

Treatment

- Closely monitor your blood glucose levels within an A1C test of less than 6.5%.
- Be proactive on regular 6 month dental check ups, and cleanings.
- Brush your teeth twice a day, and use interdental aids such as floss.
- Use anti-plaque rinses to prevent plaque build up.
- Drink fluoridated water to prevent tooth decay.

Conclusion

- There is a strong relationship between diabetes and periodontal disease.
- Oral hygiene services provided by dental hygienist results in reduction of periodontal disease symptoms.
- The Initial Screening Questionnaire helps to identify patients at moderate and high risk for diabetes and perform (or refer for) diabetes diagnostic A1C testing.

Role of Dental Hygienist



- To evaluate the patient during assessment.
- To educate the patient on what diabetes is and how it affects their periodontal health.
- To teach proper home care methods to patients who have diabetes and periodontitis.
- To schedule regular check ups more often.

Bibliography

Information:

- <https://www.scirp.org/journal/PaperInformation.aspx?PaperID=63344>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3467897/>
- <http://www.diabetes.org/>

Pictures:

- <https://www.adwdiabetes.com/articles/connection-diabetes-gum-disease>
- <http://www.healthygumsmontana.com/tag/periodontal-disease/>
- <https://www.thediabetescouncil.com/can-diabetes-affect-your-teeth-and-gums/>

Diabetes and Periodontal Disease



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What is Diabetes mellitus?

- Diabetes mellitus is a systemic disease characterized by increased blood glucose levels from defects of insulin production.

Objective


- Over 30 million Americans have diabetes in the U.S, 7.2 million of those people live undiagnosed.
- Diabetes mellitus is something that can be easily screened in a dental office.

People with Type 1/2 & pre-diabetes should carefully monitor oral health



2-3X


Diabetics with poorly controlled blood sugar levels are **2 to 3 times** more likely to develop gum disease.



High glucose levels:


- Reduce blood supply to gums and increase risk of infection
- Decrease saliva production
- Gather sugar in gingival fluid, leading to cavities

Some studies suggest it's more of a cycle

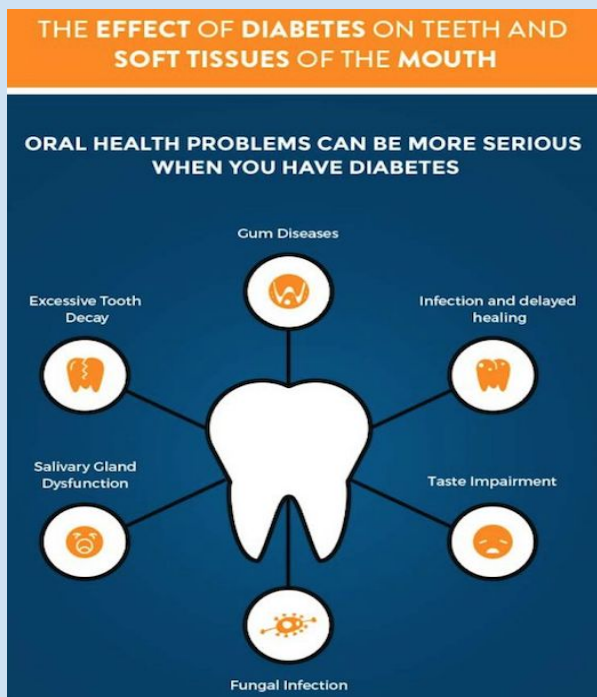


High glucose can lead to gum infection/disease

← →



Infection/disease elevates glucose levels



Causes of Periodontal disease in patients with Diabetes

- Patients with diabetes have higher number of periodontal bacteria.
- Increased glucose levels in cervical fluid promotes growth of microbes.
- Poor vascularity
- Blood glucose levels above 6.5%



Symptoms of Periodontal disease in patients with Diabetes

- Oral bleeding when brushing or eating
- Persistent bad breath
- Cortical bone loss
- Receding gums
- Slower wound healing

The Initial Screening Questionnaire *	Yes	No
Do you have any biologic family member with a history of DM?		
Do you have a history or take medication for high BP?		
Do you have, or take medications for, high cholesterol or abnormal good/bad cholesterol ratio?		
Do you experience unexplainable hunger, thirst OR frequent urination?		
Do you experience tingling, pain or numbness in your hands or feet?		
Have you had skin infections, foot ulcers, velvety skin or neck folds?		
Do your gums bleed when you brush or floss?		

* if you answered yes two or more times you should talk to your primary physician.