

Scientific Strategies for Dental Health: A Comprehensive Report on Brushing Timing, Fluoride's Protective Film, and the Connection to Systemic Health

Executive Summary

This report provides an in-depth analysis of the long-standing debate over the optimal timing for brushing and presents a comprehensive solution that connects this practice to the biochemical and microbiological principles of oral and systemic health. By clarifying the benefits of both pre-meal and post-meal brushing, this document shows that they are not a matter of simple choice but are, in fact, complementary actions. It also provides specific scientific evidence on the serious impact that oral bacteria, which multiply overnight, have on systemic diseases as they enter the bloodstream. The report explains why brushing immediately after consuming acidic foods is harmful to teeth, using the Stephan Curve theory, and recommends the optimal brushing time. Furthermore, it clarifies the mechanism and duration of the protective film formed by fluoride toothpaste, and suggests personalized oral care strategies for individuals with specific conditions like cavities, gum disease, or orthodontic appliances. Finally, it moves beyond outdated concepts like the '3-3-3 brushing method' to introduce a new paradigm in modern dentistry, offering an integrated strategy to achieve both fresh breath and cavity prevention simultaneously.

Part 1: The Dual Strategy of Morning Oral Care: A Complementary Approach

The debate over the best time to brush in the morning is not just a matter of choosing between before or after a meal; it hinges on prioritizing two core goals of oral hygiene: **proactive defense** and **reactive removal**. These two approaches are not independent but

should be understood as strategic, complementary steps for the best possible outcome.

1.1 Proactive Defense: The Key Benefits of Brushing Before a Meal

Brushing before breakfast is an act of proactively cleansing and protecting the oral environment for the day. This is a crucial step when considering the specific characteristics of oral activity during sleep. Saliva production significantly decreases during sleep¹, weakening its natural cleansing and antibacterial functions. This allows plaque and sticky bacterial films—the primary causes of cavities—to multiply the most⁶, with millions of anaerobic bacteria that cause bad breath also proliferating.⁵

Brushing before a meal is the most effective way to eliminate these overnight bacteria.⁶ Beyond simply getting rid of bad breath¹, this practice helps to control the oral bacterial population before new food enters the mouth, thereby reducing the risk of cavities.⁸ Furthermore, using a fluoride toothpaste forms a protective layer on the tooth surface with minerals like fluoride, hydroxyapatite, and calcium phosphate¹, which shields the teeth from acidic and sugary foods consumed during breakfast.¹

1.2 Reactive Removal: The Essential Role of Brushing After a Meal

Despite the importance of pre-meal brushing, post-meal brushing remains a fundamental principle of oral care.⁵ After eating, food particles get lodged between teeth, becoming a food source for oral bacteria and leading to a rapid production of acid.⁸ This acid erodes the tooth surface and causes cavities⁸, so it is essential to promptly remove food debris and bacteria by brushing after eating. This process is critical for neutralizing oral acidity¹² and preventing tooth erosion.

1.3 The Optimal Morning Oral Care System: An Integrated Approach Beyond Dichotomy

While some dental professionals seem to offer conflicting advice on morning brushing³, these are not contradictory recommendations but rather highlight different aspects of oral care.

Those who advocate for pre-meal brushing focus on its preventive function of removing overnight bacteria and bad breath, while those who uphold the principle of post-meal brushing emphasize the importance of managing the food debris and acidic environment created by a meal.⁸

In this context, the most ideal and comprehensive oral care strategy is to perform both actions.⁸ In other words, the most effective approach is a dual-brushing strategy: lightly brushing immediately upon waking to remove bacteria and form a fluoride protective layer, and then thoroughly brushing again after breakfast to clean out food debris and neutralize any newly created acid.⁴

Part 2: The Biochemical and Systemic Interplay of Oral Health

Oral care is more than just preventing cavities and bad breath. The microbial environment of the mouth is closely linked to systemic health, and the biochemical effects of certain dietary habits on teeth provide the scientific basis for brushing timing.

