Recommendations for patients and the public:

what you should **know**, what you should **do**
Diabetes and periodontitis are chronic non-communicable diseases, whose prevalence increases with age.

People with periodontitis have an elevated risk of pre-diabetes or developing type 2 diabetes.

There is a bidirectional (two-way) relationship between periodontitis and diabetes.

People with both diabetes and periodontitis have a greater likelihood of more severe medical complications (affecting eyes and kidneys) and even death than people with diabetes alone.

If untreated, periodontitis causes tooth loss.

Periodontal treatment in people with diabetes results in a significant reduction in glycated haemoglobin (HbA1c) levels three months after periodontal therapy, with emerging evidence available also for six months.

Periodontitis is easily diagnosed and clinically controlled. With regular high-quality supportive treatment, clinical results can be maintained.

Early diagnosis, prevention, and co-management (dentists and physicians) of both diabetes and periodontitis is of utmost importance.

People with sub-optimally controlled diabetes (both type 1 and 2) suffer from increased periodontal inflammation / destruction / breakdown.

Successful periodontal treatment has a clinically significant effect on general health and should have a place in the treatment of people with diabetes.

You may think you are doing well, but you may not be doing well enough.

Keep your mouth and body as healthy as possible.

Visit both your doctor and dentist on a regular basis.

You may think you are doing well, but you may not be doing well enough.

Keep your mouth and body as healthy as possible.

Visit both your doctor and dentist on a regular basis.
Signs and symptoms of periodontitis

- Red or swollen gums
- Longer-looking teeth
- Increasing spaces between your teeth
- Calculus (tartar) on your teeth
- Bleeding from the gums or blood in the sink after you brush your teeth
- Bad breath (halitosis)
- Loose teeth
- Dry and/or burning mouth
- Bad taste

How to prevent gum disease

- Seek advice from your dental-care professional twice a year.
- Brush your teeth twice a day (minimum two minutes).
- Clean in between the teeth every day: use interdental brushes – or floss if the gaps between your teeth are too tight.
- Live a healthy life (low refined sugars and high antioxidant nutrition, physical activity, reduced stress) and avoid smoking.

Benefits of periodontal therapy

- Successful periodontal therapy will arrest disease progression, stabilise bone levels, diminish symptoms, and lengthen the life expectancy of teeth.
- Successful periodontal treatment reduces circulating levels of inflammatory molecules in people with diabetes.
- In people with diabetes, periodontal care (therapy) is safe and effective.
- Periodontal therapy significantly reduces HbA1c and glycaemia both in people with diabetes and in those without the disease.
- Successful gum treatment reduces blood-sugar (HbA1c) levels and could help you avoid having to take extra medication.
- May contribute to reduced diabetes-associated morbidity and mortality.

What you should do:

- Inform your dentist about the outcome of your visits to the doctor.
- Provide your dentist with an update of the results of your diabetes control and changes in medication.
- It is important to keep your mouth and body as healthy as possible with regular dental and medical care.
- If your doctor has told you that you have diabetes, you should make an appointment with a dentist.
- You should take extra care while performing your daily oral hygiene routine including a thorough interdental cleaning.
The EFP thanks Sunstar for its support and its unrestricted grant.

SUNSTAR

European Federation of Periodontology

Take care of your gums, control diabetes.

visit your doctor regularly
visit your dentist regularly
control your diabetes
clean your teeth twice a day
watch your weight
eat healthy foods, do not smoke

visit:
perioanddiabetes.efp.org