



GUM DISEASE

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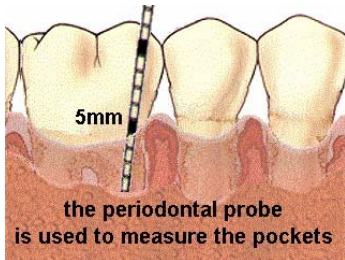
You have just been told you have gum disease. Gum disease or Periodontal Disease is an infection of your gums that not only results in tooth loss, but can put you at risk of other serious health problems. So it is important you start to make the changes necessary to stop, control or managing this disease. To help answer some of your questions about gum disease, I have compiled information from various websites and dental articles. Please take some time to read this important information and feel free to ask any questions you may have.

Dr. Michael Guy

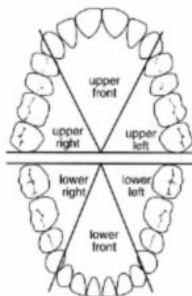
How we find it (PSR)

The PSR (Periodontal Screening and Recording) is a routine part of every oral examination for people 18 and older. It is a simple test specially designed for early detection of periodontal disease.

Your mouth was examined in six sections with a special instrument. The instrument has a rounded tip that is gently moved around your gumline. Each section was coded according to the PSR scoring system, featuring numerical scores 0 through 4.



PSR tells us how healthy your gums are and whether or not you need a full periodontal assessment. For example if all of your scores are 0 through 2 additional examination is not required. However we may recommend some treatment for specific conditions.



If you score 3 or 4 in any sextant: a more detailed periodontal examination is necessary. Based on this exam, we will recommend the appropriate treatment for you.

PERIODONTAL SCREENING & RECORDING			
SEXTANT SCORE	MONTH	DAY	YEAR

Periodontal Disease And Progression

Periodontal Disease is an inflammation or infection of the bone and the gum tissues or "supporting structures" surrounding the teeth.

- The main cause is the bacteria in plaque
- Gum disease affects about 75% of the adult population
- Gum disease is progressive. That is, if left untreated it gets worse.
- It progresses relatively painlessly
- Table 1 shows the several signs and symptoms

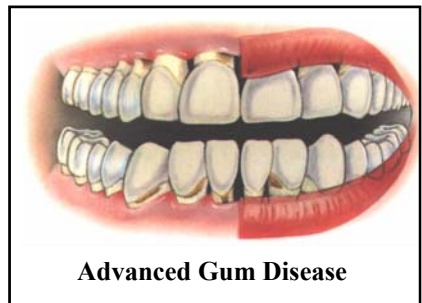
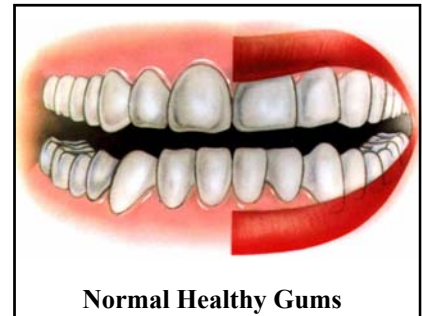


Table 1

SIGNS AND SYMPTOMS OF PERIODONTAL DISEASE

- swollen, tender, bleeding gums
- gum tissue separating from your teeth (pockets)
- receding gums or longer appearing teeth due to bone loss
- loose or shifting teeth,
- pus
- unpleasant taste or odour coming from your mouth.
- chronic Bad breath
- pain

Table 2

RISK FACTORS OF PERIODONTAL DISEASE

- Smoking
- Poor Oral Hygiene
- Family history/genetics
- Medications
- Age
- Gender
- Family Transmission
- Smoking
- Stress
- Osteoporosis
- Diabetes
- Poor diet
- Hormones
- Past gum disease

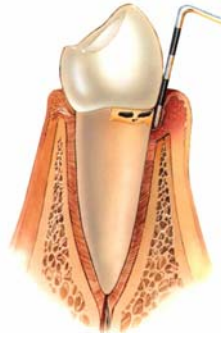
Why do I have Gum Disease?