2.1 From Mouth to Body: The Pathway of Oral Bacteria and Their Systemic Impact

It is often thought that oral bacteria multiplying overnight have no direct impact when swallowed into the esophagus and stomach.¹⁵ However, the medically more serious threat occurs through another route. Oral bacteria can directly invade the body through blood vessels exposed by inflamed gums, traveling throughout the body and causing various diseases.²

These bacteria are reported to cause inflammation in the vascular walls, reducing their elasticity and increasing the risk of atherosclerosis, myocardial infarction, and stroke.² Research showing that oral bacteria were found in the brains of stroke patients and on the inner walls of the heart's coronary arteries supports this correlation.² Furthermore, oral bacteria have a bidirectional relationship with diabetes, worsening the condition. Diabetics are more susceptible to gum disease because their saliva has a higher glucose concentration, which causes bacteria to multiply faster. Conversely, gum disease interferes with insulin function, making blood sugar control difficult.² Considering this link between oral and systemic health, oral care should be seen not just as a hygienic habit but as an essential part

of overall health management.

2.2 The Stephan Curve: The Principle of Tooth Protection in an Acidic Environment

Brushing immediately after eating acidic foods is harmful to teeth, and this can be explained by the **Stephan Curve**, a cornerstone of dental science.¹⁸ The Stephan Curve is a graph that shows the pH changes in the mouth after eating. Following the consumption of sugary foods, the pH of the dental plaque drops sharply²⁰, falling below the critical pH of 5.5, at which point cavities begin to form.¹⁹

At this time, the tooth's enamel temporarily softens.¹³ Brushing with the abrasive agents in toothpaste while the enamel is in this weakened state can cause excessive wear or damage.²⁴ It takes about 30 minutes to an hour for saliva's natural buffering action to restore the oral pH to a normal level.⁶ Therefore, after consuming acidic foods, it is best to wait at least 30 minutes for saliva to neutralize the pH before brushing to ensure optimal dental health.⁶

2.3 The Fluoride Toothpaste Protective Film: Mechanism and Duration

Fluoride plays a crucial role in strengthening the outermost layer of the tooth, the enamel, thereby increasing its resistance to acidic substances.¹ When using fluoride toothpaste, fluoride ions adhere to the tooth surface, forming a thin protective layer that promotes the remineralization of teeth, helping to reverse early-stage cavities.²⁸

However, the question of the duration of the protective film formed by fluoride toothpaste requires a distinction between professionally applied fluoride and daily toothpaste use. The high-concentration fluoride varnish applied by a dentist provides a long-lasting protective effect, lasting several months (3 to 6 months).²⁹ Some studies show that the greatest amount of fluoride is released in the first week after application, but the effect continues for a long period.³³ In contrast, the protective film from daily fluoride toothpaste is easily affected by external factors like eating and drinking, and its duration is limited.¹³ Therefore, the protective effect of fluoride toothpaste must be consistently maintained through regular brushing.

There is also a difference of opinion on how many times to rinse with water after brushing. Some believe rinsing less will leave more fluoride on the teeth for a longer time⁷, while others argue that it's more important to thoroughly rinse away chemical ingredients like surfactants

to prevent dry mouth.³⁴ In conclusion, since a dry mouth can create an environment where bacteria thrive, leading to bad breath or cavities, rinsing thoroughly is considered to have greater overall benefits for oral health.³⁴

Part 3: Personalized Oral Care: Strategies Based on Individual Condition

General brushing habits must be adjusted in importance and method according to an individual's oral condition. Special care is required for specific conditions such as cavities, gum disease, or wearing orthodontic appliances.

3.1 Optimal Brushing Timing and Management After Consuming Acidic Foods

Since acidic foods temporarily soften tooth enamel, brushing immediately after consumption should be avoided. The optimal brushing time is between 30 minutes and an hour after eating, allowing sufficient time for saliva's buffering action to restore the mouth's pH to normal.⁶

The table below summarizes key acidic foods and optimal management timings.

Table 1. Key Acidic Foods and Optimal Oral Care Strategies

Food/Beverage Type	Acidity and Characteristics	Recommended Brushing Time	Auxiliary Management Methods	
Carbonated drinks, juices, wine, beer ²⁵	Contains both sugar and strong acids, causing bacterial growth and enamel softening.	At least 30 minutes to 1 hour after consumption. ¹⁰	Use a straw to minimize contact with teeth. ²⁵	Rinse your mouth with water to neutralize acidity. ²⁵

Naengmyeon (cold noodles), foods with vinegar ²⁶	The strong acidity of vinegar rapidly promotes tooth erosion.	At least 30 minutes after consumption. ²⁶	Rinse your mouth with water to remove food particles and acidic components. ²⁶
High-acid fruits like lemons and tangerines ²⁴	Fruit acids weaken tooth enamel.	At least 30 minutes after consumption. ²⁴	Rinse your mouth with water and chew sugar-free xylitol gum to stimulate saliva production. ²¹

3.2 Importance of Brushing Based on Individual Oral Condition

Oral care should be tailored to an individual's health status and habits.¹ Brushing's importance and method are especially heightened for those with specific dental diseases or dental prosthetics.

