Supplementary File Table 9: Oral bacterial flora

Oral bacterial flora											
Article Number	Article		year	Study design	Level of plaque present	Lactobacillus presence	SM presence	Salivary flow rate	Salivary buffering capacity	Veilonella presence	Actinomyces presence
1	Caries prevalence and severity in the primary dentition and Streptococcus mutans levels in the saliva of preschoolchildren in South Africa.	Chosack	1988	cross-sectional			As MS conc increases, caries of high dmft scores also increases				
2	Social class, parent's education and dental caries in 3 to 5 year old children	Chosack	1990	cross-sectional							
3	Nutritional status and dental caries in a large sample if 4- and 5- year olds south african children	Cleaton Jones	2000	cross-sectional							
4	Dental caries and sucrose intake in five south african preschool groups	Cleaton Jones	1984	cross-sectional	it would seem that the quantity of dental plaque (indicated by DI-S) in the rural Black subjects may play an important role in pro-moting a relatively high caries rate						
5	Prevalence of dental caries, patterns of sugar consumption and oral hygiene practices in infancy in S. Africa.	Gordon	1985	cross-sectional							
6	Oral health care for children attending a malnutrition clinic in SA	Gordon, N	2007	cross-sectional							
7	Correlations between caries prevalence and potential etiologic factors in large samples of 4-5-yr-old children.	Granath	1991	cross-sectional	moderate relationship between plaque presence and dmfs score. higher plaque levels in urban children	There was a SS increase in dmfs scores (0.39-0.56) for a 1 unit increase in LBC	There was a SS increase in dmfs scores (0.17-0.33) for a 1 unit increase in SM	No SS difference in dmfs scores for a 1 unit incrase in salivary flow	As SB capacity increased, there was a lower dmfs score, (-0.7 to -0.1)		
8	Prevalence of dental caries in 4- to 5-year-old children partly explained by presence of salivary mutans streptococci	Granath	1993	cross-sectional			MS is not a risk factor for ECC. small correlation between dmfs and SM concentrations, r=0.18, but was SS. The overall low predictive power of mutans group strep-tococci in randomly selected groups, accentuated in subjects with caries, speaks for the need for some kind of re- evaluation of this risk factor. MS was lowest in urban white children 2.74 but higher in urban children (2.74 to 7.11) overall compared to rural children (3.98(12.06):				
9	Dental caries in African preschool children: Social factors as disease markers	Khan	1998	cross-sectional							
10	Caries and micronutrient intake among urban South African children: a cohort study.	Mackeown	2003	cohort							
11	Dental caries incidence in relation to nutrient intake in urban preschool children	Mackeown	2001	cohort							
12	Energy and macronutrient intake in relation to dental caries incidence in urban black south African preschool children in 1991 and 1995: the Birth to ten study	Mackeown	2000	cohort							
13	Prevalence and causes of ECC in children less than 6 years old at Tembisa Hospital, SA	Mndzebele	2014	cross-sectional							

14	Characteristics of Children Under 6 Years of Age Treated for Early Chidhood Caries in South Africa.	Mohamed	2018	cross-sectional							
15	ECC experience of children accessing selected immunisation facilities in JHB	Molete	2018	cross-sectional							
16	Parents influence on Early childhood caries among their children at a community health centre in Gauteng Province	Ntombela	2015	cross-sectional							
17	Socio-demographic correlates of early childhood caries prevalence and severity in a developing country--South Africa.	Postma	2008	cross-sectional							
18	Sweets, snacks, and dental caries: South African interracial patterns.	Richardson	1981	cross-sectional							
19	The bearing of dietary sucrose on the deciduous dentition of pre-school children in Transvaal	Richardson	1979	cross-sectional							
20	Total sucrose intake and dental caries in Black and in White South AFrican Children of 1-6 years: Part II	Richardson	1978	cross-sectional							
21	Patterns of breast and bottle feeding and their association with dental caries in 1- to 4-year-old South African children.1. dental caries prevalence and experience. Community Dent Health 1993 10: 405-413	Roberts GJ, Cleaton-Jones PE, Fatti LP et al. Patterns of breast and bottle feeding and their association with dental caries in 1- to 4-year-old South African children. Community Dent Health 1993 10: 405-413	1993	cross-sectional							
22	Mutans Streptococci and other caries-associated acidogenic bacteria in five-year old children in SA	Toi	1998	cross-sectional		No relationship was found between ds, dmfs andLactobacillus, Actinomyces or Veillonella numbers.	Salivary mutans streptococci counts correlated with ds and dmfs in colored			no relationship with dmfs	no relationship with dmfs
23	Dental caries and dental treatment in the primary dentition in an industrialized South African community.	Williams	1985	cohort							