The reason one gets gum disease and the severity at which one gets it mostly depends on one's health and lifestyle. Table 2 shows the several health and lifestyle related factors that puts you at increased risk of gum disease. In general, anything that decreases your bodies immune system or it's capacity to heal will decrease your bodies ability to fight gum disease.

Smoking

As you can see from table 2, smoking is one of the most significant risk factors in the development and progression of periodontal disease. **Tobacco suppress the body's ability to fight infection.** Tobacco users are two times more likely to develop periodontal disease and are more likely to lose teeth than those who don't smoke. The severity of periodontal disease is related to the amount of daily tobacco exposure and the number of years you have been exposed.

How Gum Disease Progresses



Normal Healthy Tooth

- PSR score 0 or 1
- Pink, firm gums
- No bleeding
- No tartar
- Periodontal pockets are 0mm to 2mm

Stage 1- Gingivitis

- PSR score 1 or 2
- Gums are red, swollen and bleeding
- Tarter accumulation
- No bone loss
- Can progress to Stage2, Stage 3 and Stage4 if left untreated
- Regular cleanings and better home care is necessary

Stage 2 - Early Gum Disease

- PSR score 2 or 3
- Bacterial plaque and tartar (a hardened plaque) continues to accumulate and spread under the gum tissue
- gums are red, swollen and bleeding
- Periodontal pockets of 3mm to 5mm begin to form
- Deep cleanings necessary
- Prognosis with treatment is very good

Stage 3- Moderate Gum Disease

- PSR score 3 or 4
- Bacteria continues to spread under the gums causing further bone destruction
- Periodontal pockets are 6mm to 8mm
- Gums begin to recede making teeth look longer
- Deeper pockets make deep cleanings less effective
- Prognosis with treatment begins to decline

Stage 4 Advanced Gum Disease

- PSR score 4
- Most of bone around the tooth is destroyed,
- Some periodontal pockets are 9mm plus
- Teeth feel loose
- Teeth shift
- Pus
- Painful infections
- Root cavities
- Deep cleanings totally ineffective
- Prognoses with treatment becomes very poor
- tooth loss may be inevitable.

INCREASING SEVERITY →

Not just your teeth at risk!

Evidence now links gum disease to a variety of health concerns. Table 3 shows the many health problems you are at increased risk of when you have periodontal disease.

Table 3
Health problems you are at risk of with Gum Disease

- Diabetes
- Cardiovascular disease
- Stroke
- Lung infection
- Preterm, low birth weight infants
- Respiratory disease
- Osteoporosis

These risk factors and health concerns have been confirmed by numerous studies. We would be happy to provide you with further information about the link between your oral health and your overall health.

Periodontal Assessment

A thorough examination of the gums is done and necessary radiographs are taken. The main part of the examination is the periodontal probing to measure the depth of the gum pockets and bleeding due to infection. Treatment decisions are based on the finds from this examination. It also provides a baseline for comparison for future examinations.

Periodontal Treatment

The goal of periodontal treatment is simply to control the bacteria that causes periodontal disease. With treatment we attempt to create an environment that is stable (no disease progression) and maintainable (all area can be cleaned well by you and your hygienist)

Treatment may involve the following:

- Oral hygiene instruction,
- Root Planing and Scaling,
- antibiotic therapy,
- smoking cessation,
- Health and lifestyle counseling,
- Replacement of old, poorly contoured fillings,

- frequent monitoring and maintenance cleanings,
- gum surgery,
- Medical consultation
- Bite adjustment,
- orthodontics

Consequences not treating Gum Disease

Without Gum therapy there will be a continued progressive destructive of your gums. You will continue to experience or eventually experience bleeding swollen gums, recession of gums, loose teeth, bad breath, painful infection and tooth loss. You are also at increased risk of diabetes, cardiovascular disease, Stroke, osteoporosis and lung infection. Women who are pregnant and do not treat their gum disease are at increased risk of having preterm, low birth weight infants.