Table 2. Recommended Oral Care for Specific Oral Conditions

Oral Condition	Key Management Goals and Risks	Recommended Brushing Strategy and Method	
High risk for cavities or gum disease ¹	Removal of plaque and bacteria that cause cavities and gum disease. Prevention of	Brushing twice a day may not be enough. Brushing is recommended after consuming	Thoroughly brush the boundary between teeth and gums 17, and use

	gum inflammation.	sticky, sugary, or acidic foods. ¹	interdental brushes or floss as a necessity. ¹⁷	
Wearing orthodontic appliances ¹	Increased risk of cavities and gum disease due to food particles trapped around the braces.	Thorough brushing at least four times a day: after each meal and before bed. ³⁸	Brushing time should be 2 to 3 times longer than usual, recommended for 5 to 7 minutes or more. ³⁸	Use special orthodontic brushes and interdental brushes to keep the appliance clean. ³⁹
Sensitive teeth or thin enamel ¹	Possible worsening of symptoms due to frequent or aggressive brushing.	Consult a dentist about post-meal brushing. ¹	Use correct brushing techniques like the modified bass method 5 and choose a soft-bristled toothbrush. ⁴²	Consider using toothpaste with low abrasives or fluoride to alleviate symptoms. ⁴³

3.3 Alternative Oral Care Methods When Brushing is Not Possible

When a full brushing is not possible, it is important to manage oral hygiene with alternatives. However, it is crucial to remember that these methods cannot fully replace brushing and are only temporary solutions.

Table 3. Effects and Limitations of Post-Meal Alternative Oral Care Methods

Alternative Method	Effects and Principles	Limitations and Precautions
Rinsing with	Physically	Cannot remove

water ¹²	removes food particles and helps neutralize oral acidity. ¹²	bacterial plaque or calculus (tartar). ⁴⁴		
Sugar-free xylitol gum ¹¹	Increases saliva secretion, enhancing its natural cleansing and antibacterial functions ⁴⁶ , and neutralizes oral acidity. ²¹ Helps reduce the number of harmful bacteria. ⁴⁶	Cannot perfectly replace brushing ¹¹ ; brushing is ultimately necessary.		
Mouthwash ⁴⁷	Helps reduce oral bacteria to eliminate bad breath. ⁴⁷	Cannot physically remove plaque. ⁴⁴	The alcohol content can dry out the mouth, creating a better environment for bacteria to multiply. ⁴⁷	Should be used at least 30 minutes after brushing to avoid tooth discoloration from interacting with toothpaste ingredients. ⁴⁸

Part 4: Re-evaluating Conventional Wisdom: Moving Beyond the '3-3-3' Brushing Method

The '3-3-3 brushing method'—brushing within 3 minutes of a meal, for 3 minutes, 3 times a day—has long been considered the standard for brushing. However, it is no longer considered

a valid, absolute rule. By comparing the background of this rule with new approaches in modern dentistry, we can see that the paradigm of oral care is shifting from fixed rules to flexible, scientific principles.

4.1 The Background of the '3-3-3 Brushing Method' and Modern Criticism

The '3-3-3 brushing method' was a slogan created by a Japanese toothpaste company in the 1970s to encourage brushing habits among the public. It was more of a memorable campaign than an absolute rule based on medical evidence.³⁵

Today, this rule is criticized from several perspectives. The biggest problem is that it does not consider the type of food consumed.⁴ Brushing 'within 3 minutes' after eating acidic foods, in particular, increases the risk of abrading softened tooth enamel.²³ Furthermore, the rule fails to accurately reflect the changes in oral pH shown by the Stephan Curve. Since the pH drops below the critical level much faster than 3 minutes after eating¹⁸, the mouth can be unnecessarily exposed to a high-risk environment for a longer period. Lastly, it does not adequately account for modern lifestyles where people snack more frequently between meals.⁵¹

