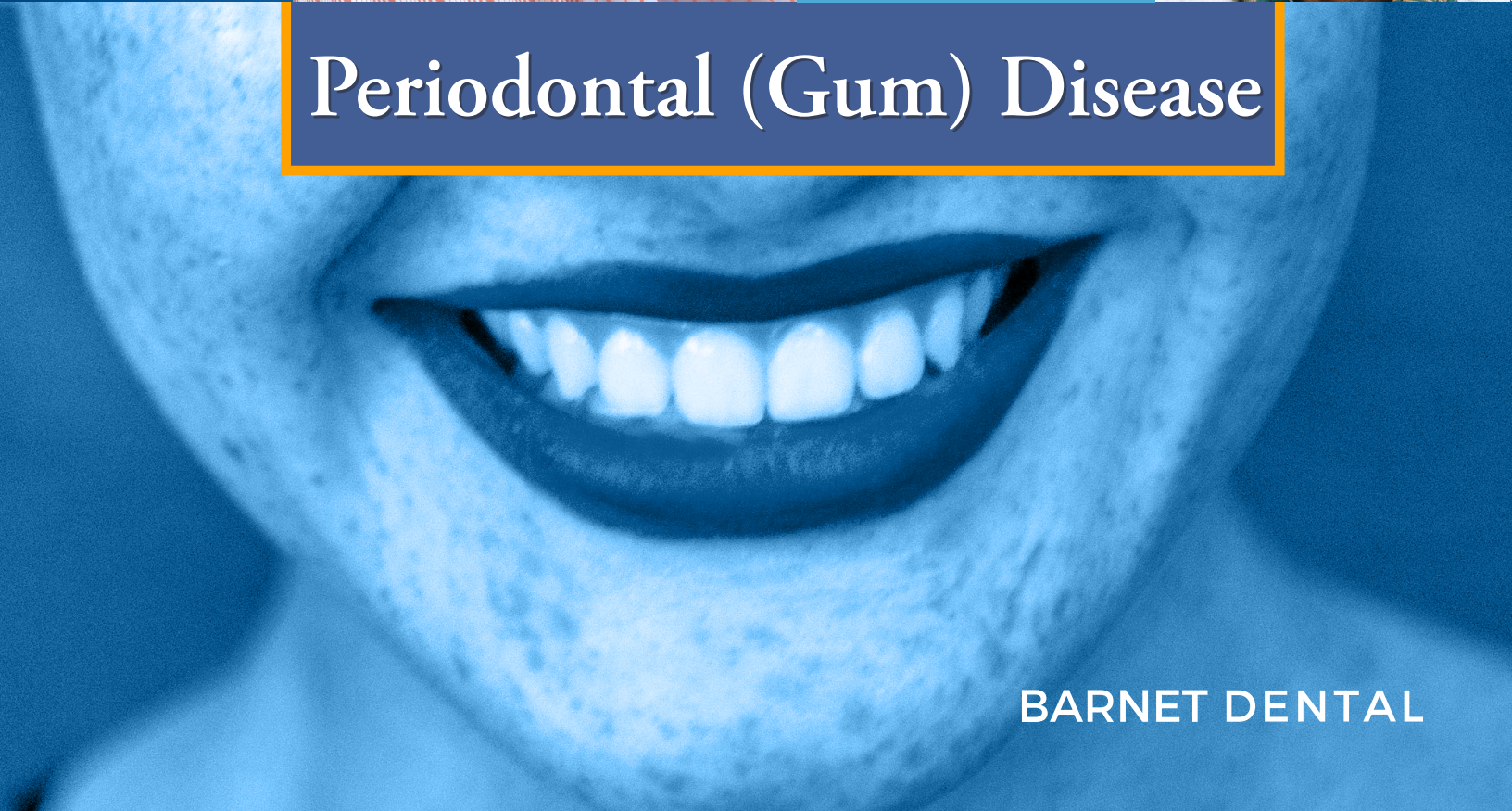




Periodontal (Gum) Disease





Gum Disease

If you've been diagnosed with periodontal (gum) disease, you're not alone. Many adults in the U.S. are affected by this condition, which can vary from mild gum inflammation to severe disease that significantly damages the soft tissue and bone supporting the teeth. In the most extreme cases, it can lead to tooth loss. The progression of your gum disease—whether it halts, slows down, or worsens—largely depends on your daily oral care practices moving forward.

The Cause

What causes gum disease?

If you've been diagnosed with periodontal (gum) disease, you're not alone. Many adults in the U.S. are affected by this condition, which can vary from mild gum inflammation to severe disease that significantly damages the soft tissue and bone supporting the teeth. In the most extreme cases, it can lead to tooth loss. The progression of your gum disease—whether it halts, slows down, or worsens—largely depends on your daily oral care practices moving forward.