Links and References

- www.1stgum disease.com
- www.adha.org/oralhealth
- www.perio.org/consumer
- www.ada.org/public/topics/gum.html

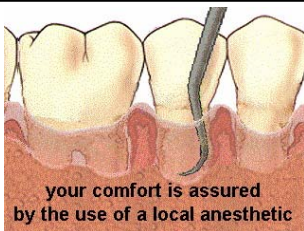
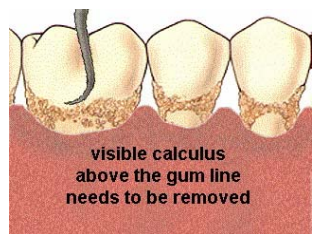
Scaling and Root Planing (Non-Surgical Treatment)

Scaling and root planing involves the removal of the irritants and bacterial deposits (plaque and tartar) that have accumulated above and below the gum line in the periodontal pockets. The root surfaces of the teeth are planed (smoothed) to promote healing and to help prevent future bacterial reattachment. At the same time, gingival (gum) curettage can be done to remove the infected soft tissues that line the periodontal pockets.

Most of the time, scaling and root planing is done in two to four visits. For patient comfort, the gums can be numbed using a local anesthetic. One-quarter of the mouth is usually treated at the time and treatment of each quarter can take 45 minutes to an hour (three to four hours for the entire mouth). Most patients report minimal discomfort

Oral Hygiene Instruction

Your daily home care is the most important factor in controlling gum disease. So during scaling and root planing appointments,



we will review oral hygiene techniques that are aimed at improving your ability to control plaque and to help avoid bacteria from re-infecting the pockets. You also will receive advice on the modification of certain risk factors associated with periodontal disease.

Antibiotics

In some forms of periodontal disease, antibiotics may be indicated in combination with scaling and root planing to impede further tissue breakdown and promote healing. If this is the case, a bacterial culture may be required to test for harmful bacteria and to establish what antibiotics they are susceptible to.

Please take

Metronidazole 250 mg+ Amoxicillin 250 mg each three times daily for eight days.

Post treatment care

For several days after a scaling expect Teeth to:

- Be sensitive to temperature,
- Be sensitive to pressure and biting and
- Feel loose
- Gums to be tender and bleed more readily

Re-evaluation

Four to six weeks after completion of scaling and root planing, a periodontal re-evaluation must be completed. The purpose of this exam is to assess the response to treatment and determine if there is a need for further treatment. In some cases it may be necessary to refer you to a periodontist (gum specialist) to continue treatment.

Costs

The fees for initial gum therapy are related to the stage of the gum disease. They range from \$300 to \$900. The initial therapy includes the:

- Periodontal Assessment
- Necessary radiographs-rays)
- OHI, scaling and root planing
- Re-evaluation

The more severe the problem the greater is the cost to treat

If you have a dental benefits plan you may have coverage for some of the treatment. If you are concerned we can pre-authorize

Periodontal Surgery/Referral to Dr. D.C. Scott

Periodontal surgery may be necessary depending on the severity or stage of your gum disease. Sometimes non-surgical treatment alone cannot adequately bring your damaged tissue back to health. This may be decided initially or at the re-evaluation appointment.

You may need one or more of the following four types of surgical treatments:

Pocket Reduction Procedures

This involves the elevation of the gums, smoothing out any irregularities in the bone, making sure that the root surfaces are clean and then replacing the gum tissues at a level closer to the bone. Placing the gum at this position does eliminate the pockets but does expose more tooth surface. This creates an environment that can be better maintained by you and our dental hygienists. However, every effort is made to not create gum recession in aesthetically sensitive areas.

