What is periodontal disease?
Periodontal (gum) disease is an infection of the soft and hard tissue that support your teeth. This condition is caused when plaque — a sticky film of bacteria — builds up on the teeth and hardens into tartar.1 In early stages, the gums become inflamed and there may be some bleeding evident when brushing and/or flossing. This stage is called “gingivitis.” Gingivitis can be reversed with treatment from your dentist and good oral hygiene.1 If gingivitis is not treated, the disease may progress into “periodontitis,”1 where plaque and tartar build up below the gumline. Irritation and inflammation of the gums occur, creating pockets (increased space between your teeth and gums) that are infected. As periodontitis worsens, the pockets get deeper and the bone that supports the teeth is lost. If left untreated, this will eventually lead to tooth loss.1,2

How is periodontal disease diagnosed?
If you’ve ever heard your dentist or dental hygienist calling out numbers and noting them in your dental chart at your regular checkup, then you’ve experienced “pocket probing” or “charting.” As part of a routine checkup, the dentist completes a periodontal examination to measure the depth of the spaces (“pockets”) between your teeth and gums, and checks for bleeding. Detection of bleeding and pockets of four or more millimeters in depth are one way for your dentist to identify gingivitis and periodontitis.1

What are some of the treatments that my dentist might recommend for periodontal disease?
Your general dentist may treat your periodontal disease or refer you to a periodontist. A periodontist is a dentist who has received additional training and specializes in the care and treatment of the gums and bone surrounding the teeth.4

Your dentist or periodontist may recommend a non-surgical procedure called scaling and root planing, also known as a “deep cleaning.” During a regular cleaning, your dentist or dental hygienist will use special tools to scrape off the tartar and plaque from above and just below the gum line. In a “deep cleaning,” the dentist or hygienist scrapes the tartar and plaque (the scaling part) as in a regular cleaning, and he/she will also smooth the exposed tooth root surfaces (root planing) where the plaque and tartar form, to help get rid of the bacteria that contribute to periodontal disease.1
If non-surgical treatments are not effective or if the amount of bone loss is severe, periodontal surgery may be recommended. This treatment involves the surgical opening and later suturing of gum tissue in order to remove the tartar, plaque, bacteria, and diseased tissue from deep below the gumline. Once the periodontal disease is under control, your dentist or periodontist may recommend bone or tissue grafts in order to help regenerate any bone or gum tissue destroyed by periodontal disease. In this type of procedure, the dentist surgically places a small piece of mesh-like fabric or bone material between the bone and gum tissue. This fabric or bone material allows new bone and connective tissue to grow.

What happens after I receive treatment for periodontal disease?
Your dentist or periodontist will prescribe an ongoing treatment plan to help prevent periodontal disease from recurring. This is known as “maintenance therapy.” Most periodontists would agree that after scaling and root planing, many patients do not require any further active treatment, including surgical therapy. However, the majority of patients will require ongoing maintenance therapy to sustain health. As part of your maintenance therapy, you’ll have scheduled follow-up visits so your dentist/periodontist can remove any new tartar or plaque and to polish your teeth to prevent the disease from progressing. Your dentist may also prescribe at-home care such as mouth rinses or special toothpaste to help keep your teeth healthy.

What is the AAP and what do they say about these treatment options?
AAP is the American Academy of Periodontology, an association of dental professionals who “specialize in the prevention, diagnosis and treatment of diseases affecting the gums and supporting structures of the teeth and in the placement and maintenance of dental implants.” According to the treatment guidelines set forth by the AAP, “periodontal health should be achieved in the least invasive and most cost-effective manner. This is often accomplished through non-surgical procedures.” Treatment results are dependent on the patient keeping up with at-home care and maintenance therapy.

Can periodontal disease contribute to health problems beyond the mouth?
It’s known that bacteria in the mouth can compromise complicated medical procedures such as organ transplants. Additional impacts on other diseases are inconclusive. Studies suggest:

- an increased risk of heart attack or stroke,
- an increased risk of delivering preterm, low birth weight babies
- difficulty controlling blood sugar levels in people with diabetes

More research needs to be done to clarify the relationship between periodontal disease and other systemic conditions. However, it’s a fact that controlling periodontal disease can save your teeth – this is a very good reason to take care of your teeth and gums.

Questions to ask your dentist about periodontal disease:
- Am I at risk for periodontal disease? What can I do to reduce my risk?
- I’d like to treat my periodontal disease using the least invasive and most cost-effective treatment. What are my treatment options?
- Will you treat my periodontal disease, or do you recommend I see a periodontist?