### Summary of clinical recommendations for the nonrestorative treatment of caries on primary teeth

<table>
<thead>
<tr>
<th>GRADE Certainty in the Evidence</th>
<th>GRADE Interpretation of Strength of Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>High</strong></td>
<td>We are very confident that the true effect lies close to that of the estimate of the effect.</td>
</tr>
<tr>
<td><strong>Moderate</strong></td>
<td>We are moderately confident in the estimate. The true effect is likely to be close to the estimate of the effect.</td>
</tr>
<tr>
<td><strong>Low</strong></td>
<td>Our confidence in the effect estimate is limited.</td>
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<tr>
<td><strong>Very Low</strong></td>
<td>We have very little confidence in the effect estimate.</td>
</tr>
</tbody>
</table>

#### Expert Panel Recommendation

<table>
<thead>
<tr>
<th>Before SDF Application</th>
<th>After SDF Application</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1.png" alt="Before SDF Application" /></td>
<td><img src="image2.png" alt="After SDF Application" /></td>
</tr>
</tbody>
</table>

**To arrest advanced cavitated carious lesions on any coronal surface of primary teeth**, the expert panel recommends clinicians* prioritize the use of **38% silver diamine fluoride (SDF) solution** (biannual application) over **5% sodium fluoride varnish** (application once per week for 3 weeks).*

<table>
<thead>
<tr>
<th>Expert Panel Recommendation</th>
<th>Certainty in the Evidence</th>
<th>Strength of Recommendation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>To arrest or reverse noncavitated carious lesions on occlusal surfaces of primary teeth</strong>, the expert panel recommends clinicians* prioritize the use of <strong>sealants + 5% sodium fluoride varnish</strong> (application every 3–6 months) or <strong>sealants alone</strong> over <strong>5% sodium fluoride varnish</strong> (application every 3–6 months). 1.23% acidulated phosphate fluoride gel (application every 3–6 months), resin infiltration + 5% sodium fluoride varnish (application every 3–6 months), or 0.2% sodium fluoride mouthrinse (once per week).*</td>
<td></td>
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<tr>
<td><strong>To arrest or reverse noncavitated carious lesions on facial or lingual surfaces of primary teeth</strong>, the expert panel suggests clinicians* use <strong>1.23% acidulated phosphate fluoride gel</strong> (application every 3–6 months) or <strong>5% sodium fluoride varnish</strong> (application every 3–6 months).*</td>
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<tr>
<td><strong>To arrest or reverse noncavitated carious lesions on approximal surfaces of primary teeth</strong>, the expert panel suggests clinicians* use <strong>5% sodium fluoride varnish</strong> (application every 3–6 months), <strong>resin infiltration</strong> alone, <strong>resin infiltration + 5% sodium fluoride varnish</strong> (application every 3–6 months) or <strong>sealants alone</strong>.*</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>To arrest or reverse noncavitated carious lesions on coronal surfaces of primary teeth</strong>, the expert panel suggests clinicians* do not use <strong>10% casein phosphopeptide-amorphous calcium phosphate paste</strong> if other fluoride interventions, sealants, or resin infiltration is accessible.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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*SDF = silver diamine fluoride

* Clinicians" refers to the target audience for this guideline, but only those authorized/trained to perform the specified interventions should do so.

† In keeping with the concept of informed consent, all nonrestorative and restorative treatment options and their potential side effects (such as blackened tooth surfaces treated with silver diamine fluoride) should be offered and explained to all patients.

‡ The order of treatments included in this recommendation represents a ranking of priority defined by the panel when accounting for treatment effectiveness, feasibility, patients' values and preferences, and resource utilization. Considerations such as a particular patient’s values and preferences, special needs, or insurance status should inform clinical decision making.

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Clinical Pathway for the Nonrestorative Treatment of Carious Lesions on Primary Teeth

**Primary Teeth**

- **Coronal Surface**
  - **Occlusal**
    - **Noncavitated***
      - Sealants + 5% NaF Varnish‡, or
      - Sealants Alone
    - **Cavitated†**
      - 1.23% APF Gel‡, §, or
      - 5% NaF Varnish‡

  **Facial or Lingual**
    - **Noncavitated***
      - 5% NaF Varnish‡, §
      - Resin Infiltration + 5% NaF Varnish‡, or
      - 0.2% NaF Mouthrinse¶
    - **Cavitated†**
      - 38% SDF Solution#, ***, or

  **Approximal**
    - **Noncavitated***
      - 5% NaF Varnish‡, §, or
      - Resin Infiltration Alone, or
      - Resin Infiltration + 5% NaF Varnish‡, or
      - Sealants Alone
    - **Cavitated†**

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* Defined as International Caries Detection and Assessment System (ICDAS) 1 and 2 lesions.
† Defined as ICDAS 5 and 6 lesions.
‡ Application every 3-6 months.
§ The order of treatments included in this recommendation represents a ranking of priority defined by the panel when accounting for treatment effectiveness, feasibility, patients’ values and preferences, and resource utilization. Considerations such as a particular patient’s values and preferences, special needs, or insurance status should inform clinical decision making.
¶ At-home use once per week.
# Biannual application.
** In keeping with the concept of informed consent, all nonrestorative and restorative treatment options and their potential side effects (such as blackened tooth surfaces treated with SDF) should be offered and explained to all patients.
*** Lesion(s) should be monitored (e.g., hardness/texture, color, radiographs) periodically throughout the course of treatment.

NaF = sodium fluoride
APF = acidulated phosphate fluoride
SDF = silver diamine fluoride