Regenerative Procedures

These surgical procedures are designed to "regenerate" previously lost bone tissue. These techniques utilize barriers, which are inserted over the bony defects to isolate the

slower healing bone from the more rapidly growing gum tissue. Some of these barriers are bio-absorbable and some require removal.

Crown Lengthening

You may have a tooth that is decayed or broken below the gum line. To properly restore this tooth with a crown or filling, you will need periodontal surgery to adjust the gum level and expose more of the tooth.

Gum Grafts

This is performed in cases where the gum-line has receded excessively. Gum tissue does not naturally grow back once it has receded, so many people have gum grafts in order to prevent further recession, reduce tooth sensitivity, and improve the smile.

Referral To Dr. D.C. Scott

If you have advanced gum disease or require any of these procedures to improve periodontal health you will be referred to Dr. Don C. Scott a periodontist on Main Street West here in town. A report with all the necessary information will be prepared

for you and sent to him.

His office will contact you to set up an appointment for a consultation. At the consultation he will do an examination, necessary radiographs, diagnosis and give his treatment recommendations. An estimate of treatment costs will be given to you and if you have benefits will be sent to your insurance company.

All periodontal surgical procedures are performed in his office. They are generally minor and are done using local anesthetic. Procedure times can vary from one to two hours. Post-surgical pain is well controlled with pain-killers and healing is relatively uneventful. Very rarely would you have to miss work because you had gum surgery.

After treatment is completed you will be sent back to our office for regular cleaning visits. However in more advanced cases we will recommend you have your maintenance visits completed in his office so Dr. Scott is able to monitor your progress.

Your daily home care is the most important factor in controlling your gum disease.

Home Care Routine

Plaque removal

Bacterial Plaque, food and debris must be gently removed from your teeth daily (Please follow the brushing, floss and proxybrush instructions to the right).

- ❑ **Brush thoroughly, twice daily.** We recommend you use a power-assisted brush like the **Braun Oral B 3D Excel**. Don't rush. To cleaning all areas, brushing should normally take two to three minutes each time.
- ❑ **Clean between your teeth (interproximal) once daily with the Floss or Proxybrush.** Generally if spaces between the teeth are large the proxybrush is preferred over floss.
- ❑ **Use Sulcabrush** to help you reach areas your toothbrush cannot like behind last tooth or at the gumline

Mouth rinses

Periodontal disease exposes the roots of your teeth making your teeth more sensitive and more susceptible to root decay. Mouth rinses will help decrease or prevent root decay and gingivitis.

- ❑ Rinse with Fluorinse daily fluoride mouthwash daily - Fluorinse has a .05% strength and is blue with an ice mint flavor. Follow the directions on the bottle carefully before using. Fluoride strengthens root surfaces making them less sensitive and more resistant to decay
- ❑ Rinse with Peridex® once daily for two weeks after your cleaning appointments which should be every 3 to 4 months. Please read the label carefully before using. Peridex is a .012% chlorhexidine, antibacterial rinse that will decrease the level of harmful bacteria to more normal levels. Peridex is the only mouthwash effective against the bacteria that causes decay and gingivitis.

Dietary Modification

The following changes to your dietary habits will further reduced or prevent decay

- ❑ **Minimize sweets between meals**
It is not the quantity but the frequency of sugar intake that causes decay. Sugar with meals is okay. Avoid sugar between meals
- ❑ **Beware of the sugar content in certain snack and processed foods - e.g. chips, cookies, ice cream, fruit juices - look at the labeling**
- ❑ **Watch the sugars in tea, coffee, sodas. Use sugar substitutes (sugar free sweeteners)**
- ❑ **Minimize use of lozenges, hard candy or strong breath mints with sugar between meals (especially if you have dry mouth)**
- ❑ **Chew Xylitol sweetened chewing gum after every meal for about 20 minutes.** - Some examples are: **Trident Advantage®, Arm and hammer Dental Care Gum®, and Colgate Dental Gum.**

Brushing

Whether you use a regular brush or a power brush as recommended you must:

Start cleaning one area of the mouth and move to next area until the whole mouth has been cleaned.