4.2 The Emergence of New Brushing Habits: '0-1-2-3'

To overcome these limitations, the Korean Dental Association has proposed the '**0-1-2-3 brushing method**' as a new paradigm.¹⁸ This method's core principle is to brush 'without irritating the gums (0), within 1 minute of a meal (1), for more than 2 minutes (2), and more than 3 times a day (3)'. This rule is not just about timing but reflects the following scientific principles:

- **Immediacy:** Considering the rapid drop in oral pH after food consumption as shown by the Stephan Curve, it recommends starting to brush as soon as possible (within 1 minute) after eating, except for acidic foods.¹⁸
- **Physical Removal:** The 'more than 2 minutes' rule is set as the minimum time needed to thoroughly brush all tooth surfaces, the gum line, and the tongue to physically remove plaque.¹
- **Flexibility:** Recommending brushing more than three times a day accounts for modern lifestyles with frequent snacking.³⁵

This new brushing method suggests forming a flexible and proactive oral care habit based on

scientific evidence, rather than following a rigid formula.¹⁸

4.3 Eliminating Bad Breath and Preventing Cavities: Hitting Two Birds with One Stone

The dilemma of whether to prioritize bad breath removal or cavity prevention when deciding on the order of morning brushing is an unnecessary dichotomy. The two goals essentially stem from the same cause: oral bacteria and their byproducts.⁷

The main cause of bad breath is volatile sulfur compounds produced by anaerobic bacteria that multiply overnight⁵, while cavities are caused by the acid produced by bacteria breaking down food particles.²² Therefore, brushing immediately upon waking to remove overnight bacteria is an act that effectively eliminates bad breath while proactively controlling the main cause of cavities.¹

In conclusion, the optimal way to achieve both goals simultaneously is to implement an integrated oral care strategy as follows:

- **Immediately Upon Waking:** Brush immediately to remove overnight bacteria and bad breath. It is important to thoroughly brush the back of the tongue to remove bacteria residing there.⁷
- **After Meals:** Brush again after eating to remove food particles and neutralize the newly created acid to prevent cavities.⁶
- **Use Auxiliary Tools:** Use dental floss or interdental brushes daily to remove plaque from between teeth, which is difficult to reach with a toothbrush alone.¹

Conclusion: An Integrated and Personalized Oral Hygiene Strategy

The analysis in this report fundamentally redefines our perception of oral hygiene. Moving away from the rigid, uniform rules of the past, modern dentistry presents a flexible and integrated approach tailored to an individual's oral condition and lifestyle.

Optimal oral care is not just about brushing for 3 minutes after a meal; it encompasses a multi-layered strategy that includes:

1. **Strategic Timing:** A dual-care strategy of brushing both upon waking and after meals maximizes oral health by removing both overnight bacteria and post-meal food debris.⁴

2. **Application of Scientific Principles:** Understand the biochemical principle that tooth enamel weakens after consuming acidic foods and wait at least 30 minutes before brushing to prevent tooth abrasion.²⁴
3. **Personalized Care:** Apply a customized brushing frequency and method based on your oral condition—such as cavities, gum disease, or orthodontic appliances—and complement this with professional care through regular dental check-ups and cleanings.¹
4. **Wise Use of Auxiliary Tools:** When brushing is not possible, use water rinsing, sugar-free xylitol gum, or mouthwash as temporary solutions, but be clear that they cannot fully replace brushing.¹¹

Ultimately, oral hygiene is the foundation of systemic health. By applying the scientific principles and personalized strategies presented in this report, readers can effectively manage not only oral diseases like cavities and gum disease but also the risk of systemic diseases associated with oral bacteria.

