



## Comparative Effects of Natural and Added Sugars on Children's Dental Health

Huda Mohammed Al daghriri, Khadija Ghareeb Mathami, Manar Ibrahim Alhawsawi, Ohood Khaled Asiri, Suaad Hussain Almeahmadi, Ahmed Ali Tamah

Affiliate to King Fahad Armed Forces Hospital, Jeddah, Jazan Armed Forces Hospital

### Abstract

Dental caries remains one of the most common chronic diseases affecting children worldwide, despite improvements in oral healthcare and preventive dentistry. Dietary sugar consumption is a major contributor to tooth decay. However, not all sugars are consumed in the same way or under the same conditions. Natural sugars, found in foods like fruits and milk, differ from added sugars that are mixed into foods and drinks during processing or preparation. This difference has sparked interest among researchers, healthcare providers, and policymakers looking to enhance children's oral health. This paper examines the effects of natural and added sugars on children's dental health by reviewing current scientific evidence related to their role in the development of dental caries. The paper discusses the biological processes that link sugars to tooth decay, evaluates dietary patterns and food matrices, and looks at factors that affect the relationship between sugar consumption and oral health. Evidence shows that while both natural and added sugars can lead to dental caries, added sugars pose a greater risk due to their concentration, frequency of consumption, and common presence in processed foods and sugar-sweetened beverages. Natural sugars found in whole foods generally carry less risk due to the protective effects of fiber, water, and essential nutrients. The findings underline the need to cut back on added sugar while promoting healthy dietary habits that benefit both oral and overall health in children.

Received: 04/03/2026

Revised: 25/04/2025

Accepted: 06/05/2025

### Introduction

Children's dental health is vital for their overall health and development. Healthy teeth are important for good nutrition, speech development, social interaction, and self-esteem. Unfortunately, dental caries, or tooth decay, is still one of the most widespread chronic childhood diseases. Despite advancements in dental care and increased awareness of good oral hygiene, millions of children continue to face preventable dental issues associated with poor diets.

Sugar consumption is consistently identified as one of the most significant factors affecting dental health. Oral health experts have long established the link between dietary sugars and the formation of cavities. However, growing public interest in nutrition has raised questions about whether all sugars impact dental health in the same way. Especially, the distinction between natural and added sugars has become increasingly relevant as parents look for healthier options for their children.

Natural sugars are present in foods like fruits, vegetables, and dairy products. These foods provide vital nutrients and are generally considered part of a healthy diet. In contrast, added sugars are introduced during processing and are commonly found in processed foods, snacks, desserts, and drinks. Although both sugar types can be broken down by oral bacteria, their effects on dental health can differ greatly due to variations in food composition, consumption habits, and nutritional context.

This paper aims to compare the effects of natural and added sugars on children's dental health by examining scientific evidence concerning their role in the development of dental caries. Understanding these

differences is crucial for creating effective dietary guidelines, public health policies, and preventive strategies that can relieve the burden of childhood dental diseases.

### **Understanding Sugars and Their Sources**

Sugars are simple carbohydrates that supply energy for the body. They are naturally present in many foods and can also be added during food production. The primary sugars in foods include glucose, fructose, sucrose, and lactose. While these sugars share similar chemical properties, the way they are consumed can strongly affect their health impact.

Natural sugars are intrinsic to whole foods. Fructose is naturally found in fruits, and lactose exists in milk and dairy products. Foods with natural sugars are often high in vitamins, minerals, antioxidants, fiber, and water. These added components enhance the food's overall nutritional value and may affect how sugars interact with the body and oral environment.

Added sugars refer to any sugars added during food preparation or production. Examples include table sugar, high-fructose corn syrup, honey added to processed foods, and various syrups used in commercial products. Common sources of added sugars are soft drinks, candies, cakes, cookies, breakfast cereals, flavored yogurts, and many packaged snacks aimed at children.

Though the chemical makeup of natural and added sugars may be alike, the foods in which they are found differ greatly. Whole fruits, for instance, have natural sugars within a complex structure that includes fiber and water. In contrast, sugar-sweetened beverages provide high concentrations of free sugars with minimal nutrition. These differences are key in understanding how sugars affect dental health.

