

CHILDREN'S EYE HEALTH
Brought to you by The Medicine Shoppe



With a large number of states beginning the school year earlier, August is the new September! Along with school supply shopping and purchasing those back-to-school clothing items, it's time to make comprehensive eye exam appointments for the kids. Since 80% of learning occurs through the eyes, healthy vision is essential to a child's success in the classroom. Conveniently, August is designated as Children's Eye Health and Safety Month! A good rule of thumb is to have your children's eyes examined during well-child visits, beginning around age three. Your child's eye doctor can help detect refractive errors such as nearsightedness, farsightedness and astigmatism as well as the following diseases: Amblyopia (lazy eye), strabismus (crossed eyes), ptosis (drooping of the eyelid), or color deficiency (color blindness).

Not sure what the warning signs could look like? Remember the "ABC's" of sight. "A" stands for "appearance" which refers to your child's eyes. Are they red or swollen? Do they squint a lot? Maybe you notice one eye might droop a bit more than the other. The "B" stands for "behavior" which could be actions like sitting unusually close to the television, the lack of interest in reading for an extended amount of time, or lacking proper hand-eye coordination. Finally, the "C" stands for "Complaints." Does your child complain of blurry or double vision? Does your child say that their eyes hurt or burn? Does your child often complain of headaches? If you answered yes to any of those questions, it is definitely time to make an appointment and mention all of the above observations you made. If your doctor suspects that your child may have a vision problem, you can make an appointment with your local ophthalmologist for further testing. In addition to the "ABC's" there are some other specific warning signs that may indicate that your child has a vision problem. Some of these include: Wandering or crossed eyes, a family history of childhood vision problems, disinterest in reading or viewing distant objects, and squinting or turning the head in an unusual manner while watching television. Keeping your children's eyes safe is another part of maintaining healthy vision. Eye injuries are the leading cause of vision loss in children. According to yoursightmatters.com, there are about 42,000 sports-related eye injuries every year in America, and children suffer most of these injuries.

Help prevent your child from being one of the more than 12 million children who suffer from vision impairment by remembering a few basic rules of safety: All kids should wear protective eyewear during any and all sporting and recreational events and buy your children appropriate and safe toys. Try to avoid toys and games that might include unusually sharp objects. Avoid projectile toys such as darts, bows and arrows, and missile-firing toys. In addition, look for toys marked with "ASTM", which means the product meets the national safety standards set by the American Society for Testing and Materials. One of 20 children ages 3 to 5 has a vision problem that could result in permanent vision loss if left untreated. Despite these unsettling statistics, 80 percent of preschoolers do not receive an eye screening. Parents play the most integral role in maintaining eye health and implementing safety measures every day of the year. Start your child's school year off right by giving them the most important school supply imaginable: their sight! Talk to your child's primary care doctor or ophthalmologist today about scheduling an eye exam and good luck in the 2025-2026 school year!

WHAT IS BRUXISM?
By Dr. Vincent Colonna, D.M.D.



Bruxism is a technical term for grinding and clenching that abrades teeth and may cause facial pain. People who grind and clench, called bruxers, unintentionally bite down too hard at inappropriate times, such as in their sleep. In addition to grinding teeth, bruxers also may bite their fingernails, pencils and chew the inside of their cheek. People usually aren't diagnosed with bruxism until it is too late because so many people don't realize they have the habit. Others mistakenly believe that their teeth must touch at all times. About one in four people suffer from bruxism, which can easily be treated by a dentist.

Can Bruxism cause harm?

People who have otherwise healthy teeth and gums can clench so often and so hard that over time their teeth become sensitive and they experience jaw pain and headaches. Forceful biting when not eating may cause the jaw to move out of proper balance.

What are the signs?

When a person has bruxism, the tips of the teeth look flat. Teeth are worn down so much that the enamel is rubbed off, exposing the inside of the tooth which is called dentin. When exposed, dentin may become sensitive. Bruxers may experience pain in their temporomandibular joint (TMJ) -the jaw- which may manifest itself by popping and clicking. Women, who are more susceptible to TMD, also have a higher prevalence of bruxism possibly because they are more likely to experience tissue alterations in the jaw resulting from clenching and grinding. Tongue indentations are another sign of clenching. Stress and certain personality types are at the root of bruxism. For as long as humankind has existed, bruxism has affected people with nervous tension. Anger, pain and frustration can trigger bruxing. People who are aggressive, competitive and hurried also may be at greater risk for bruxism.

What can be done about it?

During regular dental visits, the dentist automatically checks for physical signs of bruxism. If the dentist or patient notices signs of bruxism, the condition may be observed over several visits to be sure of the problem before recommending and starting therapy. The objective of therapy is to get the bruxer to change behavior by learning how to rest the tongue, teeth and lips properly. When some people become aware of their problem, simply advising them to rest their tongue upward with teeth apart and lips shut may be enough to change their behavior and relieve discomfort. However, the dentist can make a plastic mouth appliance, such as a night guard that's worn to absorb the force of biting which causes damage and pain and also helps to change patient behavior. Biofeedback is used to treat daytime clenchers by using electronic instruments to measure muscle activity and to teach patients how to reduce muscle activity when the biting force becomes too great. One researcher developed an experimental lip stimulator that electrically stimulates the lip when a person bites down too hard while sleeping. However, that method is being refined because the stimulation can wake sleepers several times in a night.

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