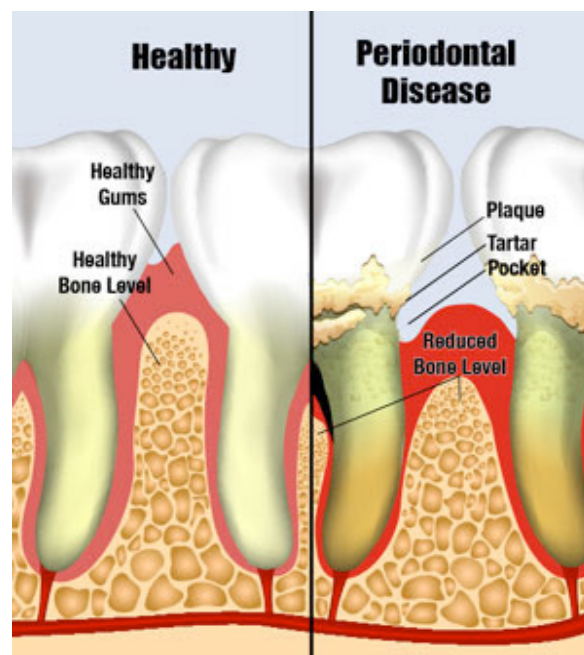


Periodontal Treatment

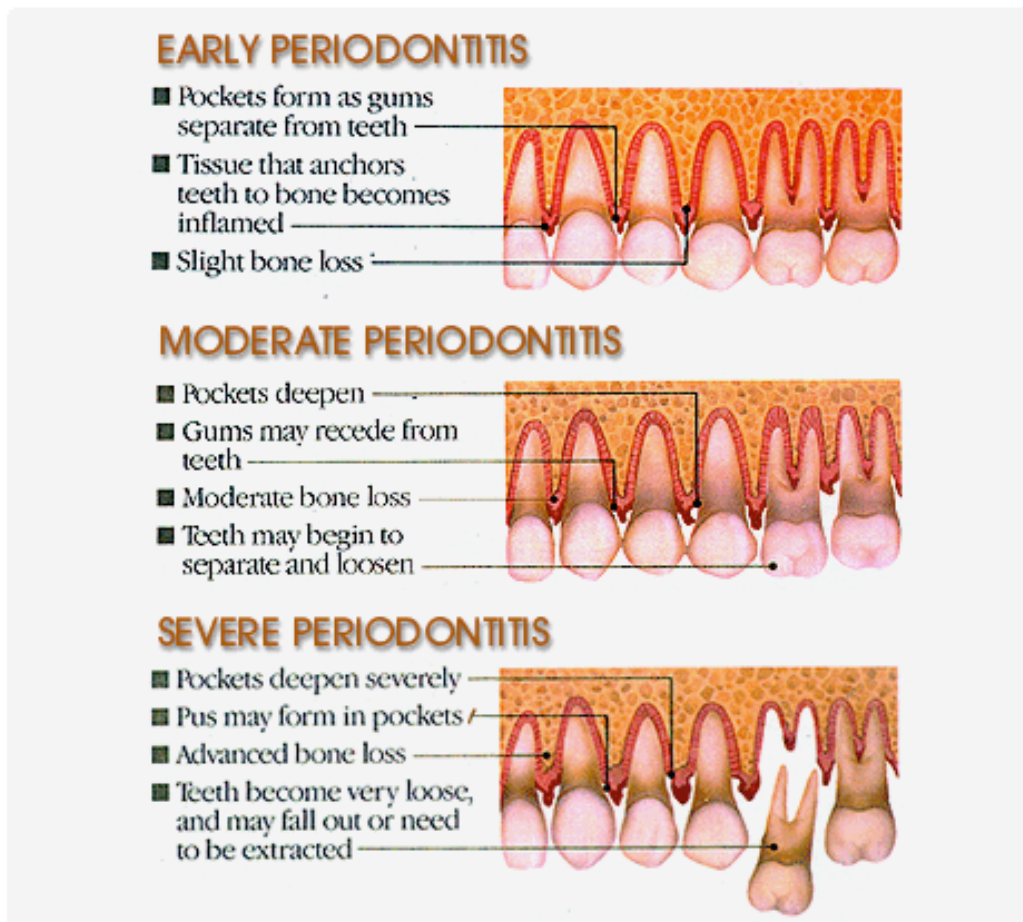
Periodontitis refers to a number of inflammatory diseases affecting the periodontium, ie, the tissues that surround and support the teeth.



Periodontitis involves progressive loss of the bone around the teeth, and if left untreated, can lead to the loosening and subsequent loss of teeth. It is caused by bacteria that adhere to and grow on the tooth's surfaces, along with an overly aggressive immune response against these bacteria.

A diagnosis of periodontitis is established by inspecting the soft gum tissues around the teeth with a probe and radiographs to determine the amount of bone loss around the teeth. Although the different forms of periodontitis are all caused by bacterial infections a variety of factors affect the severity of the disease. Important "risk factors" include smoking, poorly controlled diabetes and inherited (genetic) susceptibility.

The cornerstone of successful periodontal treatment starts with establishing excellent oral hygiene. This includes twice daily brushing with daily flossing, and mouthwash use. Also the use of an interdental brush (called a Tee-Pee Brush) is helpful if space between the teeth allows. Persons with periodontitis must realize that it is a chronic inflammatory disease and a lifelong regimen of excellent hygiene and professional maintenance care with a Dentist /Hygienist or Periodontist is required to maintain affected teeth.



Dentists and dental hygienists "measure" periodontal disease using a device called a periodontal probe. This is a thin "measuring stick" that is gently placed into the space between the gums and the teeth, and slipped below the gum-line. If the probe can slip more than 3 mm length below the gum-line, the patient is said to have a "gingival pocket" around that tooth. This is somewhat of a misnomer, as any depth is in essence a pocket, which in turn is defined by its depth, i.e., a 2 mm pocket or a 6 mm pocket. However, it is generally accepted that pockets are self-cleansable (at home, by the patient, with a toothbrush) if they are 3 mm or less in depth.

This is important because if there is a pocket, which is deeper than 3 mm around the tooth, at-home care will not be sufficient to cleanse the pocket, and professional care should be sought.

When the pocket depths reach 5, 6 and 7 mm in depth even the hand instruments and cavitron used by the dental professionals cannot reach deeply enough into the pocket to clean out the bacterial plaque that cause gingival inflammation. In such a situation the pocket or the gums around that tooth will always have inflammation which will likely result in bone loss around that tooth. The only way to stop the inflammation would be for the patient to receive sub-gingival antibiotics or undergo some form of gingival surgery to access the depths of the pockets and perhaps even change the pocket depths so that they become 3 or less mm in depth and can once again be properly cleaned by the patient at home with his or her toothbrush.

If a patient has 7 mm or deeper pockets around their teeth, then they would risk eventual tooth loss over the years. If this periodontal condition is not identified and the patient remains unaware of the progressive nature of the disease then, years later, they may be surprised that some teeth will gradually become loose and may need to be extracted, sometimes due to a severe infection or even pain.

It is essential before any dental treatment is carried out, that the periodontal status of the teeth are taken into account, as success of the treatment is dependent of the longevity of the teeth.