

emergency like an excruciating toothache, which may then require a root canal,” says Ada Cooper, D.D.S., a New York City dentist and consumer advisor for the ADA. But don’t panic if you need one. The radiation level of dental X-rays is very low and a lead apron greatly minimizes exposure.

### What are those weird bumps on my gums?

About 5 percent of moms-to-be develop small red bumps between their teeth called pregnancy tumors. “They’re an overgrowth of gum tissue possibly caused by excess plaque aggravated by hormonal changes,” says Dr. From. While not cancerous, they can be painful and bleed. The bumps typically go away a month or so after childbirth, but your dentist can remove them if they’re unsightly or interfere with your ability to eat or speak.

### Why do some of my teeth feel loose?

“Gain a child, lose a tooth” is just an old wives’ tale. Still, teeth may feel a little wiggly if the supporting bone and ligaments loosen during pregnancy. “It can be an indication that you have a severe infection called periodontitis that destroys both gums and bone,” says Dr. Cooper. Treatment involves scaling the teeth to scrape tartar from above and below the gum line and smoothing root surfaces. Definitely see your dentist if your teeth feel loose.

### I’m throwing up a lot. Am I damaging my teeth?

They would have to be bathed in stomach acid almost daily for a couple of years for any significant damage to occur, says Dr. Cooper. Don’t rush to brush after vomiting. Instead, rinse with a teaspoon of baking soda dissolved in a cup of water (plain water is fine if you can’t stomach the baking soda), use a fluoride rinse, or chew sugar-free gum that contains xylitol. All are effective at neutralizing acid in the mouth. 😊



## birthmark basics

Spots, bumps, and splotches are more common than you might think. *by SASHA EMMONS*

When I was pregnant, I worried about everything—except birthmarks. Then my daughter, Chloe, was born with what looked like a deep bruise on her forehead, which was soon diagnosed as a type of birthmark called a hemangioma. She ended up having two surgeries at age 2 to remove the birthmark, and now she is a typical 9-year-old with a barely noticeable scar.

Birthmarks can range from tiny to large, and there are two main types: vascular birthmarks, which are caused by the development of abnormal blood vessels, and pigmented birthmarks, which are the result of too much pigment in the skin. Most birthmarks don’t lead to any health problems, and some fade or disappear completely over time, so pediatricians may advise against any treatment. But experts say it’s important for some birthmarks, such as those that show signs of early growth or change and those on the face or neck, to be checked by a specialist. In many cases, early intervention can minimize the need for additional treatment later on. This is what you need to know about the most common varieties.

### hemangiomas

Sometimes called a “strawberry mark” for their deep-red color, these vascular birthmarks are raised, benign tumors that affect 4 to 10 percent of children, more commonly girls and preemies. They grow rapidly in the first 12 months and then stop. A hemangioma then gradually reduces in size over the next three to ten years, often leaving slight discoloration or puckering of the skin. If a hemangioma involves tissue near the airway (one occurring on the chin, cheek, or neck, for example), affects a child’s eyesight, stretches the skin, or causes pain, you should have it evaluated by a birthmark specialist, such as a pediatric ENT or a dermatologist, explains Gregory Levitin, M.D., director of the Vascular Birthmark Center of New York. Treatment will probably be necessary to shrink or remove it. Parents may also choose to treat a child’s

prominent hemangioma (ideally before age 2 or 3), which may be with steroids, lasers, or surgery; after all, your blissfully ignorant baby will eventually be a kid who might not love looking different.

### port-wine stains

Found in about three out of 1,000 kids, these vascular birthmarks indeed look like a splash of vino, and they darken as a child grows. They may start out flat but can gradually thicken and may become bumpy, says Dr. Levitin. Port-wine stains do not disappear on their own but can be lightened with laser treatments—and the sooner, the better. Dr. Levitin recommends consulting a specialist within the first three months of life, since studies show that early laser therapy can limit the progression of a port-wine stain—and because this type of treatment isn’t as effective if started later in life.

### salmon patches

These flat, pink marks (whose medical name is nevus simplex) are a cluster of dilated capillaries close to the skin that affect 30 to 40 percent of newborns. When they appear at the nape of the neck, they are known as “stork bites,” and when they are around the eyes, they’re called “angel kisses.” Most nevus simplex are nothing to worry about and usually disappear by a baby’s second birthday, says Marilyn Liang, M.D., a pediatric dermatologist at Boston Children’s Hospital. If persistent, these can be treated with laser therapy. Stork bites may remain but will soon be covered with hair.

### café-au-lait spots

As you might guess, these marks, which come in an assortment of shapes, sizes, and shades, are the color of coffee with cream, and they occur in about 2 percent of babies. Usually seen at birth or in the first year of life, they don’t fade as your child grows but can be treated with lasers if you’re bothered by them. If your baby has five or more of these spots, it may be a sign of neurofibromatosis, a genetic disorder that causes tumors to grow on nerve tissue, says Dr. Liang, so she may require further testing.

### Mongolian spots

These blue bruise-like patches are seen at birth or shortly after in 20 percent of babies and are more common in darker-skinned children. They usually fade over the first five years of life, says Dr. Levitin. Mongolian spots are often found on a baby’s back and bottom and can be mistaken for abuse. If your child has Mongolian spots, be sure to point them out to your pediatrician and have her make a note of them in your child’s medical records. 😊