In addition to plaque buildup, several other factors contribute to the development of gum disease. Smoking or chewing tobacco significantly increases the risk, as do poor oral hygiene habits. Hormonal changes, such as those occurring during pregnancy or menopause, can make gums more susceptible to disease. Certain illnesses, like diabetes and HIV/AIDS, also heighten the risk. Furthermore, genetic predisposition, nutritional deficiencies, and stress play a role.

Gingivitis

Gingivitis is a common and mild form of gum disease (periodontal disease) that causes irritation, redness, and swelling (inflammation) of

the part of your gum around the base of your teeth (gingiva). It's

important to take gingivitis seriously and treat it promptly. Gingivitis can lead to much more serious gum disease called peri-

odontitis and tooth loss.

The most common cause of gingivitis is poor oral hygiene that encourages plaque to form on teeth, causing inflammation of



the surrounding gum tissues. Other contributing

factors can include smoking, certain medications, diabetes, hormonal changes, and genetic predisposition.

Periodontitis

Periodontitis is a severe gum infection that damages the soft tissue and, without treatment, can destroy the bone that supports your teeth. It can cause teeth to loosen or lead to tooth loss. Periodontitis is common but largely preventable.

It usually results from poor oral hygiene, which allows plaque—a sticky film of bacteria—to build up and harden on the teeth. This plaque can then spread below the gum line, leading to inflammation and the destruction of tissue and bone.

Symptoms of periodontitis include swollen, red, or purplish gums, gums that feel tender when touched, receding gums, new spaces developing between teeth, pus between teeth and gums, bad breath, a bad taste in the mouth, and loose teeth. Treatment for periodontitis involves thorough cleaning of the pockets around teeth to prevent damage to surrounding bone. Advanced cases may require surgery. Good oral hygiene practices and regular professional dental care are essential to managing periodontitis and preventing its recurrence.



Who gets gum disease?

Gum disease can affect anyone, but certain factors increase the risk. Poor oral hygiene, such as inadequate brushing and flossing, is a primary cause. Smoking or chewing tobacco significantly raises the likelihood of developing gum disease. Genetics also play a role, as a family history of gum disease can increase susceptibility. People with diabetes are more prone to infections, including those affecting the gums. Hormonal changes during pregnancy, menopause, and menstruation can make gums more vulnerable to disease. Certain medications can impact oral health,

contributing to gum problems. Chronic illnesses like cancer or HIV weaken the immune system, making gum disease more likely. Poor nutrition, particularly a lack of essential nutrients, can also compromise gum health. Lastly, older adults are more prone to gum disease due to age-related changes in the immune system and oral health. Maintaining good oral hygiene and regular dental checkups can help reduce the risk.

How do I know if I have gum disease?

- Red, swollen, or tender gums
- Gums that bleed easily, especially when brushing or

- flossing
- Receding gums
- Persistent bad breath or bad taste
- Loose or shifting teeth
- Pain when chewing
- Pus between teeth and gums

Any of these symptoms may be a sign of a serious problem, which should be checked by a dentist. At your dental visit the dentist or hygienist should:

- Ask about your medical history to identify underlying conditions or risk factors (such as smoking) that may contribute to gum disease.
- Examine your gums and note any signs of inflammation.

- Use a tiny ruler called a “probe” to check for and measure any pockets. In a healthy mouth, the depth of these pockets is usually between 1 and 3 millimeters. This test for pocket depth is usually painless.

The dentist or hygienist may also:

- Take an x-ray to see whether there is any bone loss.
- Refer you to a periodontist. Periodontists are experts in the diagnosis and treatment of gum disease and may provide you with treatment options that are not offered by your dentist.



Risk Factors

- **Smoking.** Need another reason to quit smoking? Smoking is one of the most significant risk factors associated with the development of gum disease. Additionally, smoking can lower the chances for successful treatment.
- **Hormonal changes in girls/women.** These changes can make gums more sensitive and make it easier for gingivitis to develop.
- **Diabetes.** People with diabetes are at higher risk for developing infections, including gum disease.
- **Other illnesses and their treatments.** Diseases such as AIDS and its treatments can negatively affect the health of gums, as can treatments for cancer.
- **Medications.** There are hundreds of prescription and over the counter medications that can reduce the flow of saliva, which has a protective effect on the mouth. Without enough saliva, the mouth is vulnerable to infections such as gum disease. And some medicines can cause abnormal overgrowth of the gum tissue; this can make it difficult to keep teeth and gums clean.



