

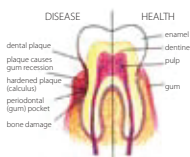


National Dental
Centre Singapore
SingHealth

Periodontal Disease



PERIODONTAL DISEASE



Periodontal literally means "around the tooth", hence periodontal disease refers to a chronic bacteria infection of the gums and bone supporting the teeth. It can affect one tooth or several teeth and if left untreated, may lead to bone loss.

The most common form of periodontal disease include gingivitis and periodontitis. In the early stages, only the gums are infected (gingivitis). Later, it spreads to the bone surrounding the tooth and other supporting tissues. Finally, the tooth becomes loose and may fall out. Periodontal disease can affect persons of any age.

What are the common signs and symptoms of periodontal disease?

You may have periodontal disease if you have:

- Bleeding gums when brushing
- Red, swollen, puffy-looking or tender gums
- Abscesses on the gum
- Pus secreting from between the teeth and gums
- Shaky teeth
- Teeth appearing to drift apart from its original position
- Receding gumline(gum recession)
- Persistent bad breath
- Vague discomfort or dull-ache of gums and teeth

You may still have gum disease and not have any of the above signs and symptoms as most people do not experience any pain with the gum infection.

What causes periodontal disease?

The main cause of periodontal disease is bacterial plaque. Our mouths are full of bacteria. These bacteria, along with salivary proteins, constantly form a sticky colourless "plaque" on teeth. Brushing and flossing help prevent plaque accumulation. Plaque that is not removed can harden and form bacteria-harboring calculus or "tartar" over time. Calculus cannot be removed by daily brushing and only a professional cleaning by a dentist or dental hygienist can remove it.

Gingivitis

The longer plaque and calculus stay on teeth, the more harmful they become. Bacterial plaque causes inflammation of the gums, which is called "gingivitis." The gums become red and puffy, bleeding easily. Gingivitis is a mild form of periodontal disease that can usually be reversed with daily brushing and flossing, and regular scaling by a dentist or a dental hygienist.

Periodontitis

If gingivitis is not treated, it can progress to "periodontitis." The gums start to pull away from the teeth and are filled with plaque and become infected. As the plaque spreads and grows beneath the gum line, the body's immune system fights the bacteria. Bacterial toxins and the body's enzymes fighting the infection start to break down the bone and the connective tissue that hold teeth in place.



Healthy Gums



Red, swollen gums

If left untreated, the bones, gums and connective tissue are destroyed. The teeth may eventually become loose and have to be removed. Periodontitis can range from mild to moderate to even severe forms.



Plaque Calculus



Bone loss



Loose, separating teeth

Risk Factors in Periodontitis

- Smoking/Tobacco use. Smoking is one of the most significant risk factors associated with the development of periodontitis. Additionally, smoking can lower the chance of success of some treatments.
- Hormonal changes in girls/women. These changes can make the gums more sensitive and make it easier for gingivitis to develop.
- Diabetes. People with diabetes are at higher risk for developing infections, including periodontal disease.
- Stress. Research shows stress can make it more difficult for our bodies to fight infection, including periodontal disease.
- Medications. Some drugs such as antidepressants and some heart medicines, can affect oral health because they lessen the flow of saliva. (Saliva has a protective effect on teeth and gums.)
- Illnesses. Diseases like cancer or AIDS and their treatments can also affect the health of the gums.

- Genetic susceptibility. Some people are more prone to severe periodontal disease than others.

How is periodontal disease treated?

The main goal of periodontal treatment is to control the gum infection, prevent the disease progression and return to good oral health. Depending on the extent of the gum disease, the type of treatment and number of visits will vary from patient to patient. Treatment of periodontal disease can be simply categorized to non-surgical and surgical therapy. Regardless of the treatment modality, it is important for the patient to maintain good oral hygiene. In addition, quitting tobacco use or smoking is advised as a way to improve treatment outcome.

Scaling and Root Planing (Non-Surgical Treatment)

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 involves using special instruments to remove tough calculus and bacteria deposits along the root surfaces under local anaesthesia. After root planing, your teeth may experience some temporary sensitivity to cold foods/drinks as the infected gums heal over time and may expose a little of the upper root surfaces. If this occurs, you can use toothpastes or gels/rinses for sensitive teeth.

Gum surgery (Surgical Treatment)

If deep pockets and gum inflammation remain following initial periodontal treatment with deep cleaning, a periodontist may perform gum surgery to remove residual tartar in deep pockets or to reduce the periodontal pocket and make it easier for you, dentist and hygienist to keep the area clean. Depending on the particular case during gum surgery, your periodontist may suggest bone or tissue grafts or special materials to replace or encourage new growth of bone or gum tissue destroyed by periodontitis. You can obtain more information on these procedures from the NDC pamphlet on Periodontal Surgery.

Periodontal Maintenance

After non-surgical and/or surgical periodontal treatment and when the active gum disease is arrested, you will be seen regularly intervals for maintenance. This is also called supportive periodontal treatment where you are reviewed at intervals between 3-8 months depending on how well you maintain your oral hygiene. At each recall visit, your teeth and gums are examined and plaque and calculus removed via scaling and/or polishing. Residual gum pockets deeper than 4mm are usually root planed to ensure that your gum infection is under control. Root planing involves removing toxins and bacteria from the root surfaces of teeth. Remember, without careful periodic maintenance, periodontal disease can recur. When your periodontal status has improved and remain at an optimum level after several visits, you may be discharged from the periodontics clinic to your polyclinic or private dentist for routine check-ups.

What can I do to prevent gum disease?



Brushing



Interdental Brush



Flossing



Professional Cleaning by Dentist

- Brush your teeth twice daily, Brushing after every meal is also helpful to minimize plaque accumulation.
- In certain areas of the teeth, you may be advised to use interdental brush or end-tufted brushes.
- Floss every day
- Visit the dentist routinely twice a year for a check-up and professional cleaning.
- Don't use tobacco products. If you smoke, your dentist may advise you to quit smoking.

Remember, your gums and the underlying bone supports all your teeth in place and a beautiful smile starts with healthy gums!

Can periodontal disease cause health problems beyond the mouth?'

Maybe. But so far the research is inconclusive. Studies are ongoing to determine whether there is a cause-and-effect relationship between periodontal disease and:

- An increase risk of heart attack or stroke,
- An increased risk of delivering preterm, low weight babies,
- Difficulty controlling blood sugar levels in people with diabetes.



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