

Periodontal Health and Health Promotion

In the editorial entitled “Preventive Maintenance: The Key Factor for Long-term Treatment Success” which appeared in the last issue of *Oral Health and Preventive Dentistry*³ (vol 13, No. 4, 2015), the importance of a regular maintenance programme including clinical re-evaluation, oral hygiene instruction and re-enforcement of patient motivation for self-performed oral hygiene, together with professional preventive measures delivered by a dental professional (i.e. dental hygienists or dentists) for the long-term success of periodontal, restorative and implant treatment was discussed. It was argued that it is increasingly important that dentists be aware of the fact that long-term treatment success or failure also depends on their ability to establish and maintain an effective preventive programme, especially when taking into account today’s rapidly increasing elderly population and the increasing number of patients receiving dental implants.

During the last two decades, continuously increasing evidence suggests that oral health, especially periodontal health, plays an important role in systemic health. A large body of evidence suggests that periodontitis is associated with and most likely also poses a risk factor for diabetes, atherosclerotic cardiovascular disease (CVD), stroke, adverse pregnancy outcomes and some forms of cancer. Interestingly, a paper recently published in the *Journal of the American Heart Association*¹ reported that subjects showing a deterioration of their periodontal conditions – defined as an increase in the number of pockets with a probing depth of ≥ 3 mm over a 3-year observation period – exhibited a difference in their common carotid artery intima-medial thickness (IMT) of about 0.1 mm compared to subjects who showed an improvement in their periodontal conditions after correction for several known CVD

risk factors. Notably, a 0.1-mm difference in IMT thickness is considered a relevant clinical value, as it has been associated with a 2.3-fold increased risk for coronary events.² Considering the fact that a change in the number of periodontal pockets with a depth of ≥ 3 mm (a pocket depth generally considered to indicate periodontal health) may have such a dramatic effect on systemic health, the importance of preventive dentistry – including primary, secondary and tertiary prevention – for health promotion becomes truly apparent.

It remains a major task to effectively communicate this to our colleagues, the population and the authorities.



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REFERENCES

1. Desvarieux M, Demmer RT, Jacobs DR, Papapanou PN, Sacco RL, Rundek T. Changes in clinical and microbiological periodontal profiles relate to progression of carotid intima-media thickness: the Oral Infections and Vascular Disease Epidemiology study. *J Am Heart Assoc* 2013;2:e000254.
2. Hodis HN, Mack WJ, LaBree L, Selzer RH, Liu CR, Liu CH, Azen SP. The role of carotid arterial intima-media thickness in predicting clinical coronary events. *Ann Intern Med* 1998;128:262-269.
3. Sculean A. Editorial. Preventive Maintenance: The Key Factor for Long-term Treatment Success. *Oral Health Prev Dent* 2015;13:287.