

# Keeping your gums, mouth and teeth healthy



Diabetes  
New Zealand



Diabetes increases your chance of developing gum disease. What is gum disease and how can you keep your gums, mouth and teeth healthy?

**John Boyens**, a periodontist, provides some answers.

## What is a periodontist?

A periodontist is a dentist who specialises in the prevention, diagnosis and treatment of periodontal disease and in the placement of dental implants. Periodontists receive extensive training in these areas, including three additional years of education beyond dental school.

Periodontists use the latest knowledge for diagnosing and treating periodontal disease. They can also perform cosmetic periodontal procedures to help you achieve the smile you desire.

## What is periodontitis (gum disease)?

Periodontal (gum) diseases, including **gingivitis** and **periodontitis**, are serious infections that can lead to tooth loss if left untreated. Periodontal literally means 'around the tooth'.

Periodontal disease is a chronic bacterial infection that affects the gums and bone supporting the teeth.

The bacteria that cause periodontal disease are present in the mouth all the time and when they are allowed to grow on the teeth around the gum margin, they form a soft adherent film called **plaque**. It is this film of bacteria we try to remove when we brush and floss our teeth.

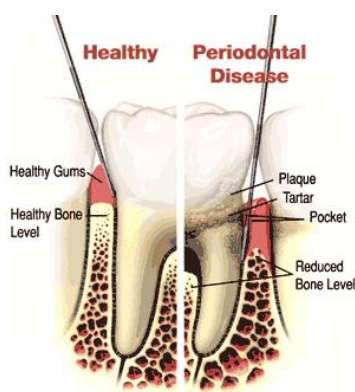


Image: American Academy of Periodontology

## What are the symptoms of gum disease?

In the mildest form of the disease, gingivitis, the gums redden, swell and bleed easily. There is usually little or no discomfort. Gingivitis is mostly caused by inadequate oral hygiene.

Gingivitis is reversible with professional treatment and good oral home care.

Untreated gingivitis can advance to periodontitis. With time, plaque can spread and grow below the gum line. Toxins produced by the bacteria in plaque irritate the gums.

The toxins stimulate a chronic inflammatory response in which the body in essence turns on itself, and the tissues and bone that support the teeth are broken down and destroyed.

Gums separate from the teeth, forming pockets (spaces between the teeth and gums) that become infected. As the disease progresses, the pockets deepen and more gum tissue and bone are destroyed.

Teeth can then become loose or drift away from their original position. Eventually, teeth may have to be removed.

## Who is at risk of gum disease?

Everybody is at risk of gingivitis - the first step on the way to destructive periodontal disease. If tooth cleaning is incomplete and plaque is allowed to build up on the teeth around the gum margin, then gingivitis will develop.

However, only about 30% of those with gingivitis will go on to develop periodontitis. Those with other diseases that affect the immune system - such as diabetes - tend to be more susceptible to the destructive form of gum disease called periodontitis.

## How is gum disease treated?

Treatment of periodontal disease is a team effort with both the patient and the periodontist working together to achieve the ultimate result. The cause of periodontal disease is the bacteria that are allowed to grow on the tooth surface around the gum margin. The treatment of periodontal disease involves the removal of these bacterial deposits and the hard tartar deposits that sometimes form alongside the plaque.

The procedure of root surface debridement using hand and ultrasonic scaling instruments, often accompanied by the use of local anaesthesia to make the gum and teeth numb, is the treatment of choice for initial therapy. Sometimes more advanced treatments are required to gain access to deeper gum pockets, or to regenerate lost periodontal tissues.

The patient's role is to work towards achieving excellent plaque control at home. This involves the correct use of either a manual or an electric toothbrush, and the daily use of floss or interdental brushes to remove the plaque that the toothbrush cannot reach.

## How can people with diabetes prevent gum disease?

Prevention of gum disease primarily requires control of the bacteria that constantly grow on the tooth surface. If you have diabetes, you can also help to prevent periodontitis by managing your blood glucose levels. There is evidence that good blood glucose control leads to less periodontal destruction than when control is poor.

Healthy food, careful use of diabetes medication, and physical activity as well as excellent plaque control at home will all help in the fight against gum disease. Regular visits to your periodontist, dentist or dental hygienist are also an important part of a preventive programme.

If you are unsure about your periodontal state, ask your dental health care provider for advice about your situation, and what steps you could take to work towards achieving good periodontal health. The American Academy of Periodontology website [www.perio.org](http://www.perio.org) is also a good source of information.

*John is a periodontist living in Dunedin who spends part of his week in private specialist practice dealing with the management of periodontal diseases, aesthetic periodontal procedures, and the placement of dental implants for the replacement of lost teeth. The other part of his week is spent in a teaching role at the School of Dentistry, University of Otago.*

## Diabetes and oral health facts

- Gum disease is more common in people with diabetes than in people without diabetes
- Among young adults, those with diabetes have about twice the risk of those without diabetes
- Almost 30% of people with diabetes have severe gum disease with loss of attachment of the gums to the teeth
- People with diabetes who manage their blood glucose levels tend to have no more gum disease than those without diabetes and respond better to treatment
- People with diabetes who do not manage their blood glucose levels lose more teeth and have more oral complications than those without diabetes.

## Take the right steps to healthy gums, mouth and teeth

- Manage your blood glucose levels
- Eat healthy food
- Do at least 30 minutes of physical activity each day
- Brush your teeth twice a day and floss every day
- Be smokefree
- Check your mouth regularly for any problems - bleeding gums, dryness, soreness, white patches, or a bad taste in the mouth
- Visit your dentist at least twice a year
- Visit your dentist if you have any problems with your gums, mouth or teeth.

## Your checklist for visiting your dentist

- Tell your dentist you have diabetes, what medicines you take, and any problems you have with managing your blood glucose levels.
- Eat before you see your dentist. The best time for dental work is when your blood glucose level is in a normal range.
- If you take insulin, a morning visit after a normal breakfast is best.
- Take your usual medicines before your visit, unless your dentist or doctor tells you to change your dose for dental surgery.
- Stick to your normal meals after dental work. If you can't chew well, plan how to get the food you need. You may need to eat soft or liquid foods.
- If your diabetes is poorly managed, talk to your dentist and doctor about options for dental treatment.