Happy Kids Pediatrics

Teething in Infants and Toddlers

Teething starts around 6 to 7 months of age with the top two central teeth first to appear followed by the central two bottom teeth. Teething continues until age 3 years when all 20 primary teeth have erupted. Approximately 80% of babies show some signs or symptoms during teething, the most common being:

- Gum irritation
- Irritability
- Drooling
- Increased biting
- Increased sucking
- Wakefulness
- Decreased appetite
- Gum-rubbing
- Mild temperature elevation that does not reach a fever (100.4 F or higher)

The teething period is an 8-day window period starting 4 days before eruption and ending 3 days after eruption.

When is it not teething:

When there is:

- Fever of 100.4 F or higher
- Vomiting
- Runny nose, cough and other symptoms of a viral cold
- Diaper rash
- Needing frequent and long-term medication, acetaminophen and ibuprofen (ibuprofen is not indicated for babies less than 6 months old).

Treatments:

First-line treatment options include chewing on hard or chilled teething rings, and gentle gum massages. If these are not sufficient then appropriate doses of acetaminophen can be used every 4 to 6 hours as needed.

What to avoid:

Benzocaine – containing gels, such as over-the-counter Orajel, carry a risk of a life-threatening condition called methemoglobinemia in which the oxygen-carrying capacity is severely reduced. The FDA has warned that the benzocaine products available over the counter should not be used in infants and children younger than 2 years of age. The American Academy of Pediatrics contraindicates the use of topical benzocaine for teething.

Lidocaine-based teething tablets – most notably Hyland's Teething tablets has been linked to serious adverse events. The FDA reports that these products contain inconsistent amounts of Atropa belladonna (deadly nightshade) which can cause fever, seizures and Apparent Life-Threatening Events (ALTE).

Amber Teething Necklaces are marketed with the claim that the succinic acid in the Baltic Amber contains anti-inflammatory and pain relief properties. There is no peer-reviewed evidence to support it. The risks include the following:

- Strangulation
- Aspiration and choking on the beads with bead breakage
- Bacterial colonization including Staphylococcus aureus

Mimickers of Teething:

'Teething-associated runny nose' is a coexisting upper respiratory viral illness with restless sleep, irritability, low-grade fever and fussiness.

Ear tugging, irritability, fussiness, and sleep disturbances can be teething or an ear infection. This requires visualization of the eardrum with an otoscope, especially if there is a runny nose and cough coexisting with the other symptoms mentioned.

Cow's milk protein intolerance/formula intolerance can present with irritability, fussiness, loose stools, and feeding difficulties.

GERD or reflux and teething can coexist and overlap. With both the feeding pattern changes and sleep disruption.

Urinary Tract Infection can cause fever, fussiness, irritability, and appetite changes.

When in doubt it is best to contact your pediatrician for further discussions and management. Teething can be hard to manage but it may not be just teething alone.

Kanwal Chaudry MD FAAP

Happy Kids Pediatrics

Need more support?

Scan to Book an Appointment