참고 자료

1. 아침 양치... 식전·식후 언제가 더 좋을가, 9월 2, 2025에 액세스, https://epaper.lnd.com.cn/cwbpaper/pad/con/202508/29/content_297730.html
2. 아직도 양치질만 하나요? 입속 세균 우습게 보다 뇌졸중·당뇨 생긴다 ..., 9월 2, 2025에 액세스, <https://jhealthmedia.joins.com/news/articleView.html?idxno=22363>
3. 아침 양치... 식전 vs 식후 언제가 더 좋을까?-연변일보 Yanbian Daily, 9월 2, 2025에 액세스, http://www.iybrb.com/content/2025-08/21/31_732591.html
4. 양치질 333법칙, 무조건 따랐다면 이 나간다? - 헬스조선, 9월 2, 2025에 액세스, https://m.health.chosun.com/svc/news_view.html?contid=2019100101475
5. 아침 양치질, 일어나자마자 vs 식사 후... 언제가 좋을까? - 헬스조선, 9월 2, 2025에 액세스, https://m.health.chosun.com/svc/news_view.html?contid=2023112202508
6. 양치질, 기상 직후 vs 아침밥 먹고... 언제가 좋을까? - 헬스조선, 9월 2, 2025에 액세스, https://m.health.chosun.com/svc/news_view.html?contid=2023083001950
7. 양치질, 아침 식사 전에 할까? 후에 할까? - 보그 코리아, 9월 2, 2025에 액세스, <https://www.vogue.co.kr/2023/02/23/%EC%96%91%EC%B9%98%EC%A7%88-%EC%95%84%EC%B9%A8-%EC%8B%9D%EC%82%AC-%EC%A0%84%EC%97%90-%ED%95%A0%EA%B9%8C-%ED%9B%84%EC%97%90-%ED%95%A0%EA%B9%8C/>
8. [궁금한 건강] ④아침 식전 양치질과 식후 양치질 어떤 게 좋은가, 9월 2, 2025에 액세스, <https://www.healtheconomy.co.kr/news/article.html?no=32479>
9. 아침 양치, 식전 vs 식후 언제가 좋을까? - YouTube, 9월 2, 2025에 액세스, <https://www.youtube.com/shorts/HjT6MqOXCJo?vl=de>
10. #655 밥 먹고 양치질 바로 하지 말자? 식후 30분 or 식후 바로? 양치질 타이밍 확실하게 알아봅시다: - YouTube, 9월 2, 2025에 액세스, <https://www.youtube.com/watch?v=AER7QjZOW-4>
11. 식후 양치질, 요즘 더 꼼꼼히 해야 하는 이유 - 헬스경향, 9월 2, 2025에 액세스,

- <https://www.k-health.com/news/articleView.html?idxno=57134>
12. 먹은 후 물로 입 헹궈내는 것이 칫솔·치약 없이 더 나은가요? - 닥터나우, 9월 2, 2025에 액세스, <https://doctornow.co.kr/content/qna/a1b5c1ca60d848a5ae2f072caa9b5f80>
 13. “99%가 아침 양치 잘못하고 있다고요?”...정답 공개합니다 | 세계일보, 9월 2, 2025에 액세스, <https://www.segye.com/newsView/20250819500887>
 14. 자고 일어나서? 아침 먹고? 치과 의사가 조언한 양치 시간 - 조선일보, 9월 2, 2025에 액세스, <https://www.chosun.com/culture-life/health/2025/08/21/SUZV7O77XZECZEPGWN LKXSWSMU/>
 15. 위식도 역류질환 [Gastro-esophageal reflux disease(GERD)] | 건강정보 - 보건대학원, 9월 2, 2025에 액세스, <https://gsph.yonsei.ac.kr/health/encyclopedia/disease/system.do?mode=view&articleNo=66943&title=%EC%9C%84%EC%8B%9D%EB%8F%84+%EC%97%AD%EB%A5%98%EC%A7%88%ED%99%98+%5BGastro-esophageal+reflux+disease%28GERD%29%5D>
 16. 위식도 역류병(GERD) - 소화 장애 - MSD 매뉴얼 - 일반인용, 9월 2, 2025에 액세스, <https://www.msdmanuals.com/ko/home/%EC%86%8C%ED%99%94-%EC%9E%A5%EC%95%A0/%EC%8B%9D%EB%8F%84-%EB%B0%8F-%EC%82%BC%ED%82%B4-%EC%9E%A5%EC%95%A0/%EC%9C%84%EC%8B%9D%EB%8F%84-%EC%97%AD%EB%A5%98%EB%B3%91-gerd>
 17. “양치질할 때마다 피 난다면 잇몸병 관리해야 한다는 신호” - 헬스중앙, 9월 2, 2025에 액세스, <https://jhealthmedia.joins.com/news/articleView.html?idxno=28214>
 18. “식후 3분? 굳이 기다리지 말고 즉시 양치질하세요” - 헬스경향, 9월 2, 2025에 액세스, <https://www.k-health.com/news/articleView.html?idxno=70774>
 19. Stephan's curve - Oxford Reference, 9월 2, 2025에 액세스, <https://www.oxfordreference.com/abstract/10.1093/acref/9780199533015.001.0001/acref-9780199533015-e-4138>
 20. 예방치학 및 실습 1, 9월 2, 2025에 액세스, <http://kocw-n.xcache.kinxcdn.com/data/document/2022/shinhan/yoonmisook0816/02.pdf>
 21. Stephan Curve Helps with Your Dental Care - Jamie the dentist, 9월 2, 2025에 액세스, <https://jamiethedentist.com/dental-carries-decay/stephan-curve/>
 22. 충치예방! 양치질만이 정답이 아니다? - 맞춤정보 - 삼성서울병원, 9월 2, 2025에 액세스, [http://www.samsunghospital.com/m/healthInfo/content/contentView.do?CONT_SRC=HOMEPAGE&CONT_SRC_ID=31454&CONT_CLS_CD=001021002006\)&CONT_ID=4239](http://www.samsunghospital.com/m/healthInfo/content/contentView.do?CONT_SRC=HOMEPAGE&CONT_SRC_ID=31454&CONT_CLS_CD=001021002006)&CONT_ID=4239)
 23. 밥 먹고 바로 양치했는데?...새로운 연구 결과 나왔다 / SBS / 오클릭 - YouTube, 9월 2, 2025에 액세스, <https://www.youtube.com/watch?v=FNfr8-xz-FQ>
 24. 건강의학정보 - 인하대병원 발전기금 | 후원관리팀 - 건강정보, 9월 2, 2025에 액세스, <https://www.inha.com/page/health/medicine/148754>
 25. 양치질 3·3·3법칙?...‘이것’먹곤 빨리 양치하지 마세요 > 공지사항 - 뉴욕이치과, 9월 2, 2025에 액세스, http://www.nyleedental.com/bbs/board.php?bo_table=notice&wr_id=32

