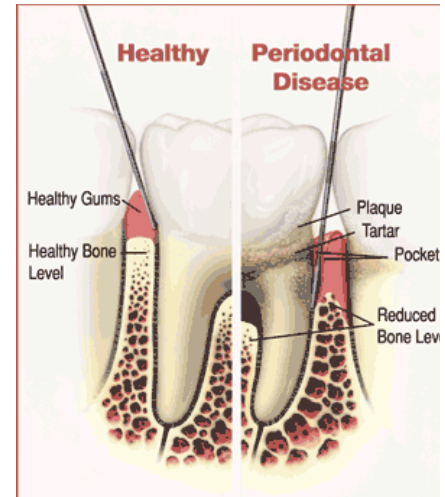


Understanding Periodontal Gum Therapy

You have been diagnosed with active periodontal disease and it's very important for you to understand the disease process so you can take steps to controlling it. Controlling this disease is a tag-team effort that will involve your behaviors at home regarding how you care for your gums and teeth, as well as seeing your dentist regularly for professional management.

Basics of Periodontal Disease

Periodontal disease is a disease of 'infection'. The disease involves plaques and bacteria deep under your gums and your body's response to those germs. The resultant battle between these germs / bacteria and your body's immune system results in destruction of the teeth's surrounding tissues: the bone and gums that support and keep your teeth in place. If left untreated the result is bone loss, 'long teeth' with exposed roots, loose teeth, and ultimately tooth loss. Think of a fencepost in the dirt... when the fencepost is buried deep, it's stable... if you barely bury the end of the fencepost, the fencepost can tip over and become loose a lot easier. That's periodontal disease in a nutshell.



Treatments for Periodontal Disease

There are a number of treatments to deal with this problem and many can be completed in our office. Sometimes the recommended treatments require referral to a specialist called a "periodontist". These doctors specialize in treatment of the gums and bones supporting the teeth. Treatments generally include various intensities of cleanings of your teeth above and below your gums. All of these treatments affect your oral health directly and oftentimes affect your general health as well. Modern research studies have linked periodontal disease with heart disease, low birth weight babies, and diabetes.

Above the Gums vs. Below the Gums

What you see when you open your mouth are your teeth and maybe some pink stuff: your gums and tongue and so forth. What you may not understand is that your gums are like socks around your teeth. Patients often think the gums are 'attached' to their teeth and that is partially true. But there is a portion of the gums nearest the top of the tooth that is NOT attached to the tooth. The space this creates is called a pocket.

Understanding "Pockets"

Pockets are important and this is why your dentist and hygienists care so much about them and spend a lot of time measuring them.

Here is why pockets are important:

- * Toothbrushes do not go under the gums.
- * Floss only goes under the gums about 2-3 mm.

A "Pocket" is the place where your floss can reach. It is the cuff of gums that wraps around your tooth. It's the top of the sock describe in the prior paragraph's analogy. This cuff needs to be cleaned... that's what flossing does. When you don't floss, this space can become contaminated with plaque/bacteria. It can harden into buildup called tarter or calculus if not cleaned out regularly with flossing.



Have you ever seen a boat dock post when the tide goes out? If you have perio disease, this is what your teeth roots look like under your gums. These 'barnacles' will not come off with floss once they have hardened. These 'barnacles' also are sharp and your tissues react to them as if they are splinters. How does your finger feel when you have a splinter and you don't remove it? Not very good. That's why your gums hurt when you floss. The same reasons apply. The teeth need to have the 'barnacles' scraped off; the 'splinters' removed. Once achieved, your inflamed gums have an opportunity to settle down and flossing should not hurt as much. This is what initial therapy called 'scaling and root planing' attempts to achieve.

So What Are 'Pockets' All About?

As described earlier, pockets are the cuffs of gums that surround your teeth as the teeth erupt from your jawbones. The deeper the pockets, the less healthy your gums and jawbone are. Normal numbers for 'pocket depth' are 2-4 mm. Pocket depths of 5 mm and larger are a sign of periodontal disease. Even pockets of 4 mm are border-line if the tissues bleed badly with gentle manipulation.

Bleeding Gums - Do Healthy Tissues Bleed?