Deep Cleaning (Scaling and Root Planing)

The dentist, periodontist, or dental hygienist removes the plaque through a deep-cleaning method called scaling and root planing. Scaling means scraping off the tartar from above and below the gum line. Root planing gets rid of rough spots on the tooth root where the germs gather, and helps remove bacteria that contribute to the disease. In some cases a laser may be used to remove plaque and tartar. This procedure can result in less bleeding, swelling, and discomfort compared to traditional deep cleaning methods.

Medications

What is it?

Prescription Antimicrobial Mouthrinse

A prescription mouthrinse containing an antimicrobial called chlorhexidine

Antiseptic Chip

A tiny piece of gelatin filled with the medicine chlorhexidine

Antibiotic Gel

A gel that contains the antibiotic doxycycline

Antibiotic Microspheres

Tiny, round particles that contain the antibiotic minocycline

Enzyme Suppressant

A low dose of the medication doxycycline that keeps destructive enzymes in check

Why is it used?

How is it used?

To control bacteria when treating gingivitis and after gum surgery

It's used like a regular mouthwash.

To control bacteria and reduce the size of periodontal pockets

After root planing, it's placed in the pockets where the medicine is slowly released over time.

To control bacteria and reduce the size of periodontal pockets

A gel that contains the antibiotic doxycycline

To control bacteria and reduce the size of periodontal pockets

The periodontist puts the microspheres into the pockets after scaling and root planing.

For the short term treatment of an acute or locally persistent periodontal infection

These come as tablets or capsules and are taken by mouth.



Gum Disease

Surgical Treatments

Flap Surgery. Surgery might be necessary if inflammation and deep pockets remain following treatment with deep cleaning and medications. A dentist or periodontist may perform flap surgery to remove tartar deposits in deep pockets or to reduce the periodontal pocket and make it easier for the patient, dentist, and hygienist to keep the area clean. This common surgery involves lifting back the gums and removing the tartar. The gums are then sutured back in place so that the tissue fits snugly around the tooth again. After surgery the gums will heal and fit more tightly around the tooth. This sometimes results in the teeth appearing longer

Bone and Tissue Grafts. In addition to flap surgery, your periodontist or dentist may suggest procedures to help regenerate any bone or gum tissue lost to periodontitis. Bone grafting, in which natural or synthetic bone is placed in the area of bone loss, can help promote bone growth. A technique that can be used with bone grafting is called guided tissue regeneration. In this procedure, a small piece of mesh-like material is inserted between the

bone and gum tissue. This keeps the gum tissue from growing into the area where the bone should be, allowing the bone and connective tissue to regrow. Growth factors –proteins that can help your body naturally regrow bone –may also be used. In cases where gum tissue has been lost, your dentist or periodontist may suggest a soft tissue graft, in which synthetic material or tissue taken from another area of your mouth is used to cover exposed tooth roots. of time. Listed on the next page are some medications that are currently used.



Second Opinion

When considering any extensive dental or medical treatment options, you should think about getting a second opinion. To find a dentist or periodontist for a second opinion, call your local dental society. They can provide you with names of practitioners in your area. Additionally, dental schools may sometimes be able to offer a second opinion.

Since each case is different, it is not possible to predict with certainty which grafts will be successful over the long-term. Treatment results depend on many things, including how far the disease has progressed, how well the patient keeps up with oral care at home, and certain risk factors, such as smoking, which may lower the chances of success. Ask your periodontist what the level of success might be in your particular case.

How can I keep my teeth and gums healthy?

- Brush your teeth twice a day (with a fluoride toothpaste).
- Floss regularly to remove plaque from between teeth. Or use a device such as a special brush or wooden or plastic pick recommended by a dental professional.
- Visit dentist routinely for check-up and professional cleaning.
- Don't smoke

Can gum disease cause health problems beyond the mouth?

In some studies, researchers have observed that people with gum disease (when compared to people without gum disease) were more likely to develop heart disease or have difficulty controlling blood sugar. Other studies showed that women with gum disease were more likely than those with healthy gums to deliver preterm, low birth weight babies. But so far, it has not been determined whether gum disease is the cause of these conditions.

There may be other reasons people with gum disease sometimes develop additional health problems.

For example, something else may be causing both the gum disease and the other condition, or it could be a coincidence that gum disease and other health problems are present together. More research is needed to clarify whether gum disease actually causes health problems beyond the mouth, and whether treating gum disease can keep other health conditions from developing.

In the meantime, it's a fact that controlling gum disease can save your teeth –a very good reason to take care of your teeth and gums.

Clinical Trials

Clinical trials are research studies of new and promising ways to prevent, diagnose, or treat disease. If you want to learn more about periodontal disease, visit <https://barnet-dental-sample.online/services/>.

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