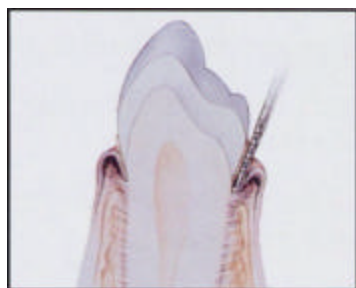




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## Everything You Wanted To Know About Gum Disease But Were Afraid To Ask

Periodontal disease (gum disease) is the loss of bone support of the tooth from infection. Gingivitis is inflammation of the gums, which does not affect the bone support of the tooth unless left untreated. Both are caused by bacteria infection. We cannot eliminate bacteria from our mouths, but keeping our mouths as clean as possible is the key to keeping our teeth. Most patients are only concerned with cavities, not periodontal disease. The primary reason for tooth loss is periodontal disease.



There are many signs and symptoms of periodontal disease. They include red, swollen & bleeding gums, an occasional odor or foul taste in your mouth, and receding gums. Pain is not one of them, except when the disease is severe and teeth are on the verge of being lost. The only sure sign of periodontal disease is the measurement of the pocket between the gum and the tooth (see left for illustration). The deeper the pocket, the more severe the disease. The following are some facts on periodontal disease:

- It is a chronic infection if left untreated
- It is caused by bacteria found in the subgingival (below the gum line) plaque, tonsils, & tongue
- Subgingival plaque reforms in 9-11 weeks, **IRREGARDLESS OF HOME CARE**
- Subgingival plaque houses well over 1000 different types of bacteria and virus'
- It is transmissible - (yes, you can get it from kissing)
- 85% of halitosis (bad breath) is directly caused by periodontal disease
- It is related to the following diseases: high blood pressure, stroke, diabetes, premature child birth, heart disease, lung disease
- It is episodic in nature

The episodic nature of periodontal disease is illustrated in the graph below. Basically, this means only when the subgingival plaque reaches a certain level does destruction of bone occur. There are periods of inactivity, which are followed by short periods of activity. During the active periods of the disease we see tremendous destruction of bone. There are triggers (causes) for the active periods. The two biggest triggers are stress and time. Since we do the best to control the stress in our lives, we need to concentrate on controlling the amount of time the subgingival plaque stays in the mouth. Since the subgingival plaque reforms in 9-11 weeks no matter how well we do with our home care, patients with periodontal disease are put on a 3 month maintenance re-care schedule



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after the initial non-surgical care.

The initial ***non-surgical treatment*** for periodontal disease is called scaling and root planing (deep cleanings). During this procedure, the hygienist uses our state of the art periodontal cleaner to remove the bacteria, plaque and calculus (hardened plaque) from the periodontal pockets. This is ideally done in one visit, however we can split it into two. Antibiotics can be prescribed, as periodontal disease is bacterial. Home care is extremely important because even though subgingival plaque reforms quickly, proper home care keeps it to a minimum. Less plaque means fewer bacteria; therefore a period of active bone loss is much less likely to occur. In addition to in-office care, the following **home care schedule** is recommended:



- The CURRENT best toothpaste's are: Total®, Gum Care® & any anti-caries (regular).
- **Only** Listerine® or a fluoride mouth rinse is indicated - just 1-2 times weekly (daily use of any mouth wash can damage the lining of your mouth & pre-brushing rinses are of no benefit).
- Rota-dent® home care system 2-3 times daily (rotary handpiece and interdental picks).
- Floss is beneficial only if you have the triangular gum tissue between your teeth (papilla).

As always, we are here to answer your questions. Please feel free to ask us. We look forward to helping you maintain healthy teeth for a lifetime.

