

Idle Thoughts on Gum Disease

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Idle Thoughts on gum disease.....Periodontal disease is an inflammation in the gums, bone and tissues that surround and support the teeth. Gum disease is most likely to affect adults over 30, although anyone is at risk. In the United States, about 66% of young adults, 80% of middle-aged people and 90% of people older than 65 have some form of gum disease.

The form and severity of gum disease may vary depending on how gum tissues react to plaque and bacteria. It can affect all or part of the gums. Early-stage gum disease (gingivitis) causes red, swollen gums that bleed easily when brushed or flossed. Because gingivitis usually doesn't cause pain, many people mistakenly delay treatment. With care it can be reversed.

Advanced gum disease (periodontitis) develops if the disease progresses and it affects more than the gums. The gums pull away from the teeth, leaving deep pockets where plaque can grow and do further damage. Periodontitis can progress until the bones that support the teeth are damaged.

Gum disease is caused by the growth of bacteria on the teeth and gums. If the bacteria is not removed promptly, it forms plaque on the teeth. Plaque feeds on sugars in the foods you eat and drink and produces toxic acids and other chemicals. The toxins irritate your gums, causing them to swell and bleed easily when brushed. Plaque also causes a hard mineral buildup (calculus or tartar), which further irritates the gums.

Early stage gum disease (gingivitis) starts when bacteria are left on teeth and gums, and then plaque forms. Plaque and the acids it produces irritate the gums, which causes them to become red and swollen. Plaque can lead to calculus (tartar), a hard mineral buildup that also irritates gums and must be removed by a dental professional. Untreated gingivitis can progress to advanced gum disease (periodontitis), causing gums to pull away from the teeth or recede down the root and create deep pockets. Plaque can grow in the pockets, further damaging the gums and breaking down bones that support the teeth. Bone damage can loosen teeth, causing them to fall out or require removal (extraction).

Your risk of gum disease increases if you do not brush and floss regularly and if you avoid going to the dentist. Other factors that increase your risk include smoking cigarettes or using smokeless tobacco. Smoking is one of the most significant risk factors for gum disease, causing deeper pockets and bone loss.

Drinking too much alcohol, poor nutrition, eating sugary foods and other carbohydrates (grains, pasta, bread) which help plaque grow, diabetes, dry mouth (xerostomia), pregnancy, some medications, having the HIV virus, poor occlusion, and a family history of gum disease.....are all factors increasing the risk of this disease.

Many experts believe it is important to see a dentist twice a year, especially if you have a history of dental problems. A dental hygienist can remove plaque and scrape the tartar from around your gum line. Regular checkups and cleanings will help you reverse and prevent further gum disease. Your dentist and hygienist will use a small mirror and a probing tool (periodontal probe) to visually check your teeth. X-rays may also be taken to evaluate the level of bone around all the teeth.

Early treatment of gum disease is very important. The goals of treatment are to prevent the disease from permanently damaging tissues, control any infection and prevent tooth loss. Effective treatment depends on your willingness to keep your teeth clean with effective brushing and flossing. Treatment of gum disease may include brushing your teeth in the morning, after meals and snacks and before bed, daily flossing of your teeth, twice-yearly appointments with your dentist for teeth examination and cleaning, antimicrobial mouthwashes such as Listerine, antibiotics, root planing and scaling, or surgery if the disease is advanced.

Use a toothbrush with soft, rounded-end bristles and a small head that allows you to reach all parts of your teeth and mouth. Apply a small amount of a fluoride toothpaste preferably one that is not too abrasive. Replace your toothbrush every 3 to 4 months or sooner if you have been sick. Never share a toothbrush with anyone and replace it when the bristles flatten or start to flare. Using a toothbrush past this time may cause damage to the gums or be less effective in cleaning the teeth. You may also use an electric toothbrush that has been given the American Dental Association (ADA) seal of approval. Studies show that powered toothbrushes with a rotating and oscillating (back and forth) action are more effective than other manual toothbrushes.

As you age, the root surfaces of your teeth may become exposed, more likely to decay and be sensitive to air and cold. Your dentist may ask that you visit more than twice/year for cleanings. It may also be necessary to have root planing and scaling which is usually done with local anesthesia. This is done if the tartar is very deep into the pockets and removing it would be too sensitive without the anesthesia.

If the gum disease is too advanced, surgery may be required to reduce the pocket depths or to replace gum tissue that has been lost. Bone that is destroyed generally can not be replaced although bone grafts can be attempted with varying degrees of success.

In conclusion, it is important to recognize that gum disease affects many aspects of your life. There are social implications to bad breath, an unattractive smile, poor occlusion leading to poor nutrition and infection that can affect overall health. Studies have linked the bacteria that cause gum disease to the bacteria that lead to heart disease and strokes. It is theorized that the infection can lead to plaque buildup in the arteries of the heart. It is strongly recommended that if you have heart disease or are at risk of stroke that you visit the dentist for a thorough evaluation. Conversely, if you are told by your dentist that you have gum disease an evaluation by your physician may be in order.

As a reminder, if you have some particular medical conditions or have had joint replacements within the last two years, you will more than likely be pre-medicated with an antibiotic for dental visits to avoid further infection leading to a heart problem or possible loss of the joint that has

been replaced. Your dental professional is there to help you have an attractive smile, good functioning occlusion, and healthy gums. Talk to him/her about new crowns, fillings, partial dentures, dentures and possibly implants. Dentistry only gets more expensive with time and should be done while you are mentally, emotionally, physically and financially able to address those problems you might have.