### **Mechanisms of Dental Caries Development**

Dental caries is a complex disease that arises from interactions among oral bacteria, dietary carbohydrates, tooth surfaces, and time. To grasp how sugars contribute to tooth decay, we must examine the biological processes in the mouth. The human mouth hosts many bacterial species that create biofilms on tooth surfaces. Among these, *Streptococcus mutans* and *Lactobacillus* species are especially linked to dental caries. When sugars are consumed, these bacteria metabolize fermentable carbohydrates, producing acids as byproducts.

These acids lower the pH in dental plaque. When the pH dips below a critical threshold, demineralization of tooth enamel starts. During this process, minerals like calcium and phosphate are lost from the tooth structure. Repeated acid exposure can weaken enamel over time and lead to cavities.

Normally, saliva helps counteract these effects by neutralizing acids and supplying minerals for remineralization. However, frequent sugar consumption can overwhelm these protective measures. The balance between demineralization and remineralization tips toward mineral loss, raising the likelihood of dental caries.

The frequency of sugar exposure often matters more than the total amount consumed. Frequent snacking or sipping sugary drinks throughout the day results in repeated acid attacks that hinder the mouth's return to a neutral pH. This extended exposure significantly raises the risk of tooth decay.

### **Effects of Natural Sugars on Children's Dental Health**

Natural sugars in whole foods usually have a less damaging effect on children's dental health compared to added sugars. One reason for this lies in the food matrix surrounding naturally occurring sugars. Whole fruits, for example, contain fiber that slows down the release of sugars and limits the time sugars are in contact with teeth.

The high-water content in fruits also aids oral health by diluting sugars and boosting saliva production. Increased saliva flow enhances the mouth's natural defenses by neutralizing acids and washing away food particles. Moreover, fruits provide vitamins, antioxidants, and phytochemicals that support overall health and may indirectly promote oral health.

Milk and dairy products are another example of foods with natural sugars that have relatively low potential for causing caries. Lactose, the main sugar in milk, is considered less cariogenic than sucrose. Additionally, dairy contains calcium, phosphorus, and casein proteins that help safeguard tooth enamel and promote remineralization. Studies indicate that cheese and other dairy products can raise oral pH and lower the risk of enamel demineralization.

However, natural sugars aren't completely harmless. Some forms of naturally sweet foods can increase caries risk under specific conditions. Fruit juices, for example, often have high levels of free sugars but lack the protective fiber found in whole fruits. Drinking juice frequently can expose teeth to sugars and acids for long periods. Similarly, dried fruits can stick to tooth surfaces and provide a long-lasting source of fermentable carbohydrates for oral bacteria.

Research generally supports the idea that eating whole fruits is linked to lower rates of dental caries than consuming foods high in added sugars. This indicates that the nutritional context of natural sugars plays a crucial role in lessening their harmful effects.

### **Effects of Added Sugars on Children's Dental Health**

Added sugars are widely seen as a major cause of childhood dental caries. Unlike natural sugars found in whole foods, added sugars are often consumed in concentrated forms and are frequently present in products with little nutritional value.

Sugar-sweetened beverages are one of the largest sources of added sugars in children's diets. Soft drinks, fruit-flavored drinks, sports drinks, and sweetened teas contain high amounts of sugar and are often consumed repeatedly throughout the day. This frequent exposure leads to ongoing acid production by oral bacteria and raises the risk of enamel erosion and cavity formation. Candies and confectionery items are also heavily linked to dental caries. Sticky sweets like caramel, gummies, and toffee cling to tooth surfaces and remain in the mouth for extended periods. This prolonged presence provides oral bacteria with a constant supply of fermentable sugars, enhancing acid production and increasing cariogenic potential.

Many processed foods aimed at children contain hidden added sugars. Breakfast cereals, granola bars, flavored yogurts, and snacks often have significant sugar amounts despite being seen as healthy options. The thing about sugars that are added to food is that they can cause a lot of problems for our teeth. This is not just because of how much sugars in the food but also because of how often we eat these foods. When we eat foods between meals it can cause our teeth to be attacked by acid many times a day. This can make it more likely that our teeth will start to decay and get cavities.

