What is Periodontal Disease?

*Periodontal (Perry-o-DON-tal) Disease* is an infection that affects the tissues and bone that support your teeth. It is also called *gum disease*.

Gum disease can become a very serious health problem if it’s not treated.

This booklet is your complete guide to gum disease and can help you learn about:

- the causes of gum disease
- the stages of gum disease
- how gum disease is diagnosed
- how gum disease is treated
- how to keep your mouth healthy after treatment
How it starts

**Plaque** is a sticky film that is always on your teeth. When plaque is left on your teeth and gums, it can harden. Hardened plaque is also called *tartar (TAR-ter)*. Bacteria that live in the plaque can make your gums become red, puffy and swollen. Tartar on your teeth makes it hard for you to keep your teeth and gums clean on your own.

When your gums are red, puffy and swollen, they can start to pull away from your teeth. Spaces called *pockets* start to form between your gums and teeth. These pockets collect more bacteria. As the bacteria stay in the pockets, your gum disease will get worse.
Stages of Gum Disease

Gum disease can get worse if it’s left untreated. It can lead to serious infection, bone loss, and you may even lose teeth.

Healthy Gums – No Disease
Your teeth are held in place by gums, bone, and connective tissues. Your gums hug your teeth tightly and there is little or no buildup of plaque and tartar on them.

Gingivitis
The bacteria in plaque make your gums red, tender and swollen. Your gums might bleed at this stage. You also can have gingivitis and not notice any of these signs.
Periodontitis

In time, as plaque and tartar build up where your teeth and gums meet, plaque bacteria break down the gum tissues and bone around your teeth. As the disease gets worse, bacteria also attack bone tissue.

Advanced Periodontitis

Your teeth may become loose and fall out or need to be removed by your dentist. This stage is very serious.
Anyone can get gum disease, but there are other things that play a role in raising your chances of getting it. These include:

- **Not taking care of your teeth and gums.** This includes not brushing twice a day and flossing every day.

- **Using tobacco of any kind.** You are more likely to have gum disease if you smoke, chew or dip tobacco.

- **Diseases that affect the whole body** — such as HIV infection and diabetes — lower your body’s ability to fight infections, including gum disease.

- **Many medications,** such as steroids and blood pressure drugs, can affect your gums. Some have side effects that lower the amount of saliva your mouth makes. This can affect soft tissues like your gums and make cavities more likely.

- **Pregnancy, use of birth control pills, or changes in female hormone levels.** These can cause gums to become more sensitive to plaque bacteria.

- **Family history.** If your parents wear dentures or if you have a family history of tooth loss, be on the alert and pay close attention to changes in your gums.

- **The bacteria that causes gum disease** may be passed from parents to children and between partners through saliva. This includes kissing or sharing toothbrushes and utensils.

### What is the connection between gum disease and other health issues?

Gum disease has been linked to some other diseases. People with diabetes or heart disease are more likely to get gum disease. Strokes and high stress also may be related to gum disease. Researchers are still studying these links.

It is important to talk to your dentist if you suffer from any long-term health problem. Together, you can work out an oral care plan for your best oral and overall health.
How is gum disease found?

You may not have any signs of gum disease — which is why visiting your dentist regularly is so important. But, there are some common signs of gum disease; if you have any of them you should see your dentist.

Warning signs

- gums that bleed when you brush or floss
- gums that are red, swollen, puffy, or tender
- gums that no longer hug your teeth tightly
- bad breath that doesn’t go away
- pus between your teeth and gums
- feeling that your teeth are loose
- a change in the way your teeth fit together when you bite
- a change in the way your partial dentures fit

You may notice one or some of these warning signs, or you may not notice any warning signs at all. Sometimes the only way to know for sure is by getting regular dental checkups. That way, if you do have gum disease it can be caught and treated early.
How does your dentist check for gum disease?

