

DENTAL BOOTCAMP

FactSheet

► Periodontitis: From your teeth to your heart

Periodontal disease, also known as periodontitis, is a chronic bacterial infection of the gums and teeth. Harmful bacteria are contained in a colourless, sticky film called 'plaque' that deposits on teeth, particularly around the gum line.

Without regular brushing and flossing, plaque accumulates and causes the gums to become inflamed, swollen and bleed easily. This is commonly known as gingivitis. The best way to prevent and manage gingivitis is by minimising plaque with brushing and flossing.

If you suffer from periodontitis, you may also have bleeding and swelling but the difference from gingivitis is that the gums become quite inflamed and the structures that anchor the gum to the tooth and bone start to break down. The bone supporting the tooth begins to be lost and it forms a periodontal pocket - a gap between the gum and the tooth that becomes increasingly difficult to clean. The bacteria start to move deeper down and thrive in this pocket, causing the attachment of the tooth and its supporting tissues to break down. The ultimate outcome can be tooth loss.

It is now known that 10-15% of the population have inherited the potential for periodontitis. So it is the response of the person's body to the presence of bacteria that leads to periodontitis. What is important is that this destructive inflammatory response can be brought on by other diseases and can itself have other effects on the body.

Oral health & overall health

According to the US Centers for Disease Control and Prevention, researchers have uncovered potential links between periodontitis and other serious health conditions.

It is now thought that periodontal disease has some links with the development of cardiovascular disease, which is considered to be the leading cause of death among Australians¹. Studies show that dental infections have appeared as risk factors for cardiovascular disease, regardless of the presence of other classic risk factors including diet, smoking, weight, blood cholesterol level and alcohol consumption.

Researchers have also found that people with periodontitis are almost twice as likely to suffer from coronary artery disease as those without periodontitis. An American National Health and Nutrition survey found that individuals with periodontitis had a 25% increased risk of having coronary artery disease during a 15 year follow up².

Periodontitis can also have an adverse effect for the 3.5% of Australians with diabetes³. Not only are they at a higher risk of suffering from destructive periodontitis, but the effects of periodontitis can also impair the body's ability to use insulin, making diabetes more difficult to manage. There is also a potential association with periodontitis and an increased risk of bearing a pre-term and/or low-birth-weight baby.

Signs & symptoms

Although the symptoms of periodontitis are often subtle, the condition has some warning signs:

- Gums that bleed during and after brushing
- Red, swollen or tender gums
- Persistent bad breath or bad taste in the mouth
- Formation of deep pockets between teeth and gums
- Loose or shifting teeth

Even if symptoms are not present, some degree of periodontitis may still exist. Some people have periodontitis only around certain teeth, which they cannot see. A dentist can assess the progression of periodontitis and advise appropriate treatment.

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Australian Dental Association

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Factors that contribute to Gingivitis and Periodontitis

The Australian Dental Association (ADA) says that apart from the inherited susceptibility and the presence of excessive plaque deposits, there are other factors that are thought to increase the risk, severity and speed of periodontitis development. These include:

- Smoking: People who smoke are significantly more likely to suffer periodontitis than non-smokers, and smoking can lower success rate of some treatments
- Pregnancy: Women may develop gingivitis during a pregnancy and experience bleeding and sensitive gums
- Stress: This reduces the body's ability to fight infections such as those in periodontitis and gingivitis
- Medications: These can affect oral health if they lessen the flow of saliva, which has a protective effect on teeth and gums. The dentist can give advice in conjunction with the doctor
- Poor nutrition: An unbalanced diet, that is high in sugar helps the bacteria thrive and makes it hard for the body to resist the infection. As well, if the diet is seriously low in nutrients, the immune system can be affected
- Clenching and Grinding teeth - bruxism: If the teeth are already low on bone support through periodontitis, then grinding can have even more severe destructive effects on the teeth
- Alcohol & drugs: Excessive alcohol and drug use can lead to poor oral hygiene

Treatment & prevention

The ADA says that even if you have managed to avoid periodontitis, it is especially important to practice a regular, effective oral care routine:

- To keep teeth for a lifetime, plaque must be removed every day with brushing, flossing and the use of a mouthwash if advised by your dentist.
- Regular dental visits and professional cleaning are necessary to remove plaque and hard calculus from places a toothbrush and floss may have missed
- Eat a well-balanced diet and limit "between-meal" snacks, especially those high in sugars
- Quit smoking and limit alcohol consumption

1 2004-05 National Health Survey, Australian Institute of Health & Welfare.

2 The Relationship Between Periodontal Disease and Systemic Conditions, Rose, F.L et al, October 2000.

3 2004-05 National Health Survey, Australian Institute of Health and Welfare.