Be sure you have brushed

- the outer tooth surfaces
- all of the inner tooth surfaces next to the tongue.

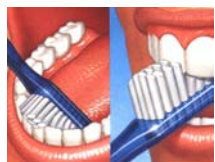


- behind the front teeth.

- brush the biting surface of the teeth



Use a fluoride-containing toothpaste- Anyone endorsed by the Canadian Dental Association will suffice. **A pea-sized drop is all you need.**



Use a gentle pressure- The plaque you need to clean and remove every day is the consistency of butter and doesn't require a heavy hand to remove. A heavy hand is not only unnecessary but can be detrimental

to the teeth and gums.

Brush the tongue from back to front to remove odor-producing bacteria

If you choose to use a power-assisted brush
Guide the brushhead slowly from tooth to tooth. Hold the brushhead in place for a few seconds before moving on to the next tooth. Do not press hard or scrub, simply let the brush do all the work.

If you choose to use a regular brush use a soft or ultra soft toothbrush. Any simple regular-sized toothbrush is adequate. Place bristles along the gumline at a straight to a 45-degree angle. Bristles should contact both the tooth surface and the gumline. Brush only two to three teeth at a time **using a short vertical, up and down motion.**

Flossing

Use any floss you feel comfortable using.

Our preference is one that is non-waxed to lightly waxed.

It is also your choice whether you use a regular sized or a tape type floss

Break off about 18 inches of floss and wind most of it around one of your middle fingers. Wind the remaining floss around the same finger of the opposite hand. This finger will take up the floss as it becomes dirty. Hold the floss tightly between your thumbs and fore-fingers Guide the floss between your teeth using a gentle rubbing motion. Never snap the floss into the gums.

Use an up and down motion

Using an in and out sawing motion accomplishes



nothing and can injure your teeth and gums When the floss reaches the gum line, curve it into a C shape against one tooth. Gently slide it into the space between the gum and the tooth.. Hold the floss tightly against the tooth. Gently rub the side of the tooth, moving the floss away from the gum with up and down motions.



Repeat this method on the rest of your teeth. Don't forget the back side of your last tooth.



Choose a time and place

You don't always have to do it at night before you go to bed- Choose a time when you are not tired and will do a good job.



You don't have to do it right in front of the bathroom mirror-Choose a place where you are more comfortable.

Proxybrush Instructions



Moisten the brush and insert it into the embrasure spaces that exist between each tooth and its neighbor. Move the brush in and out several times in each embrasure space.

Make sure to clean the brush by holding it under running water during each use. This is necessary in order to remove debris and plaque that may be deposited during the mechanical cleansing of the spaces.

Clean the brush thoroughly after use and allow it to air dry. The brush may be used several times before it is necessary to replace it. Discard the brush when the filaments become loose or deformed.

Sulcabrush Instructions



Place the end marked outside on the edge of the gumline. Continuously follow the wavy gumline, adding a circular motion between the teeth.

Continue to apply firm pressure while following the wavy gumline on the inside of the mouth, using the end marked inside. The inside angle is also very effective for reaching the gums behind the back teeth.



Long Term Management of Periodontal Disease

From the Office of Dr. Michael J. Guy 511A Lakeshore Drive, North Bay ON, P1A 2E3

Gum disease cannot be treated and cured, but must be managed and controlled long-term.

Dental Management

Regular Maintenance Visits

The maintenance phase is crucial to the continued success of the treatment. This is because periodontal disease is a chronic, ongoing condition. Studies show that the destructive bacteria will reform after three months and will continue the disease process.