**Periodontal Probe**
At your dental appointment, your dentist will use an instrument called a probe to gently measure how deep the pockets are around each of your teeth. When your teeth are healthy, the pocket should be no deeper than 3 millimeters. Deeper pockets generally mean gum disease that is worse.

![Periodontal probe of healthy gums.](image1)

![Periodontal probe showing a pocket forming between the tooth root and the gums.](image2)

**Small spaces can cause big problems!** It may not seem like a lot, but even the smallest space between your teeth and gums give bacteria a place to grow and cause serious damage to your teeth, gums and bone.

**Dental X-Rays**
Dental x-rays are usually taken to check for the amount of bone that is supporting your teeth. If low bone levels are spotted, then it could be a sign of damage from gum disease.

![Healthy gums have bone that supports the teeth.](image3)

![Gum disease can create bone loss.](image4)
How is gum disease treated?

Your gum disease treatment will depend on several factors, including your personal health history and the stage of your gum disease.

Your dentist may also refer you to a periodontist — a dentist who specializes in the treatment of gum disease. A periodontist is also well versed in the surgical treatment of gum disease.

Professional Cleaning

In the very early stages — when it is gingivitis — you may just need a **professional cleaning** from your dental team. They can also give you some great advice and tips on how you can keep your teeth and gums healthy.

Deep Cleaning — Scaling and Root Planing

If your gum disease is beyond gingivitis, you may need a special deep cleaning called **scaling (SCAY-ling)** and **root planing (PLAY-ning)**.

During your appointment, your dentist will carefully remove plaque and tartar down to the bottom of each pocket. That’s the **scaling** part of the cleaning.

The next step is to clean and smooth your tooth’s root surfaces. Smoothing the surfaces helps your gums heal and reattach to the tooth, shrinking the pocket depth. This is the **root planing** part of the cleaning.

Scaling and Root Planing

- Scaling removes plaque and tartar from below the gumline.
- Root planing smoothes the tooth root and helps the gums reattach to the tooth.
- Healed pocket after treatment.
**Periodontal Surgery**

Sometimes, scaling and root planing isn’t enough treatment on its own. **If the pockets do not heal enough after scaling and root planing, gum surgery may be needed.**

Surgery allows your dentist to remove plaque and tartar from hard-to-reach areas. Then, your gums are stitched into place to tightly hug your teeth.

Surgery can also help to shrink pocket depth and make it easier for you to keep your teeth clean.

**Flap and Osseous (Bone) Surgery**

Probe shows pockets due to gum disease. Gums are inflamed and bone loss has occurred.

The bone is contoured and any remaining tartar is removed.

Healed site after periodontal surgery.
**Bone Graft Surgery**

If bone has been damaged or lost by gum disease, then you may need surgery to rebuild or reshape the bone in your mouth. This kind of surgery is called a **bone graft**.

First, your dentist may use splints, bite guards or other types of tools to hold loose teeth in place and help tissues heal. If too much gum or bone tissue has been lost from your gum disease, he or she may need to also do a bone graft.

Your dentist may place a membrane layer at the surgical area to help your gums stay in place while the tooth root reattaches to the supporting bone tissues. This is called **guided tissue regeneration**.

To help you heal after surgery, your dentist may apply a protective dressing over your teeth and gums and recommend or prescribe a medicated mouthrinse. You may also be given a prescription to treat infection or for pain relief.

**Bone Graft and Guided Tissue Regeneration**

Diseased tissue is removed from the pocket. In some cases, the bone may be reshaped.

Bone has been reshaped. Grafting material is placed over the bone. A membrane covers the grafting material.

After the healing period.
Keep your Gums Healthy After Treatment

Once your gum disease is brought under control, it is very important that you get dental care on a consistent basis. The type of professional cleanings recommended after your treatment are called **periodontal maintenance care**. These cleanings are more extensive than the standard cleaning and will help you keep your gums healthy.

You will need to clean your mouth every day at home, but that is not enough to control your gum disease. Professional care is also needed to help make sure that your mouth continues to heal and get healthy. Your periodontal maintenance involves cleanings that are deeper than a normal cleaning in the dental office.

