



Perio 101: Top 10 Most Frequently Asked Questions

1. What is a periodontal check-up?

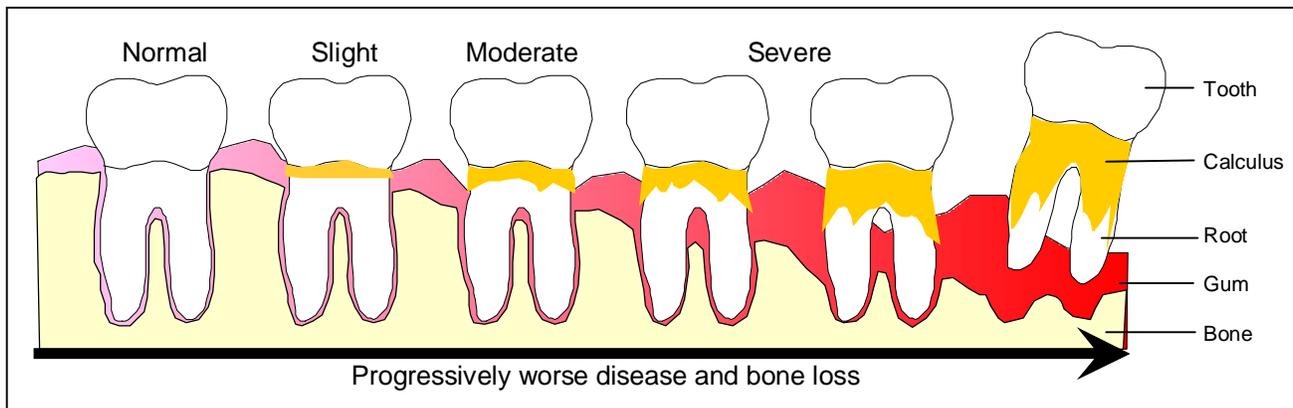
- In a periodontal exam, the tissues (gum and bone) that are *around* the teeth are checked to see if they have been damaged by disease and infection. These tissues are important for supporting the teeth, and damage to them can result in pain, bleeding, and tooth loss.
- The word “periodontal” comes from “perio-“ (which means around), and “-dental” (meaning tooth). Teeth are anchored to your jaw by the periodontal ligament.

2. What is periodontal disease?

- Periodontal disease is a chronic bacterial infection that destroys the tissues (periodontal ligament, jaw bone and gums) around the teeth, leading to loosening and loss of teeth.
- Periodontal disease is called “periodontitis”, inflammation of the periodontal ligament.

3. What causes periodontal disease?

- Periodontal disease is caused by bacteria and calculus (also known as “tartar”, or hard deposits of plaque debris) that build up under the gums, causing infection of the tissues.
- The infection causes the gums to separate from the teeth and form “pockets” between the roots of the teeth and the gums. These pockets trap food and are difficult to clean.
- As the disease progresses, pockets deepen as more gum tissue and bone are destroyed.
- Deep pockets allow even more bacteria to collect, so the disease progressively worsens.



4. Are there other causes of periodontal disease?

- Smoking is one of the biggest risk factors for periodontal disease. It decreases healing, worsens the environment in the pocket, and makes bacteria more likely to destroy tissue.
- Systemic diseases such as diabetes, HIV/AIDS and cancer can also worsen periodontitis.
- Pregnancy / hormonal imbalances, stress and poor nutrition also may increase the risk.
- Genetics – some people are genetically more susceptible to periodontal disease.

5. Can periodontal disease affect my overall health?

- Yes. There is increasing evidence that poor periodontal health can increase the risk for stroke, heart disease and having premature low birth-weight babies. It can also worsen sugar control in diabetics. The discomfort and loss of teeth due to gum disease can increase stress, result in poorer nutrition, and lower life quality... affecting overall health.

6. What are the symptoms of periodontal disease?

- You may notice bleeding when brushing or flossing, pus, sensitivity, swollen or tender gums, bad breath or a bad taste in your mouth. Shifting or loosening of teeth may occur.
- There can be recession of the gums or longer teeth (more yellow tooth root showing), and spaces that form between your teeth near the gums (“embrasures”) may get larger.
- There are often no signs or symptoms of periodontal disease. It can silently and slowly destroy your jaw bone over many years. You might start noticing it only after it’s too late.

7. How do you diagnose periodontal disease?

- Dr. Braun will use a special probe to measure the depth of the pockets around your teeth.
- Healthy pockets are usually between 2 to 4mm in depth and should not bleed or hurt.
- Several other measurements will be taken including the health of the remaining gums, looseness of teeth (“mobility”), root exposure (“recession”), how your teeth bite, etc.
- X-rays can reveal the amount of bone loss around your teeth and will be reviewed.
- Special x-rays are needed if your existing xrays are old or not showing all of the teeth.

8. What if I am diagnosed with having gum disease?

- First of all, don’t panic! Knowing the current condition of your gums is an important first step in determining what treatment is needed to prevent further disease progression.
- Dr. Braun will formulate a customized plan that fits with your current level of disease (diagnosis) and takes into account your future risk of disease progression (prognosis).
- The plan will also take into consideration your medical history, risk factors, overall treatment goals, financial concerns and schedule. The best plan should also be realistic.
- Although we may not be able to reverse the damage caused by the disease, treatment together with regular maintenance should minimize any further damage to your teeth.

9. What kinds of treatments are there for periodontal disease?

- Scaling and Root Planing – This is the first approach to treating all gum disease, and is part of your regular hygiene visit. The term refers to removal of the tough scaly deposits of calculus, plaque and bacteria on the teeth and smoothing of the roots. This helps to reduce irritating substances around your teeth that would normally lead to bone loss.
- Periodontal Flap Debridement – Areas with pocket depths at or above 5mm are too deep for scaling and root planing to reach effectively. In these areas, Dr. Braun needs to gently reflect the gum tissue to improve access for cleaning and reshaping the gum and bone. The area will be totally numb so you will be comfortable throughout the entire procedure.
- Guided Tissue Regeneration – It is sometimes possible to add a bone graft around a diseased tooth and actually regrow the bone that was lost. The success of this procedure depends on several factors which Dr. Braun will consider before suggesting this option.
- Antibiotics – In certain cases, the *additional* use of either local or systemic antibiotics may help to improve your response to treatment by eliminating resistant bacterial strains.

10. What other treatments could my periodontist perform?

- Implants – These life-long tooth replacements are as strong as your natural teeth and have revolutionized modern dentistry. Dr. Braun will be happy to discuss these with you.
- Gum Grafting – Recession of the gum exposes your tooth roots, leading to unsightly and sensitive teeth. Procedures exist which allow Dr. Braun to regrow the gum on the tooth.
- Crown-lengthening – If your tooth has a cavity under the gum, your dentist cannot reach it to place a filling or crown. To fix this, Dr. Braun will have to expose more of your tooth.
- Bone Graft – This procedure increases the amount of bone available to place an implant.
- Biopsy – Unusual tissue can be removed and sent to a special pathology lab to be tested.
- Frenectomy – Extra “webbed” gum tissue in the mouth may need to be loosened to increase the mobility of your tongue or cheek, and reduce the risk of further recession.
- And much much more!

*Feel free to ask Dr. Braun any other questions you might have. We will be happy to answer them for you. Please also see the **SERVICES** page on our website www.braunperio.com for more detailed information.*