

Periodontal Information Leaflet

Periodontitis (gum disease) is a major public health problem due to its high prevalence and is the most common chronic inflammatory non-communicable disease of humans, affecting **10% of the global population**.

Periodontitis causes irreversible destruction of the bone and tissues that hold the teeth in the jaw. The disease is usually slowly progressing, but it can go through periods of rapid destruction. Now you have this condition you will need to make changes to your lifestyle and daily routines in order to reduce the risk of losing your teeth. You will also require continuing close care and support to prevent it from getting worse and to detect any relapse. This will mean regular dental examination appointments, most likely every 2-3 months in the initial phase until the disease is stabilised.

In most cases periodontitis is a painless, silent disease causing problems in the late stages, usually due to pain associated with tooth mobility and recurrent gum abscesses.

The end result of periodontitis can be tooth mobility and eventual tooth loss but the disease is treatable and can be stabilised. However this can only be done if we have your daily cooperation.

There are many risk factors for periodontitis, but the main risk factor is dental plaque. In order for periodontal therapy to be successful, it must be supported by very high standards of daily oral hygiene and home self-care.

This will inevitably mean that cleaning your teeth will now take considerably longer than before. This can even be up to 20 minutes twice daily, in order to achieve the high standards of oral hygiene needed to halt the progression of periodontitis.

If the periodontal therapy provided by your dentist is not supported with adequate levels of oral hygiene at home, it will not be successful and the result will be continuing destruction of the bone supporting your teeth, leading to increasing tooth mobility and eventual tooth loss

The disease works in a very similar way to type 2 diabetes, and so just as a diabetes patient has to keep tight control of their diet and monitor their blood sugar levels, similarly you will have to keep tight control of your brushing and reduce the levels of plaque in your mouth.

Apart from plaque, the other main risk factors for periodontitis are smoking (including other tobacco and oral nicotine use), poorly or uncontrolled diabetes and genetic factors.



If you are a smoker it negatively impacts upon how you heal and so periodontal therapy is less effective, and there is an increased risk of tooth loss.

Therefore, it is important that you stop smoking and using other oral tobacco and nicotine replacements in order for treatment to work well. If you would like some support to stop smoking, please speak with your dentist.

Likewise, uncontrolled diabetes with high blood sugar levels causes increased destruction of the bone and tissues supporting the teeth and patients do not heal well after treatment. It is vital that diabetes is controlled with the help of your general medical practitioner.

On some occasions, periodontitis can be treated by a regular dentist or hygienist. However if your condition has not responded well to past treatment or is severe or rapidly progressing you may benefit from a referral to a specialist.

The first step in therapy is aimed at providing you with tailored advice to improve the effectiveness of your oral hygiene as well as removing the plaque and bacteria above the gum through “professional mechanical plaque removal”, or PMPR. This plaque removal is most often done without the need for local anaesthetic.

The second step of therapy is aimed at eliminating the bacterial biofilm and plaque under the gums through PMPR and is done using local anaesthetic.

Most often this is sufficient for stabilisation but in severe cases the second step may need to be repeated to achieve stabilisation. Periodontal surgery can be considered if the disease does not respond adequately to the second step.

The most important factor in disease stabilisation is your maintenance of very high standards of daily oral hygiene and home self-care.

As a result of periodontal therapy you may notice the following:

- Increased sensitivity of the exposed root surfaces to hot, cold or sweet food and drinks
- Temporary increases in tooth mobility
- Recession of the gums and exposure of the root surfaces
- Elongation of the teeth
- A black triangle appearance and shadowing between the teeth where the gum has been lost.

These side effects arise as the gums begin to heal and the deep pockets below the gum reduce. The aim of treatment is to **reduce these deep pockets** which harbour bacterial biofilm that cause periodontitis, and to improve accessibility to the roots of the teeth for daily home cleaning and maintenance.

Risks of not having further treatment:

- Bleeding and swollen gums
- Tooth movement and tooth loss
- Difficulty in chewing and eating
- Bad breath
- Recent evidence has shown that periodontal disease is also associated with general health e.g. Diabetes and heart disease.