

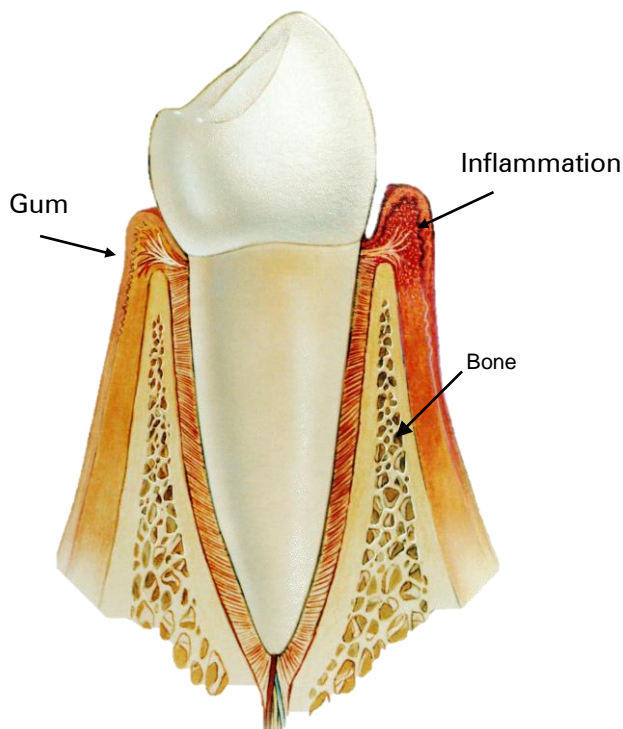
## PERIODONTAL DISEASE

THE INFORMATION CONTAINED IN THIS PAMPHLET IS GENERAL IN NATURE AND IS INTENDED ONLY AS A GENERAL GUIDE. PLEASE ASK ANY SPECIFIC QUESTIONS YOU MAY HAVE ABOUT YOUR PARTICULAR CASE.

### What is it?

Periodontal Disease is used to describe a group of infections effecting the gums and supporting structures of the teeth. The simplest form is **gingivitis**, a condition that only effects the gums and results in bleeding and swelling of the gums. Gingivitis is a mild form of gum disease and does not include any loss of bone or tissue that holds teeth in place. Gingivitis is the first sign of something wrong with your gums, if left untreated it may develop into the more destructive forms of periodontal disease.

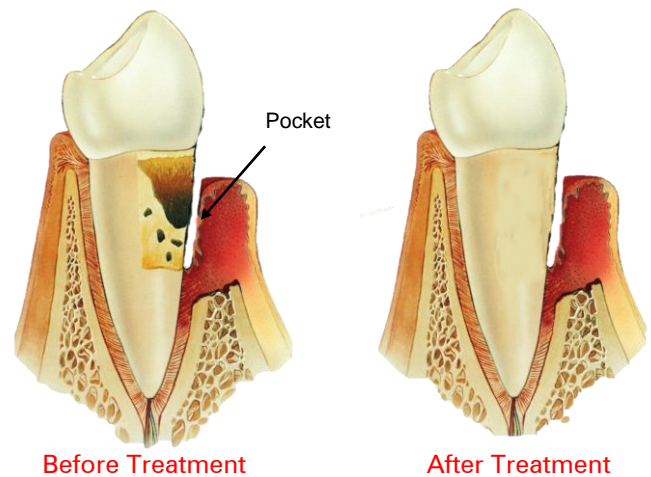
#### Gingivitis



The more severe forms of periodontal disease are **periodontitis**. Periodontitis (gum disease, pyorrhoea) is an infection of the tissues that help to anchor the teeth and results in the resorption of the bone surrounding the teeth, reducing the strength of the attachment. It may result in loose teeth, receded gums, changes in the spaces between teeth and in some cases loss of teeth. The condition is usually not painful, and may not show any of these obvious symptoms until the disease is very advanced.

... not usually painful...

