

Dear Doctor,

Over the last 15-20 years the dental and medical communities have vastly expanded their understanding of periodontal disease, its relationship to overall health and its treatment. Now, practitioners have an unprecedented amount of knowledge and technology to save teeth and even lives.

Knowing this, I wonder why periodontal assessment often drops to the low place on the list of patient exam priorities. As you lead your team into this new year, please consider how your commitment to practicing excellence in dentistry relates to periodontal assessment, diagnosis and treatment.

Clasen Consulting Hygiene Specialist, Annette Stelter provides some valuable advice to ensure all patients are receiving the very best periodontal care.

Best Regards,

Andrea Clasen



Perio Care:

You Can't Find What You Don't Look For

It is common to make New Year's resolutions for ourselves; most of us do. What about resolving to create better health scenarios for your patients? This is something every dental practitioner should do.

Make a 2011 goal of performing a comprehensive periodontal assessment on each patient at each appointment.

A recent study published in the Journal of Dental Research found that the prevalence of periodontal disease in American patients may be higher than previous data indicated. Without assessing the periodontal health of all pockets we could be missing infection.

While assessment can help prevent the advancement of gum disease and tooth loss, do not forget to educate your patients about the physical risks such as heart disease associated with periodontitis. Without the necessary screening for disease status we, as clinicians, could be missing the opportunity to provide our patients optimal care. Below is a guide to evaluating patients for Periodontal Disease outlined by the American Academy of Periodontology (AAP).

- Presence or absence of the clinical signs of inflammation
- Probing depths
- Extent and pattern of loss of clinical attachment and bone
- Presence or absence of clinical signs and symptoms such as pain, ulcerations, biofilm, calculus
- The patient's medical and dental history

The American Dental Hygienists' Association's standards for Clinical Dental Hygiene Practice state that a comprehensive clinical periodontal evaluation includes charting of:

- Probing depth
- Bleeding upon probing
- Suppuration
- Mucogingival relationships and or defects
- Recession
- Attachment levels
- Attachment loss

Simple spot probing is inadequate to capture a full understanding of a patient's disease status. While our comprehension of the etiology of periodontal disease has grown, the use of the periodontal probe for assessment still serves as the foundation of clinical evaluation and diagnosis.

Our patients expect us, as experts, to advise them of their health. Based on the results of the periodontal examination, a diagnosis and proposed treatment plan should be presented to the patient. The patient should be informed of the results, the disease process, and treatment options. Although your patient may decline recommended therapy, it remains your responsibility to properly and fully inform her of her dental health.

Remember, you can't find what you don't look for.

Have a Happy, Healthy and Prosperous 2011!

Clinical references and resources are available upon request.



Annette Stelter, RDH, B.S.