Another major disease predictor is 'bleeding gums'. If your gums bleed randomly or upon provocation with floss or your toothbrush, then you have either gingivitis or periodontal disease. The two dental diseases are related. Gingivitis is considered a precursor to Periodontitis. If the gums are bleeding, something is making them bleed. Ask yourself this question "**Do healthy tissues bleed?**" The answer is no. Most healthy tissues do not bleed. If your gums bleed when you floss, it is not because you are doing it too hard, it is because there is something stuck to the side of the tooth that has inflamed the gum tissues and made them swollen, and fragile. That's why they bleed. Get the splinter out and the bleeding will stop...even if you still floss too hard.

Many Factors Impact Your Risk For Periodontal Problems:

- Quality of home care habits (brushing and flossing)
- Frequency of professional dental cleaning visits
- Your overall health status
- Your status with tobacco use and smoking
- Your nutrition levels and stress coping skills
- Your personal genetics

So How Do I Know If I Have Healthy Gums And Bones? Does 'Healthy' Need Treatment?

Your dentist will tell you and so will your hygienist. They are trained to diagnose and treat these types of problems. If your gums are healthy, so is your bone underneath. Healthy gums are not sensitive and do not bleed. Your pockets will be minimal. When patients have healthy gums, the treatment you receive when you get a cleaning focuses on the tooth ABOVE the gums and cleans off stains and above the gums tarter buildup. This treatment is called a 'prophy' or 'simple cleaning' and is generally recommended to have twice a year or every 6 months.



What About When My Gums And Bones Aren't So Healthy and I Have Bad Pockets?

Like the rest of your body, your mouth has zero tolerance for infections. When you have active periodontal disease, the infection occurs in your gum pockets. These infections are mostly painless unless you try to floss. Then it hurts and most patients simply stop flossing and the discomfort goes away. But the 'splinters' are still under the gums. The tissues are inflamed and the condition will worsen if untreated.

Initial Periodontal Therapy (Scaling and Root Planing)

When you start periodontal therapy, we will treat your present infection and attempt to stabilize further inflammatory breakdown of your gums and bones that support your teeth. Our long term goal is to promote healing and stabilize your oral health.

The deep cleaning process is a treatment that requires anesthesia because the tissues are so inflamed. This treatment involves cleaning off the sides of the roots under the gums. Dr. Argersinger may have shown in the radiographs what the 'splinters' or 'barnacles' look like. This is the hardened plaque/bacteria that is the cause of perio problems. This has to be cleaned off and that is what a 'scaling and root planing' attempts to achieve.

After Completing The 'Deep Cleaning Process', It Is Important To Understand That You Will Require Different Long Term Management Than Patients That Have Healthy Gums.

People with healthy gums and bone only need 'above the gums cleanings'. They receive the simple cleanings twice a year. Folks that went through a 'deep cleanings' require more careful and controlled cleanings. These cleanings are called 'perio maintenance' instead of 'cleanings'.

What Is The Difference Between 'Simple Cleanings' And 'Perio Maintenance'?

The main difference is that simple cleanings are supposed to clean teeth ABOVE the gums. 'Perio maintenance' appointments have to deal with the pockets! Remember that the teeth and pockets have been cleaned and that floss doesn't clean deeper than 3-4 mm under the gums. But as a 'perio maintenance' patient, you need a professional to clean those deep pockets that are deeper than floss can reach. Thus the patient's perio therapy (the results of deep cleaning) needs to be maintained through careful under-the-gums cleaning. If these 'perio maintenance' appointments aren't completed regularly, and the patient's habits regarding brushing and flossing don't improve, then the periodontal disease will come back and continue to cause deterioration to the bone and gums.

This Document Is Just The Basics Simplified

It is important to understand that this is a simple overview of a complex disease process. Please consult with Dr. Argersinger or the periodontist he referred you to for further therapy options for improving your periodontal condition.

Dr. Argersinger and DurhamDDS

Dr. Argersinger owns and operates DurhamDDS, a family dental practice in Durham, NC, who offers dental implants along with periodontal therapy and other non-invasive treatments for gum disease. As such, he regularly counsels every patient at his dental office to accept two simple keys to healthy oral status:

Key #1 -- The first key to maintaining excellent periodontal health is to **have teeth professionally cleaned at regular intervals** as defined by your dentist.

Key #2 -- The second key is to **adopt your role as 'co-therapist'** for your teeth and treat your teeth and gums every day with proper and effective oral home care: Brushing and flossing.

People who do both of the keys above have a much higher success rate with maintaining stable periodontal health than do people who only adopt one of the keys. Because periodontal disease has no cure, it is crucial to adopt both keys for success in your therapy.

If you have any questions or problems following today's appointment you can call Dr. Argersinger at the office at (919)286-0779.