26. 급식 후 양치에도 타이밍이 있다, 9월 2, 2025에 액세스,
<http://www.fsnews.co.kr/news/articleView.html?idxno=14430>
27. 앤던섬 고불소 충치예방 앤드치약 4개입 set - andthensome, 9월 2, 2025에 액세스,
<https://m.andthensome.co.kr/product/%EC%95%A4%EB%8C%84%EC%8D%B8-%EA%B3%A0%EB%B6%88%EC%86%8C-%EC%B6%A9%EC%B9%98%EC%98%88%EB%B0%A9-%EC%95%A4%EB%93%9C%EC%B9%98%EC%95%BD-4%EA%B0%9C%EC%9E%85-set/14/>
28. 케라틴으로 만든 치약이 손상된 치아를 보호하고 복원할 수 있음: 연구 결과 - GeekNews, 9월 2, 2025에 액세스, <https://news.hada.io/topic?id=22563>
29. #320 소아 불소도포(불소바니쉬) 궁금증 몽땅 알려드립니다-언제부터? 얼마나 자주? 효과? 부작용? 방법? 도포 후 주의? (정유미 소아청소년과 전문의, FABM, IBCLC) - YouTube, 9월 2, 2025에 액세스,
<https://m.youtube.com/watch?v=kKxknhagvKU&pp=ygUTI-yVhOq4sOu2iOyGjOuPhO2PrA%3D%3D>
30. 불소도포 및 실란트 - 별가람소아치과의원, 9월 2, 2025에 액세스,
http://www.xn--o39assp7wwmf6ygh7f2os.com/page/sub2_2
31. 불소 도포, 9월 2, 2025에 액세스,
<https://www.nyc.gov/assets/doh/downloads/pdf/hca/hca-ask-fluoride-varnish-ko.pdf>
32. Fluoride Varnish: Frequently Asked Questions - NYC.gov, 9월 2, 2025에 액세스,
<https://www.nyc.gov/assets/doh/downloads/pdf/hca/hca-ask-fluoride-varnish.pdf>
33. Comparative Evaluation of Longevity of Fluoride Release From three Different Fluoride Varnishes – An Invitro Study - PMC, 9월 2, 2025에 액세스,
<https://pmc.ncbi.nlm.nih.gov/articles/PMC5028538/>
34. “불소치약 쓰면 충치 멈출까?”...불소 효과 제대로 보려면 [건강톡톡] - 하이닥, 9월 2, 2025에 액세스, <https://news.hidoc.co.kr/news/articleView.html?idxno=32860>
35. '3-3-3' 양치법, 절대 법칙 아닙니다 - 헬스경향, 9월 2, 2025에 액세스,
<https://k-health.com/news/articleView.html?idxno=65568>
36. Korean (한국인) - Tooth wear 10.6_TG - Queensland Health, 9월 2, 2025에 액세스,
https://www.health.qld.gov.au/_data/assets/pdf_file/0034/1359844/toothwear-korean.pdf
37. 치아부식을 유발하는 음식 5가지 - YouTube, 9월 2, 2025에 액세스,
<https://m.youtube.com/shorts/GBy7-PtgzQA>
38. 선부부 치과, 9월 2, 2025에 액세스,
http://www.sunortho.co.kr/sub04/sub04_03_m.php
39. [건강] 치아교정땀 양치시간 2~3배 늘려야 - 조선일보, 9월 2, 2025에 액세스,
https://www.chosun.com/site/data/html_dir/2003/01/07/2003010770219.html
40. 구강건강 - 영등포구 보건소, 9월 2, 2025에 액세스,
<https://www.ydp.go.kr/health/contents.do?key=3714>
41. 구강보건 | 아산시보건소 홈페이지입니다., 9월 2, 2025에 액세스,
https://www.asan.go.kr/health/main/index.php?m_cd=106
42. '3-3-3 법칙' 지켰는데... 식사 직후 양치, 치아에 해롭다? - 조선일보, 9월 2, 2025에 액세스,
https://www.chosun.com/culture-life/culture_general/2025/04/21/2VHQCWZN3FBFXLM6JVAJMX7B4/

