



## TYPES OF GUM DISEASE

**Untreated gingivitis can advance to periodontitis and can eventually lead to tooth loss and other health problems.**

### GINGIVITIS

Gingivitis is the mildest form of periodontal disease. It causes the gums to become red, swollen, and bleed easily. There is usually little or no discomfort at this stage. Gingivitis is often caused by inadequate oral hygiene. Gingivitis is reversible with professional treatment and good oral home care.

Factors that may contribute to gingivitis include, diabetes, smoking, aging, genetic predisposition, systemic diseases and conditions, stress, inadequate nutrition, puberty, hormonal fluctuations, pregnancy, substance abuse, HIV infection, and certain medication use.

### PERIODONTITIS

Untreated gingivitis can advance to periodontitis. With time, plaque can spread and grow below the gum line. Toxins produced by the bacteria in plaque irritate the gums. The toxins stimulate a chronic inflammatory response in which the body in essence turns on itself, and the tissues and bone that support the teeth are broken down and destroyed. Gums separate from the teeth, forming pockets (spaces between the teeth and gums) that become infected. As the disease progresses, the pockets deepen and more gum tissue and bone are destroyed. Often, this destructive process has very mild symptoms. Eventually, teeth can become loose and may have to be removed.

There are many forms of periodontitis. The most common ones include the following.

- **Aggressive periodontitis** occurs in patients who are otherwise clinically healthy. Common features include rapid attachment loss and bone destruction and familial aggregation.
- **Chronic periodontitis** results in inflammation within the supporting tissues of the teeth, progressive attachment and bone loss. This is the most frequently occurring form of periodontitis and is characterized by pocket formation and/or recession of the gingiva. It is prevalent in adults, but can occur at any age. Progression of attachment loss usually occurs slowly, but periods of rapid progression can occur.
- **Periodontitis as a manifestation of systemic diseases** often begins at a young age. Systemic conditions such as heart disease, respiratory disease, and diabetes are associated with this form of periodontitis.
- **Necrotizing periodontal disease** is an infection characterized by necrosis of gingival tissues, periodontal ligament and alveolar bone. These lesions are most commonly observed in individuals with systemic conditions such as HIV infection, malnutrition and immunosuppression.

# GUM DISEASE RISK FACTORS

**The main cause of periodontal (gum) disease is plaque, but other factors affect the health of your gums.**

## AGE

Studies indicate that older people have the highest rates of periodontal disease. Data from the Centers for Disease Control and Prevention indicates that over 70% of Americans 65 and older have periodontitis.

## SMOKING/TOBACCO USE

Tobacco use is linked with many serious illnesses such as cancer, lung disease and heart disease, as well as numerous other health problems. Tobacco users also are at increased risk for periodontal disease. Studies have shown that tobacco use may be one of the most significant risk factors in the development and progression of periodontal disease.

## GENETICS

Research has indicated that some people may be genetically susceptible to gum disease. Despite aggressive oral care habits, these people may be more likely to develop periodontal disease. Identifying these people with a genetic test before they even show signs of the disease and getting them into early intervention treatment may help them keep their teeth for a lifetime.

## STRESS

Stress is linked to many serious conditions such as hypertension, cancer, and numerous other health problems. Stress also is a risk factor for periodontal disease. Research demonstrates that stress can make it more difficult for the body to fight off infection, including periodontal diseases.

## MEDICATIONS

Some drugs, such as oral contraceptives, anti-depressants, and certain heart medicines, can affect your oral health. Just as you notify your pharmacist and other health care providers of all medicines you are taking and any changes in your overall health, you should also inform your dental care provider.

## CLENCHING OR GRINDING YOUR TEETH

Clenching or grinding your teeth can put excess force on the supporting tissues of the teeth and could speed up the rate at which these periodontal tissues are destroyed.

## OTHER SYSTEMIC DISEASES

Other systemic diseases that interfere with the body's inflammatory system may worsen the condition of the gums. These include cardiovascular disease, diabetes, and rheumatoid arthritis.

## POOR NUTRITION AND OBESITY

A diet low in important nutrients can compromise the body's immune system and make it harder for the body to fight off infection. Because periodontal disease begins as an infection, poor nutrition can worsen the condition of your gums. In addition, research has shown that obesity may increase the risk of periodontal disease.

## GUM DISEASE SYMPTOMS

**Gum disease is often silent, meaning symptoms may not appear until an advanced stage of the disease.**

However, warning signs of gum disease include the following:

- Red, swollen or tender gums or other pain in your mouth
- Bleeding while brushing, flossing, or eating hard food
- Gums that are receding or pulling away from the teeth, causing the teeth to look longer than before
- Loose or separating teeth
- Pus between your gums and teeth
- Sores in your mouth
- Persistent bad breath
- A change in the way your teeth fit together when you bite
- A change in the fit of partial dentures

Millions of people don't know they have this serious infection that can lead to tooth loss if not treated.

## PERIODONTAL DISEASE AND SYSTEMIC HEALTH



Research has shown that periodontal disease is associated with several other diseases. For a long time it was thought that bacteria was the factor that linked periodontal disease to other disease in the body; however, more recent research demonstrates that inflammation may be responsible for the association. Therefore, treating inflammation may not only help manage periodontal diseases but may also help with the management of other chronic inflammatory conditions.

## Prophy vs. Periodontal Maintenance

A Prophy (D1110) is a simple cleaning on a patient that does not have significant tartar deposits below the gums or periodontal pocketing. The typical prophy patient comes in every six months, exhibits excellent homecare, has healthy gum tissues, does not bleed on gentle probing and has no pockets over 4mm. Prophylaxis are the cleanings that insurance typically will cover twice a year at 100%.

A Periodontal Maintenance (D4910) is for patients who have completed periodontal treatment (surgical and/or nonsurgical such as scaling and root planing) and it includes removal of the bacterial flora from crevicular and pocket areas, scaling and polishing of the teeth, periodontal evaluation and a review of the patient's plaque control efficiency. Typically, an interval of three to four months between appointments results in an effective treatment schedule and this can vary depending upon the clinical judgment of the dentist. When new or recurring periodontal disease appears, additional diagnostic and treatment procedures must be considered. Periodic maintenance treatment following periodontal therapy is not synonymous with a prophy. Insurance typically covers this at 50%-80% and will typically allow anywhere from 2-4 periodontal maintenance cleanings per year.

Periodontal disease is a bacterial infection caused by plaque that destroys the bone and fibers holding teeth in place. Some people are more at risk than others. Smoking, stress, certain medications, diabetes, and poor hygiene are some things that can increase your risk. The first way to treat this disease is called "scaling and root planing". The goal with this gum therapy is to stop the infection by cleaning and disinfecting the roots of the teeth above and below the gums. This procedure typically takes place in two visits, during which the hygienist may use a local anesthetic to treat one half of the mouth at a time.

After completing this type of periodontal therapy, you become what is considered a "periodontal patient" and your cleanings are now referred to as "periodontal maintenance cleanings". A periodontal maintenance cleaning is different from a regular prophy because periodontal disease cannot be cured, much like diabetes, it's a chronic condition that can be controlled.

Good periodontal health and dental health in general has many proven benefits that extend beyond teeth. It can affect blood sugar regulation in diabetics, as well as your heart, respiratory and reproductive health. Don't underestimate your periodontal maintenance appointment....it is so much more than "just a cleaning!"