### **Comparative Analysis of Added Sugars**

Natural sugars and added sugars are both used by the bacteria in our mouths to make acid. However, they affect our teeth in ways. The main difference is in the types of food that these sugars are found in and how we eat them. When we eat sugars like those found in fruits and vegetables, they are usually accompanied by other things that are good for us like fiber and water. These things can help reduce the amount of sugar that stays in our mouths. Can even help make our mouths produce more saliva. Saliva is good for our teeth because it helps keep them clean. For example, eating fruits is good for us and does not hurt our teeth as much as eating sugary snacks.

On the hand added sugars are often found in foods that are not good for us and are designed to taste very good. This means that we often eat them a lot, which can hurt our teeth. Added sugars are found in sugary snacks and drinks which are easy to find and eat. This makes it more likely that we will get cavities. There is also something called sugars, which includes added sugars and natural sugars found in things like honey and fruit juice. These sugars are easy for the bacteria in our mouths to use, which makes them more likely to cause cavities.

Now it seems like one of the best ways to prevent cavities in children is to reduce the number of added sugars they eat. While it is still important to not eat much of any kind of sugar, we should especially try to limit the amount of added and free sugars we eat.

## Prevention and Public Health Implications

To prevent cavities, we need to do a thing. First, we need to eat foods and take good care of our teeth. Parents, schools, doctors and governments all play a role in helping children eat foods and take care of their teeth. One way to do this is to replace snacks and drinks with healthier options like water, milk and fruits and vegetables. Parents should also read the labels on the foods they buy to make sure they are not giving their children much added sugar. Brushing our teeth with toothpaste that has fluoride is also very important. Fluoride helps make our teeth strong and prevents them from decaying. Going to the dentist regularly is also important because they can help find any problems with our teeth and teach us how to take good care of them.

Schools can help by not selling drinks and encouraging children to eat healthy foods. They can also teach children about the importance of eating foods and taking care of their teeth. Governments can also help by making laws that limit the amount of sugar in foods and drinks and by making sure that food labels are clear and easy to understand. They can also limit the advertising of foods to children.

## Conclusion

Cavities are a problem for children all around the world and eating too much sugar is a major cause of this problem. While natural sugars like those found in fruits and vegetables can also cause cavities added sugars are a bigger problem. This is because they are often found in foods that're not good for us and are designed to be eaten frequently.

Natural sugars, like those found in fruits and vegetables are generally not as bad for us because they are found in foods that also have other things that are good, for us like fiber and water. These things can help keep our teeth clean and healthy. So, when we are trying to prevent cavities, it is especially important to limit the number of added sugars we eat. We should also try to eat a diet with lots of whole foods and take good care of our teeth by brushing them regularly and going to the dentist. By doing these things we can help keep our teeth healthy and strong.

## References

1. American Academy of Pediatric Dentistry. (2023). *Policy on dietary recommendations for infants, children, and adolescents*.
2. Moynihan, P., & Kelly, S. A. M. (2014). Effect on caries of restricting sugars intake: Systematic review to inform WHO guidelines. *Journal of Dental Research*, 93(1), 8–18.
3. Sheiham, A., & James, W. P. T. (2015). Diet and dental caries: The pivotal role of free sugars reemphasized. *Journal of Dental Research*, 94(10), 1341–1347.
4. Touger-Decker, R., & van Loveren, C. (2003). Sugars and dental caries. *The American Journal of Clinical Nutrition*, 78(4), 881S–892S.
5. World Health Organization. (2015). *Guideline: Sugars intake for adults and children*. World Health Organization.
6. Burt, B. A., & Pai, S. (2001). Sugar consumption and caries risk: A systematic review. *Journal of Dental Education*, 65(10), 1017–1023.
7. Marshall, T. A. (2013). Preventing dental caries associated with sugar-sweetened beverages. *Journal of the American Dental Association*, 144(10), 1148–1152.
8. Moynihan, P. J. (2016). Sugars and dental caries: Evidence for setting a recommended threshold for intake. *Advances in Nutrition*, 7(1), 149–156.
9. Aune, D., Giovannucci, E., Boffetta, P., et al. (2017). Fruit and vegetable intake and the risk of cardiovascular disease, total cancer and all-cause mortality: A systematic review and dose-response meta-analysis. *International Journal of Epidemiology*, 46(3), 1029–1056.
10. Peres, M. A., Macpherson, L. M. D., Weyant, R. J., et al. (2019). Oral diseases: A global public health challenge. *The Lancet*, 394(10194), 249–260.