Please keep regular periodontal maintenance visits at intervals of every 3 to 4 months for:

- ✓ close monitoring of your periodontal status so that changes can be identified and treated as early as possible.
- ✓ professional scaling of the teeth
- ✓ appropriate x-rays
- ✓ Early detection and removal of decay
- ✓ The professional fluoride treatments

Continued Home Care

Your daily home care is one of the most important factors in controlling your gum disease. Please continue to follow Home care instructions on pages 4 and 5

Health and Lifestyle Changes

Improving your general health through health living will improve your ability to fight this infection. Follow the recommendations for healthy living as recommended by the Heart and Stroke Foundation of Canada (www.2.heartandstroke.ca)

Quit smoking

This is a very important prevention measure for your teeth and gums! They have many new ways to help you stop smoking. If you need some assistance, we can help you.

- We have several information and educational booklets that can help you quit,
- We can direct you to others that can help.
- We can prescribe a Zyban program- Zyban is a non-nicotine medicine that reduces your urge for nicotine. It is not for everyone and side effects

should be discussed before getting a prescription

There are several good web resources

- Living Smoke Free- www.hc-sc.gc.ca/hppb/cessation
- Physicians for a Smoke-Free Canada - <http://www.smoke-free.ca/default.htm>
- Quit4Life - A Total Web Sensation- www.quit4life.com/html
- Go smokefree! - Health Canada Tobacco Control Program // www.hc-sc.gc.ca/hecs-sesc/tobacco
- How to Quit Smoking, FOR GOOD! A Complete Guide to Smoking Cessation - www.helioshealth.com/quit_smoking

Eat Well

Your body needs a balance of proper nutrients to fight infection.

- We recommend you follow the Canada Food Guide for healthy eating.
- **Eat in moderation** - eat neither too much nor too little of any one food or nutrient. Eating too much translates into excessive caloric intake and excessive nutrient intake. Eating too little leads to inadequate body mass and nutrient deficiencies.
- **Eat a variety** - consuming a wide variety of foods within each of the four basic food categories. One should eat different types of grains, fruits, vegetables, dairy, and meats at different meals.

There are several good web resources

- Canada Food Guide- www.hc-sc.gc.ca/hpfb-dgpsa/onpp-bppn/food_guide_rainbow_e.html
- Leslie Beck RD- www.lesliebeck.com
- Health Eating- www.healthyeating.net

Supplement Your Diet With Vitamins

Much research has been done on which vitamins and nutrients are essential for fighting gum disease. The following is a list of some of the most important ones. When selecting a supplement, be sure to find one that has proper RDI's of the nutrients.

- ☐ Omega-3 Fats
- ☐ Vitamin E
- ☐ Coenzyme Q10 (CoQ10)
- ☐ Vitamin C
- ☐ Others: (Vitamins A, beta carotene, B vitamins, Magnesium, selenium, and zinc)

Reduce Stress

Most people's lives are too hectic. In general people need to slow down and simplify their life. This will not happen by accident. I recommend you make an active effort to live a balanced life. There are many resources that can help you achieve this. Most importantly, put the things that matter most in your life first (family, friends, health, etc). You will find once you do this you will probably be less stressed, more fulfilled and achieve much more.

Exercise

The benefits of regular exercise are well known. Exercise stimulates your heart and lungs, helps relieve stress, helps you to relax and helps you control your weight by burning calories and speeding up your metabolism. Before starting an exercise program we suggest you view Canada's Physical Activity guide (Online at www.hc-sc.gc.ca/hppb/paguide). There are three types of activities you need to do to keep your body healthy:

- **Aerobic** = Activities that raise your pulse rate and make you feel warm and slightly out of breath.
 - **Flexibility** = Activities that make you reach, bend and stretch.
 - **Strength** = Activities that build stronger muscles and bones.
- Do a variety from each group to get the most health benefits. Enjoy 30-60 minutes of moderate aerobic activity most days of the week, preferably every day. One of the best ways to build regular physical activity into your life. is to make exercise fun. Choosing activities you like to do.