Section 3: Consequences of periodontitis

Contents

• 3.1 Bleeding gums 3
• 3.2 Bone loss, gum pockets, and tooth loss 4
• 3.3 General health 6
• 3.4 Problems chewing and after eating 7
• 3.5 Problems speaking 8
• 3.6 Bad breath 9
• 3.7 Problems with appearance (esthetics) 10
Legal notice

The website www.periodontal-health.com is an information platform about the causes, consequences, diagnosis, treatment, and prevention of periodontitis. The contents were created in media dissertations for a doctorate at the University of Bern.

Media dissertations under the supervision of
PD Dr. Christoph A. Ramseier
MAS Periodontology SSO, EFP
Periodontology Clinic, Dental Clinics of the University of Bern

Content created by
Dr. Zoe Wojahn, MDM
PD Dr. Christoph A. Ramseier, MAS

Declaration of no-conflict-of-interest
The production of this website and its hosting was and is being funded by the lead author. The translation of this website into the English language was funded by the European Federation of Periodontology (EFP). The production of the images was supported by the School of Dental Medicine of the University of Bern.

Illustrations
Bernadette Rawyler
Scientific Illustrator
Department of Multimedia, Dental Clinics of the University of Bern

Correspondence address
PD Dr. med. dent. Christoph A. Ramseier, MAS
Dental Clinics of the University of Bern
Periodontology Clinic
Freiburgstrasse 7
CH-3010 Bern

Tel. +41 31 632 25 89
E-Mail: christoph.ramseier@zmk.unibe.ch

Creative Commons Licence:
Attribution-NonCommercial-ShareAlike 4.0 International (CC BY-NC-SA 4.0)
https://creativecommons.org/licenses/by-nc-sa/4.0/deed.en
3.1 Bleeding gums

The first signs of inflamed gums are redness and slight swelling at the gum line and possibly bleeding when brushing the teeth.

The inflammation caused at the gum line by the dental plaque can make the gums appear red to dark red, as the inflammation widens the blood vessels in the connective tissue. The gum can be swollen and bleed at the slightest contact, for example when brushing the teeth or using dental floss.

However, if the teeth are cleaned again regularly using good oral hygiene at home, these signs of inflammation or the former gingivitis go away again within a few days.

If gum bleeding continues to occur despite good oral hygiene, the gums should be examined in a dental practice for further investigation.
3.2 Bone loss, gum pockets, and tooth loss

The bacterial inflammation periodontitis causes the anchoring structure of the teeth to break down. This results in the formation of gum pockets and can lead to tooth loss.

As a result of the inflammation (periodontitis), the anchoring fibers and the jawbone break down. In place of the healthy fibers, what is called a gum pocket is formed along the tooth. The surface of the root located there is coated with a bacterial film (plaque and tartar).

The breakdown of the anchoring structures can increase tooth mobility. The teeth, which are normally firmly anchored in the bone, lose stability and become loose.

If the disease is not detected and treated, the breakdown can continue until the teeth can no longer be used for chewing and have to be pulled (extracted).
Premolar occlusion

In this case of already advanced periodontitis, in addition to pulling the wisdom teeth, pulling the other molars as well may be considered. Extracting a tooth with periodontitis also eliminates its gum pockets. When all molars have been extracted and the person can chew only with the remaining premolars – two on the left and two on the right side – this is termed premolar occlusion. This solution can be considered for financial reasons to reduce treatment costs.

If only the wisdom teeth and the second molars have been extracted and the first molars were not extracted, the term used is reduction of the dental arch.

Depending on the severity of periodontitis, these two treatment options will also be considered in addition to professional teeth cleaning.

References or external links

3.3 General health

In addition to direct consequences in the mouth, periodontitis also has an impact on systemic diseases such as diabetes or cardiovascular disease.

Persons with periodontitis are at a higher risk of developing diabetes. Fortunately, gum treatment has a positive effect on the treatment of diabetes. This makes it indispensable for persons with periodontitis to be tested for diabetes by their doctor.

Persons with periodontitis also have a greater tendency to develop cardiovascular problems including a greater risk of heart attack.

Pregnant women who had periodontitis during pregnancy have more premature babies and are at a higher risk for babies with low birth weight and preeclampsia.
3.4 Problems chewing and after eating

Teeth that have become very loose due to periodontitis can cause problems chewing; after eating, food particles stuck between the teeth can cause dull pain.

The consequences of periodontitis are the loss of the structures that hold the teeth in place and even tooth loss. Very loose teeth can no longer support mechanical loads and can cause problems when chewing. Because periodontitis usually progresses very slowly and does not always affect all teeth equally, those affected get used to the situation and switch their chewing habits to the teeth that can still be used. However, when the damage to anchoring structures has progressed and some teeth have already been lost, those affected often prefer soft foods or switch to soup and pureed foods.

Because the spaces between the teeth are widened by the shrinkage of the gum line, bits of food always remain in these spaces after eating. This can sometimes cause dull pain and those affected always try to get rid of this as soon as possible using a toothpick.
3.5 Problems speaking

The changed position of the teeth due to periodontitis can cause problems when speaking, singing, or playing wind instruments.

The loose teeth caused by periodontitis can make it difficult to speak clearly. Particularly affected by this are actors or radio announcers whose livelihood depends on having clear pronunciation. And singers and musicians who play wind instruments need to have their teeth stay in the same position.

If the visible front teeth in the upper jaw are forced apart due to periodontitis, the gaps that arise can cause problems speaking, singing, or playing wind instruments. Sibilants like “S” in particular can no longer be pronounced clearly.
3.6 Bad breath

Volatile sulfur compounds from bacteria in the oral cavity can cause bad breath. Only professional teeth cleaning can help.

Before having gum treatment, persons with periodontitis have an increase in bacterial plaque and tartar on the teeth, both above and below the gum line. While these coatings cause inflammation of the gums, the bacteria can also cause typical bad breath. The kinds of bacteria that typically cause periodontitis thrive in the depths of the gum pockets and produce foul-smelling volatile sulfur compounds when they decompose that are exhaled from the mouth.

The bad breath goes away only after professional teeth cleaning and after implementing optimal oral hygiene at home.
3.7 Problems with appearance (esthetics)

Persons with periodontitis suffer from changes to their appearance due to receding gums and dark spaces between the teeth.

Persons with periodontitis have major problems with their appearance (esthetics). For one thing, the gums are dark red because of the inflammation, and for another, the teeth look longer because of the receding gums, as the root has also become visible in addition to the crown of the tooth. The freely visible root is darker than the crown. Due to loosening of the teeth, they are often moved apart and dark spaces appear between them that can be perceived to be unattractive or unhealthy. And in advanced periodontitis, tooth loss can lead to unattractive gaps.
Disclaimer

Der Anwender anerkennt hiermit, dass die Website unter www.parodont.ch nicht als „medical device“ zertifiziert ist und er lediglich Anrecht auf den „Istzustand“ wie ausgeliefert hat. Der Anwender nutzt diese Website in eigener Verantwortung und auf eigenes Risiko.

Weder die Autoren noch die Universität Bern übernehmen irgendwelche Garantien in Bezug auf die Verwendung der Website für einen bestimmten Zweck. Weder die Autoren noch die Universität Bern haften für Schäden, welche aus der Verwendung der Website privat in der zahnärztlichen Praxis resultieren.

Die Autoren nehmen allfällige Rückmeldungen zur Website gerne entgegen. Weder die Autoren noch die Universität Bern sind jedoch verpflichtet, irgendwelchen Support technischer, medizinischer oder anderer Natur zu leisten.