

SCALING AND ROOT PLANING

Nearly all forms of periodontitis are treated initially in a non-surgical manner. This is due to the nature of the cause of periodontitis. As the bacteria in the form of plaque are the cause of periodontitis, their gross removal and reduction is the first step in the termination of this process. This removal takes place in the form of *Scaling and Root Planing*. This involves the use of a special ultrasonic device with water irrigation to cleanse the pockets of soft plaque and hard calculus deposits. Local anesthetic is also used to numb the area to be treated in order to reach the base of the pocket without causing you discomfort during treatment.

If the pocket depths continue to progress or are not resolved with initial scaling and root planing, surgery may be necessary to correct the loss of bone and resultant pocketing.



Before



After

All cases are patients of Dr. Pamela Nicoara.

PERIODONTITIS

Periodontitis is an infection of the bone and gums which surround the teeth. It is caused by bacteria which normally reside in your mouth. When bacteria become more numerous than normal, or at a level which your body can not tolerate, an inflammatory reaction takes place and your body begins to destroy the bone which supports the teeth. When bacteria in your mouth cause bone loss, the gum tissue does not always recede away with the lost bone. Pockets are created which harbor more bacteria and are un-reachable with a normal toothbrush and floss. The deep pockets perpetuate the cycle of bone loss. The teeth subsequently become loosened, and if not treated in a timely manner, the teeth can even be lost.

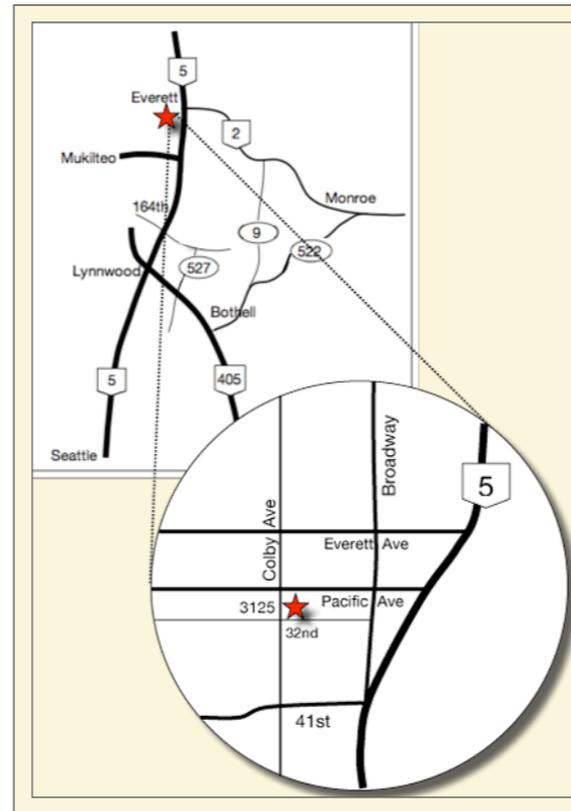


During this process, there can be a foul odor from the mouth, as well as infection (pus) coming from the gums. This process is usually painless and can sometimes go unnoticed for quite some time until significant symptoms, such as loose teeth, indicate a problem.

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PATIENT PAGES

A SURGICAL PERIODONTAL
BROCHURE FOR PATIENTS

BY DR. PAMELA NICOARA

Periodontal Surgery

Periodontal Surgery

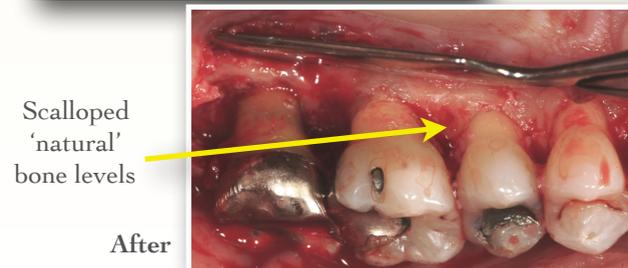
FLAP OR OSSEOUS SURGERY

When initial conservative therapy in the form of scaling and root planing does not resolve the deep pockets, surgical intervention may be necessary to eliminate these pockets. One way to do this is to **flap** the gum back to have access to cleaning the root surface. In some instances, excess gum tissue is cut away and the underlying **osseous** bone is removed in certain areas to regain natural bone contours. Notice how the bone has been scalloped in the 'after' picture below. Once the gum tissue heals back to the bone, the pockets are reduced to a level which can be maintained through normal brushing and flossing, usually 3-4mm. Because more of the root surfaces can be exposed, sometimes temporary sensitivity to hot or cold foods develops. This type of surgery is usually reserved for back teeth where esthetics is not as important as in the front of the mouth.



Before

Irregular bone levels



Scalloped 'natural' bone levels

After

BONE GRAFTING

Sometimes the pattern in which the bone is lost around a tooth is such that cutting away the gums and smoothing out the bone defects is not the best treatment option, and a regenerative approach, rather than a resective approach is recommended. Guided Tissue Regeneration rebuilds the previously lost bone surrounding a tooth. This process usually involves a bone graft, and a membrane.

The bone used as a graft is either taken from your own body or from an outside source. To avoid extra incisions and stitches, your own bone is rarely used. Bone from an external source (cow or human) is sterilized and looks like large grains of salt (see adjacent).

Membranes are placed over the bone to keep the particles where they should stay (see adjacent). Some of these membranes dissolve away and some require removal after the bone has healed.

The photos demonstrate bone loss around the side of a tooth. The defect was filled with bone graft, and then the membrane covers over it like a blanket. Then the gum is stitched back over the bone and membrane. The x-rays show the graft in place.



Other regenerative procedures involve the use of bioactive gels, such as Emdogain (depicted below). Emdogain acts as a 'fertilizer' to help the bone heal against the tooth and rebuild the lost tissues which do not easily form on their own.



ADDITIONAL TREATMENT

Antibiotics: If the infection in your mouth is severe or widespread, or anytime a bone graft is used, antibiotics may be recommended to help control the growth of bacteria that create toxins and prevent normal healing after surgery.

Occlusal Adjustment: If the way your teeth come together when you bite down is unbalanced, then adjusting the biting surfaces of the teeth may help to alleviate excessive forces on a particular tooth or group of teeth which are loose. In other instances, the way the teeth fit when you bite together is normal, but a grinding habit may be wearing down the surfaces of the teeth. Fab-



rication of a custom bite guard will help to control how pressure is distributed on the teeth to protect them from further wear and eventual replacement.

Host Modulation: For some people, bacteria levels are low and do not account for the amount of bone destruction. Medications like Periostat can be used to help slow your body's over-reaction to the bacteria and reduce bone loss.

PREVENTION

The best way to prevent cavities and periodontitis is by *good tooth brushing and flossing on a daily basis* to remove the damaging bacteria. These bacteria cannot be eliminated from the mouth, but they can be kept under control and kept from causing more bone loss.

Other factors which can negatively affect your periodontal health include tobacco smoking, diabetes, stress and hormonal changes, certain medications, poor nutrition, and genetics. Therefore, sometimes even with the most diligent oral home dental care, people still develop some form of periodontitis. In this case, professional intervention is necessary to slow and prevent continued bone loss in order to maintain the teeth as long as possible. Remember, nothing we have in dentistry to replace your teeth is ever as good as your natural teeth!

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