In order to decrease the risk of dental caries and periodontal disease, time should be spent in home oral care. According to ADA (American Dental Association), an individual who visits the dentist twice a year for an oral exam and dental prophylaxis will spend approximately two hours per year in a dental chair. The time for that same person to brush his teeth each day might be estimated to be around 30 hours per year. Keeping into consideration, the time that is spent daily for the maintenance of oral hygiene, it is imperative to understand the scientific evidence which supports home oral care recommendations which are given to the patients.

In 2017, the ADA Council on Scientific Affairs defined three aspects of home oral care which the dentists should discuss with their patients. They are as follows:

1. General recommendations (applicable for most people)
   - Toothbrushing twice a day with a fluoride toothpaste

Literature review provided sufficient evidence which supported the fact that twice-daily brushing was optimal for reducing risk of caries, gingival recession or periodontitis. Studies also concluded that fluoride containing toothpaste was effective in caries control and that high level of fluoride (available with prescription) resulted in more arrest of root carious lesions than over-the-counter levels of fluoride. It was also found that a brushing duration of 2 minutes was associated with more plaque reduction than brushing for a single minute.

- Cleaning between teeth daily

Various methods to clean between teeth are flossing, use of interdental brushes, oral irrigators and wood sticks.

- Eating a healthy diet with limited sugary beverages and snacks

In the various studies, an association was found between the intake of sugar and dental caries. Hence, in order to reduce dental caries, it is recommended to take a healthy diet with less sugary intake.
- Seeing the dentist regularly for prevention and treatment of oral disease
There is a benefit in adjusting a patient's recall visit according to his/her individual need based on risk assessment. Dental care not only involves actions to reduce risk of disease, but also the formulation and execution of an effective treatment plan.

2. Personalized recommendations (for patients at a risk for caries and/or gingivitis)
Patient who have an elevated risk of caries and/or gingivitis must be given additional steps to reduce their disease extension. The Council on Scientific Affairs recommends that dentists:
- Design a home care regimen with specific recommendations for oral hygiene.
- Offer direction concerning lifestyle changes (discussed in the next section).
- Provide guidance on dental products and mechanical devices.
The Council on Scientific Affairs also provides the following information on products and mechanical devices that can be considered as adjunct therapies for caries and/or gingivitis:
  a. Antimicrobials
  Studies suggested that mouthrinses containing antimicrobials and toothpastes containing triclosan or stannous fluoride caused decreased risk of supragingival plaque and gingivitis.

  b. Fluoride Mouthrinses
  Fluoride mouthrinses have greatly decreased the risk of caries in children and that of root caries in adults.

  c. Power Toothbrushes
  Patients who require care for daily activities and those who lack manual dexterity for tooth brushing have a convenient way of using power toothbrushes which provides effective removal of plaque and reduction in gingival inflammation.

  d. Interdental Cleaning Devices
  Studies indicated that people who used floss or cleaned between their teeth were less likely to have periodontitis.

3. Lifestyle considerations (to enhance oral health and wellness)
Lifestyle considerations include the following:
- Consumption of Fluoridated Water
  In 2016, the US Surgeon General expressed the view that community water fluoridation was an important factor in preventing disease and ensuring optimal health for all.

- Use of Tobacco Products
Cigarette smoking and the use of smokeless tobacco can produce adverse effects on gingival health, enamel discoloration and erosion and oral cancer. Hence the use of tobacco products is not recommended.

- Oral Piercings
The literature on the consequences of oral piercings show tooth fracture, tooth wear and gingival recession. The ADA has established a policy discouraging the use of oral piercings since 1998.

Following the above stated recommendations for home oral care will significantly reduce dental caries and gingival disease in individuals coming from all walks of life. Therefore it is strongly recommended that one must try to implement these home oral care regimes in order to live an oral disease free life.

Reference:
https://www.ada.org/en/member-center/oral-health-topics/home-care