

Keeping your teeth and gums healthy

You know about your diabetes, but did you know that diabetes and gum (periodontal) diseases affect each other? Good oral health not only helps keep the mouth and gums free from infection, but may also have a positive effect on the control of diabetes.

What is periodontal (gum) disease?

Periodontal diseases are infections of the gums, bones and fibers which attach the tooth to the bone and hold them in the jaw. The leading cause of these diseases is plaque, a sticky film that forms on teeth and is full of bacteria. If the plaque is not removed every day by good brushing and flossing, it can anchor to teeth and harden into tartar (calculus), which in turn, collects more plaque. The bacteria in plaque release toxins which, along with the body's own defenses against bacteria, irritate the gums, causing inflammation and infection. Smoking can make these symptoms worse, particularly for patients with diabetes.

Common signs of periodontal (gum) disease include:

- ▶ Red swollen gums that are tender to the touch and bleed during brushing and flossing
- ▶ Gums that have pulled away from the tooth leaving more tooth structure (the crown and/or the roots) exposed
- ▶ Milky white or yellowish plaque deposits which are usually heaviest between the teeth
- ▶ Pus between the teeth, which may also be tender and swollen in the gum area. These can be very painful and cause rapid and severe tissue damage
- ▶ Loose or sensitive teeth
- ▶ A bite that feels different
- ▶ A foul, offensive odor from the mouth

In addition to gum problems, patients with diabetes may experience other conditions such as:

- ▶ Burning sensation in the mouth or tongue
- ▶ Dry mouth due to lower saliva flow — this can lead to soreness, ulcers, infection and tooth decay
- ▶ Wounds that heal more slowly



Tips for patients with diabetes

Diabetes and periodontal disease – a two-way street

Persons with diabetes have a two- to four-fold higher chance of periodontal disease, 50 percent more severe bone and tooth loss, and more gum infection. The less controlled the diabetes, the higher the risk of periodontal disease. There are several reasons for this fact:

- ▶ Persons with diabetes have a lowered ability to fight infection. The gum and jaw tissues break down due to continuing infection.
- ▶ Just as diabetes decreases blood flow to the eyes and kidneys, it also decreases flow to the mouth. This makes it harder for the gums to heal. High sugars, even without infection, also interfere with healing in the tissue that hold the teeth in place.
- ▶ Tooth loss can make it difficult to chew and digest food, interfering with a patient's ability to maintain good nutrition and control their blood sugar levels.

Just as diabetes can increase a patient's chances of having gum disease, having gum disease may make it more difficult for patients with diabetes to control their blood sugar. There is some evidence that treating gum disease lowers A1C by 0.5-1.0 percent. Gum disease increases the level of inflammation which, as with any other infection, can raise levels of blood sugar. In fact, the area of the gums involved is about the size of the palm of your hand. No one would leave that much infection untreated. Also, the bacteria causing these infections are known to release chemicals that may increase disease elsewhere, such as in the heart. Therefore, it is important for diabetic patients to treat gum disease and eliminate the infection, to help keep blood sugar levels under control.

What will your dentist or periodontist (gum specialist) do for you?

Gum diseases are increasingly seen as one of the six leading complications of diabetes. It is therefore important for diabetic patients to keep up with their dental appointments, to be aware of the treatment options and to keep their dentist and/or periodontist informed on any changes in dental or overall health.

Diabetic patients who receive gum treatments, particularly if combined with antibiotics, can see an improvement in their blood sugar levels. In most cases, treatments will be similar to patients who do not have diabetes. Early stages include scaling and root planing, where plaque and tartar are removed from the pockets around the teeth and root surfaces are smoothed. Some patients may need to have additional treatments if their disease is more advanced. Patients having trouble controlling their diabetes may need to have treatments specifically tailored to their condition, since many patients with diabetes heal more slowly.

Patients with diabetes may want to schedule their appointments in the morning after they have had a normal breakfast to prevent a sudden drop in blood sugar. Diabetic patients may also want to bring their medication and some food with them when visiting the dentist. Most likely, the patient's dentist and physician will work together to treat both the diabetes and gum disease. Once treatments are completed, and while they are healing, diabetic patients may want to ask their physician what foods and drinks they should have, what, if any, adjustments they should make to their medication and how often they should be checking their blood sugar.

What can you do to keep yourself healthy?

- ▶ Brush after each meal and snack, using a soft bristle toothbrush.
- ▶ Use dental floss at least once a day.
- ▶ For patients who have dentures (false teeth), it is important to keep them clean.
- ▶ Ask for advice on how best to keep your teeth and gums clean from your hygienist, dentist and/or periodontist.
- ▶ Have your teeth professionally cleaned on a regular basis, twice a year for most patients although if you have gum disease, more frequent cleanings might be suggested.
- ▶ Tell your dentist about any problems you might be having with your teeth and gums and have it taken care of right away.
- ▶ Let your dentist know if you have gums that are red, sore, bleeding or pulling away from your teeth. Also let your dentists know about any denture sores, burning sensations, mouth dryness or sores that do not appear to be healing
- ▶ Tell your dentist you have diabetes.
- ▶ If you are a smoker, work with your physician to try to quit.

Keeping diabetes under control will make patients less likely to develop gum diseases. Keeping teeth and gums healthy will help to control diabetes. Staying healthy is truly a two-way street.

Sources

National Diabetes Information Clearinghouse, "Prevent diabetes problems: keep your teeth and gums healthy," NIH/DHHS, 2007.

American Academy of Periodontology, "Diabetes-periodontal diseases: a two-way relationship," AAP, 2004.

Taylor, GW. The effects of periodontal treatment on diabetes. *Journal of the American Dental Association*. 2003; 134:41S-48S.

Ryan MA, et.al. The influence of diabetes on periodontal tissues. *Journal of the American Dental Association*. 2003; 134:34S-40S.

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