Dentist Questions and Answers

Q. What is gum disease?

A. Gum disease (periodontal disease) is a chronic infection that is most often caused by the build up of dental plaque. Gum disease rarely shows symptoms before it is well advanced. It is an infection that can wreak havoc on your teeth and your overall health.

Q. How serious a condition is it?

A. Scientific evidence is ever growing that links gum disease (also called periodontal disease) to a myriad of health problems such as pneumonia and chronic respiratory disease, heart disease, stroke, and pre-term and low-birth weight babies.

Q. Does that mean gum disease can cause heart attacks?

A. No, there is no evidence at this time that gum disease directly causes heart attacks. However there is scientific evidence that suggests an association between gum disease and heart disease. Four scientific (prospective) studies have found an association between periodontal disease and heart disease.

One study, published in 1999 in *Cardiovascular*, found that among Canadians aged 36 to 69 individuals with a severe gum disease had a three to seven times increased risk of fatal heart disease.

Q. What is the connection between stroke and gum disease?

A. Researchers have found that those with poor oral health may be up to three times more likely to have a stroke. [Circulation 1999; 99:1121]

Q. What is the connection between women with gum disease and premature low birth-weight babies?

A. Research has shown that women with periodontal disease may be up to 7 times more likely to deliver a premature low birth-weight baby. While the risk increases with the severity of the disease, even women with minimal signs of the disease are still at risk for low birth-weight babies. [Annals of Periodontology 1998; 3 233-250, and Journal of Periodontology 1996; 67 (Supplement).]
Q. **What causes women with periodontal disease to have an increased risk of having pre-term babies?**

A. There are two likely reasons. First, toxins that enter the bloodstream through inflamed gums separating from the bone have been found to create stress for the fetus, possibly leading to low birth-weight or pre-term birth. The second is that the bacteria associated with gum disease may work to boost a hormone prostaglandin, which stimulates labour.

Q. **How common is gum disease?**

A. Up to 80 percent of Canadians will be affected by gum disease at some point in their lives. Gum disease is the leading cause of tooth loss in Canada. The incidence of severe gum disease increases with age and affects one in seven of those in middle age and one in three elderly people. [Burt B, Eklund S. Dentistry, Dental Practice and the Community. 5th Edition Philadelphia: WB Saunders Company, 1999]

Q. **What causes gum disease?**

A. While there are many factors involved in the development of gum disease, the most common cause is the build up of dental plaque. A colourless film of bacteria, plaque coats teeth and gets between the tooth surface and gum tissue.

Over time, the plaque hardens into tarter (know as calculus) and causes the gums to become inflamed. If left untreated, the inflammation can develop into a serious infection that attacks the bone supporting the teeth and causes the gum tissue to shrink.

Q. **Can gum disease be prevented?**

A. Yes it can be prevented. Prevention starts with good dental care habits. Brush your teeth at least twice a day and floss once a day. Flossing reaches the places the toothbrush can’t, about one-third of the tooth surface. Practice good overall health habits. Eating a well-balanced diet and quitting smoking improves your overall health and your oral health.

A professional cleaning done in the dental office is the only effective way to remove the hardened tarter that leads to gum disease.

Also one of the things your dentist looks for during an examination is any sign of gum disease.

Q. **How common is dental decay in children?**

A. One of the most prevalent disorders of childhood, dental decay is five times as common as asthma and seven times as common as hay fever. It is caused by bacterial infection,

Q. **What is ECC?**

A. ECC is short for early childhood caries (or cavities), which is an especially damaging form of the dental decay, which impacts the primary teeth of preschoolers.

Q. **Is severe dental decay in children serious/harmful?**

A. While it is not life threatening, it can lead to sub-optimal long-term health. It can be a contributing factor in ‘failure to thrive’ whereby children have low weight and height for their age. Failure to thrive is often associated with serious medical problems or nutritional deficiency. [Pediatric Dentistry 1990; 12: 185-189]

ECC can result in poor speech development, diminished facial aesthetics and misaligned permanent teeth.

Severe dental decay can have a detrimental impact on young children and their quality of life. It can cause pain, poor sleep and poor eating habits, and in a few cases behaviour problems. [Low W, Tan S, Schwartz S. The effect of severe caries on the quality of life in young children.]

Q. **How common is ECC?**

A. The prevalence of ECC in pre-school children in urban areas of Canada is six to eight percent, but in disadvantaged populations such as the Inuit of the Northwest Territories, 64 percent of 4-year-olds are affected. (Community Dental Health Services Research Unit, University of Toronto, Health Measurement and Epidemiology Report No. 16, 1998)

ECC is preventable, yet it is more common than other preventable childhood illnesses such as mumps and measles.

Q. **How can ECC be prevented?**

A. To prevent dental decay in the teeth of very young children, don’t let your baby fall asleep with a bottle of juice or milk in his/her mouth. Also be sure and wipe the baby's teeth and gums with a clean, damp cloth after feeding.

Preventing oral disease in children starts with good dental care habits. Children are really never too young to learn how to care for their teeth. Children should have their teeth brushed or be helped to brush their teeth at least twice a day.
Q. **When should I bring my children in for a visit/consultation/assessment?**

A. Children should also be seen by the dentist twice a year. The Canadian Dental Association encourages an assessment visit with the dentist within 6 months of them getting their first tooth or by one year of age.

The Canadian Dental Association (CDA) is the authoritative national voice of dentistry, dedicated to the representation and advancement of the profession, nationally and internationally, and to the achievement of optimal oral health.

For more information about oral health, visit the CDA website at www.cda-adc.ca.