11. Armfield, J. M., Spencer, A. J., Roberts-Thomson, K. F., & Plastow, K. (2013). Water fluoridation and the association of sugar-sweetened beverage consumption and dental caries in Australian children. *American Journal of Public Health, 103*(3), 494–500.
12. Bagramian, R. A., Garcia-Godoy, F., & Volpe, A. R. (2009). The global increase in dental caries. A pending public health crisis. *American Journal of Dentistry, 22*(1), 3–8.
13. Featherstone, J. D. B. (2008). Dental caries: A dynamic disease process. *Australian Dental Journal, 53*(3), 286–291.
14. Gibson, S. (2001). Sugar-sweetened soft drinks and obesity: A systematic review of the evidence from observational studies and interventions. *Nutrition Research Reviews, 21*(2), 134–147.
15. Hujoel, P. P., Lingström, P., & Bakdash, B. (2018). Dental caries and diet. In *Monographs in Oral Science* (Vol. 28, pp. 1–14). Karger.
16. Kassebaum, N. J., Smith, A. G. C., Bernabé, E., et al. (2017). Global, regional, and national prevalence, incidence, and disability-adjusted life years for oral conditions. *Journal of Dental Research, 96*(4), 380–387.
17. Levine, R. S. (2012). Childhood caries and nutritional status. *Community Dental Health, 29*(4), 293–295.
18. Lussi, A., Hellwig, E., Ganss, C., & Jaeggi, T. (2009). Dental erosion and dietary factors. *Caries Research, 43*(Suppl. 1), 77–87.
19. Marthaler, T. M. (2004). Changes in dental caries 1953–2003. *Caries Research, 38*(3), 173–181.
20. Moynihan, P. (2005). The role of diet and nutrition in the etiology and prevention of oral diseases. *Bulletin of the World Health Organization, 83*(9), 694–699.
21. Palmer, C. A. (2005). Diet and nutrition in oral health. Upper Saddle River, NJ: Pearson Education.
22. Petersen, P. E. (2003). The World Oral Health Report 2003: Continuous improvement of oral health in the 21st century. *Community Dentistry and Oral Epidemiology, 31*(Suppl. 1), 3–24.
23. Pitts, N. B., Zero, D. T., Marsh, P. D., et al. (2017). Dental caries. *Nature Reviews Disease Primers, 3*(1), 17030.
24. Rugg-Gunn, A. J. (2013). Nutrition, diet and oral health. Oxford University Press.
25. Santos, A. P. P., Soviero, V. M., & Bastos, R. S. (2002). Dental caries and sugar consumption in children. *Journal of Clinical Pediatric Dentistry, 26*(4), 379–384.
26. Sheiham, A. (2001). Dietary effects on dental diseases. *Public Health Nutrition, 4*(2B), 569–591.
27. Slade, G. D., Sanders, A. E., Billings, R. J., et al. (2018). Early childhood oral health and disease prevention. *Pediatric Clinics of North America, 65*(5), 909–924.
28. van Loveren, C. (2019). Sugar restriction for caries prevention: Amount and frequency. Which is more important? *Caries Research, 53*(2), 168–175.
29. Watt, R. G., Daly, B., Allison, P., et al. (2019). Ending the neglect of global oral health: Time for radical action. *The Lancet, 394*(10194), 261–272.
30. World Health Organization. (2022). *Global oral health status report: Towards universal health coverage for oral health by 2030*. Geneva: World Health Organization.