-molars. As well, we get our second molars erupting behind our first molars. At this time, our bodies are growing rapidly and our facial skeleton is maturing. This is the stage when it is best to start most orthodontic corrections. A lot of the correction that is done with orthodontics is influencing the growth pattern of the facial bones.

So now we have 28 permanent teeth and the Tooth Fairy is filing for bankruptcy. There are more teeth to come. The full complement of permanent teeth is 32 and the last four to develop are our third molars or "wisdom teeth". These should come in around age 18.

Unfortunately, most people's jaws are not large enough to accommodate all these teeth and the third molars can remain trapped partially or completely below the gum and bone tissue. This results in the need for patients to make a decision about their third molars. If these teeth are impacted, they can cause problems.

Removing the teeth will eliminate these problems, but there are risks associated with the removal of teeth. The risks are fewer in younger people and often the recommendation is made to remove the third molars at an early age (late teens—early twenties) to take advantage of the potential for less risk.



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