**With periodic maintenance cleanings and oral care, you can keep your gums healthy.**

Once your gums are healthy, your dentist will determine a maintenance schedule based on your clinical evaluations.

**Medication**

You may also need special medications that can help control the infection and pain or to help your gums heal. The medicine could be a pill, a special mouthrinse, or a medication that your dentist places right into the pocket after you have a deep cleaning.

**Plan for more visits to the dentist**

You will need to see your dentist more often than other people. The pockets and other issues from your gum disease will make it harder for you to clean plaque from your teeth.

Your dentist will talk to you about a treatment plan that works best for you, and he or she will recommend a maintenance care schedule that is based on your personal case. Over time, fewer appointments may be necessary.

**It’s important to follow your periodontal maintenance care. You have a better chance of keeping your teeth if you do. Your gum disease may get worse if you don’t!**
Gum disease won’t go away on its own

Keep Up Your Oral Care at Home

It is very important that you brush and floss every day — especially if you are healing from gum disease.

- **Brush two times every day for two minutes each time.** Use a toothpaste with fluoride (FLOOR-ide). Fluoride is a mineral that can help keep your teeth strong.

- **Floss every day** to remove plaque and bits of food from in between your teeth. If your gums have pulled away from your teeth, it may be best to use special tiny brushes, picks or wider types of floss to clean between your teeth.

- Your dentist may also recommend that you use a specific mouthrinse.

- Look for the **American Dental Association Seal of Acceptance** on all of your dental care products. The ADA Seal means these products have met ADA standards for safety and effectiveness.
Remember, it’s possible that you may not feel any pain or see any signs that your gum disease is getting worse.

**You may have sensitive teeth and gums after your treatment.** Sensitive or sore teeth and gums may make you want to skip cleaning your treated areas in your mouth — but don’t! It is important that you keep brushing your teeth gently and flossing to remove plaque. If you don’t remove the plaque then your gum disease may get worse and you may increase your risk of cavities.

Ask your dentist or dental hygienist about special toothpastes or other treatments that can lower your tooth sensitivity.

**Additional Information**

**Don’t use tobacco!** If you smoke, chew, or dip tobacco, then it is very important you quit. Using tobacco in any form (including e-cigarettes) slows down your healing and raises your chances of getting gum disease again or it getting worse if you already have it. Talk to your dentist or doctor about ways you can quit.

Smoking causes stains that can only be removed by a dental professional. Sores, gums that pull away from teeth and stains often result from using smokeless tobacco.
Will your treatment be covered by your insurance?

Be sure to check your benefits plan when you are planning your treatment with your dental office. However, treatment should be decided by you and your dentist and not by your benefits plan.

If your treatment plan is not fully covered by insurance, ask your dental office if it has a payment plan to cover the rest of the amount. Keep in mind that having treatment now may cost less than having to replace one or more teeth lost to gum disease later on.

Prevention is the best medicine!

In general, it costs much less to keep your teeth and gums healthy than to wait until you have a problem.

These healthy habits can help:

- **Brush** your teeth twice a day with a fluoride toothpaste and for two minutes each time.
- **Floss** or use another between-the-teeth cleaner every day.
- Use a germ-fighting **mouthrinse** or other products if your dentist or hygienist recommends them.
- **Eat a healthy diet and limit snacks.** Learn more online at [www.choosemyplate.gov](http://www.choosemyplate.gov).
- **Visit your dentist regularly.**

Your Treatment Plan

Every patient is different, so use this section to talk to your dentist about the information in this guide and what it means for your personal treatment plan.
Brush your teeth twice a day with a fluoride toothpaste.
Clean between your teeth once a day.
Eat a healthy diet and limit snacks.
Visit your dentist regularly.

For more information about taking care of your mouth and teeth, visit MouthHealthy.org, the ADA’s website just for patients.

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