#### Periodontitis



The gap is called a **pocket** and is a sign of the damage that has already taken place. Plaque can live underneath the gum, in the pocket, and it is impossible to brush and floss the plaque in all but the very top of the pocket. Your periodontist has special instruments to help remove the plaque from the deeper parts of the pocket, which can then remain clean as long as no further plaque is allowed to develop at the gum tooth margin.

### What causes it?

All periodontal diseases are caused by dental plaque, the sticky mass of bacteria (germs) that naturally forms in the mouth. There are over 300 different bacteria normally in your mouth, and they only cause problems when they are allowed to build up into large numbers and or they are particularly virulent (harmful) species of bacteria. Microscopically, plaque starts to form within minutes, but it normally takes 8 - 24 hours for a clean tooth to have plaque that can be seen with the naked eye.

### Why Me?

Naturally, our bodies have defences against bacterial assault, and most people will only develop a gingivitis in response to plaque build-up. It can be easily treated by removing the plaque (flossing and brushing).

Unfortunately, some people (about 10 - 20%) are not able to fully defend themselves, either because there are problems with their defences





(inappropriate immune responses) and, or the bacteria in the plaque are of a particularly virulent (harmful) variety. These people develop **periodontitis**.

Your immune system is determined by your genes, although some diseases, medications, smoking etc. can alter the immune system. Thus a combination of immune defence problems and/or virulent bacteria cause you to be susceptible to periodontal disease

Plaque + Inappropriate Immune Response

OR

Harmful plaque + Inappropriate Immune Response

OR

Harmful plaque + Immune Response

= **PERIODONTITIS**

The balance between plaque and immune response causes some people to have more severe periodontitis than others.

## What can I do about it?

The simplest method of treating and preventing periodontal diseases is to remove the plaque (brushing and flossing) before it has a chance to cause any harm. There is little that can change your underlying susceptibility to periodontal disease, but by removing the plaque we can prevent further disease.

Inappropriate Immune Response - Plaque

OR

Inappropriate Immune Response - Harmful Plaque

OR

Immune Response - Harmful Plaque

= **SUSCEPTIBLE BUT NO  
DISEASE**

## Treatment

The aim of treatment is to control the disease. We cannot normally change susceptibility, so we aim to reduce the plaque to a level that the body can manage.

## No Plaque = No Problems

The level of plaque control that is required to control disease will vary between people (this is why some people can never brush their teeth and don't ever have periodontitis, but others can clean quite well, and still have problems because they are very susceptible.)

The patient's role is to ensure that good cleaning keeps all the tooth surfaces above the gum free of plaque. The periodontist then concentrates on removing all the deposits below the level of the gum that the patient can't access.

Successful treatment results in the prevention of any further damage, it does not reverse the damage already done to any great extent. Successful treatment is highly dependent on the patient maintaining the high level of plaque control that was needed to control the disease. This is because the patient is still susceptible, and will remain susceptible for the rest of their life.

## Susceptibility is for life.

Susceptibility can be altered by factors such as, general health, some medications, smoking, emotional stress and diabetes. This means that susceptibility can increase and decrease throughout life and thus the threshold level of acceptable plaque control will also vary.

## Why do I need to see a dentist?

You should visit your dentist regularly so you can be checked for the early signs of periodontal disease, and to check your cleaning technique. Once periodontitis has begun the small gap between your tooth and your gum becomes deeper as the underlying tissue is damaged.

## Why do I need to see a periodontist?

Most patients are referred to periodontists because they have advanced forms of periodontal disease or they have seemingly milder forms which have not responded to treatment. A periodontist is a specialist who only treats gum problems. They have special skills in the treatment of these conditions and sometimes specialised equipment to help in the treatment. It is important to realise that your periodontist is only concentrating on your gum condition, and is NOT looking at your teeth for decay and other oral conditions. For this reason, it is important to continue to see your dentist (just as you normally would) even when you are seeing your periodontist.