43. [소소한 건강 상식] 양치질 할 때, 물로 입 몇 번 헹구지? - 헬스조선, 9월 2, 2025에 액세스, https://m.health.chosun.com/svc/news_view.html?contid=2025081302940
44. 소금양치 소금물 가글 과연 효과가 있을까? 잘못 사용하면 치명적인 결과! - YouTube, 9월 2, 2025에 액세스, https://www.youtube.com/watch?v=S_LOBRJvgFQ
45. 자일리톨이 치아 건강에 미치는 5가지 효과는 무엇? - 데일리 푸드앤메드, 9월 2, 2025에 액세스, <http://www.foodnmed.com/news/articleView.html?idxno=20990>
46. 껌만 씹었을 뿐인데...내 몸에 미치는 영향 9가지 | 한국경제, 9월 2, 2025에 액세스, <https://www.hankyung.com/article/2021111584287>
47. 가글을 자주하면 효과가 더 좋을까? - YouTube, 9월 2, 2025에 액세스, <https://www.youtube.com/shorts/QKxo9DuKBbU>
48. [건강한 가족] '3·3·3 법칙'은 지키면서 양치 때 물 온도, 닦는 각도는 모른다고?, 9월 2, 2025에 액세스, <https://www.joongang.co.kr/article/24016870>
49. 3.3.3 양치질이 상술?! 진짜 과학적인 양치법 알려드립니다! - YouTube, 9월 2, 2025에 액세스, https://www.youtube.com/watch?v=hbNH22U_xK8
50. [어린이 튼튼 안내서] 잇몸 자극 0, 식후 1분 이내, 2분 이상, 하루 3번... 0123 양치법 기억하세요! - 조선일보, 9월 2, 2025에 액세스, https://www.chosun.com/kid/kid_literacy/kid_sisanews/2024/04/14/5Z53FDVAKXA_YHGLOFU22XD3SDU/
51. 양치질 하루 3번이면 될까?...음식 먹을 때마다 해야 정석 - 한국경제, 9월 2, 2025에 액세스, <https://www.hankyung.com/article/2020091500431>
52. 충치 - 위키백과, 우리 모두의 백과사전, 9월 2, 2025에 액세스, <https://ko.wikipedia.org/wiki/%EC%B6%A9%EC%B9%98>
53. 건치 비결은 3분 양치...젊을땐 충치·노년엔 잇몸질환 신경써야 - 한국경제, 9월 2, 2025에 액세스, <https://www.hankyung.com/article/2016061035771>