**International consensus guidelines on gum disease treatment published today**

* **Early intervention prevents tooth loss.**
* **Oral hygiene and healthy lifestyle are central to successful therapy.**

***Brussels, Belgium, 27 July, 2020***. The first international evidence-based treatment guidelines for gum disease – which affects 50% of all adults – are published today in the *Journal of Clinical Periodontology* (1), the official publication of the European Federation of Periodontology (EFP).

Periodontitis, often called gum disease, affects around half of all adults. Severe periodontitis is the sixth most common disease worldwide. Periodontitis causes inflammation of the gums, which become red, swollen, and may bleed during brushing – this is the body’s immune response to bacteria that have been allowed to accumulate on the teeth. If left untreated, the inflammation spreads to the ligament and bone supporting the teeth, causing loosening and loss of teeth.

“Periodontitis is a devastating condition which leads not only to pain and soreness in the gums, but also to chewing problems, unpleasant changes to tooth length and position, poor self-esteem, withdrawal from social activities, and an increased risk of other inflammatory conditions including diabetes,” said Prof Mariano Sanz, EFP Workshop Committee Chair. “These guidelines outline how to manage this disease, since in the early stages its treatment is straightforward, and the consequences are minor.”

Four sequential steps to therapy are advised. **One**: good oral hygiene and a healthy lifestyle to reduce inflammation is the foundation for an optimal response to treatment and long-term control of the disease. This step also includes professional removal of bacteria (plaque and tartar) from the parts of the teeth visible above the gum lines. **Two**: thorough professional cleaning of root surfaces below the gum line, and additional therapies if needed. **Three**: more complex treatments, such as surgery, may be needed in some (not all) patients. **Four**: long-term supportive care to prevent relapse, with healthy lifestyles, good oral hygiene and check-ups with cleaning.

The steps overlap and good oral hygiene is essential throughout, noted Prof Sanz. “Professional cleaning is only effective if patients clean their teeth thoroughly, and surgery is not recommended in those with poor oral hygiene. A healthy lifestyle is crucial: periodontitis is a chronic inflammatory disease and conditions that raise inflammation in the body make it worse – for example obesity, smoking, and poorly controlled blood sugar in diabetes. Good nutrition and physical activity can combat inflammation.”

Prof Iain Chapple, Guideline Chair, said: “Periodontitis is caused by a build-up of oral bacteria, which triggers a damaging immune response rather than a protective one, and one that destroys tooth-supporting bone as well as bacteria. The misdirected immune reaction is partly genetically inherited, but largely driven by habits like smoking and high refined sugar intake, and it really takes hold when oral hygiene habits are poor. Long-term sustainable success requires improving oral hygiene and lifestyle habits and there is rarely a need for specific medications, such as antibiotics.”

A powerful motivator to improve oral hygiene is showing patients visual evidence of their periodontitis (e.g. an X-ray of their teeth), explaining why they are susceptible, and what they can do. “After successful

treatment, patients who take control of their oral health and lifestyle can halt periodontitis in its tracks and keep their teeth for life,” said Prof Chapple.

The main objective of therapy is to prevent tooth loss. Quality of life is another goal, which means having teeth that are comfortable to use (i.e. not too wobbly), eating is pain free, and appearance is enhanced. “Successful treatment transforms people’s lives: they become more confident, smile, and go out more,” said Prof Chapple. “It also improves overall health by stopping oral bacteria from entering the blood and raising inflammation levels throughout the body which negatively affects other conditions like diabetes.”

**What you can do to prevent gum disease**

* Brush your teeth carefully more than once a day using a manual or powered toothbrush.
* Clean between your teeth daily using an interdental brush (or floss if the gaps are too tight).
* Specific mouth rinses or toothpastes can be used on top of cleaning to reduce inflammation.
* Don’t smoke, maintain a healthy weight, eat a balanced diet, exercise, reduce stress.
* If you have diabetes, control your blood sugar.

**ENDS**

**Notes for Editors**

**References**

1) Sanz M, Herrera D, Kebschull M, Chapple I, Jepsen S, Berglundh T, Sculean A, Tonetti MS. Treatment of Stage I-III Periodontitis –The EFP S3 Level Clinical Practice Guideline. *J Clin Periodontol*. 2020. <https://onlinelibrary.wiley.com/toc/1600051x/2020/47/S22>

**About the EFP**

The European Federation of Periodontology (EFP) is a non-profit organisation dedicated to promoting awareness of periodontal science and the importance of gum health. Its guiding vision is “Periodontal health for a better life.” Founded in 1991, the EFP is a federation of 37 national periodontal societies that represents more than 16,000 periodontists, dentists, researchers and oral-health professionals from Europe and around the world. It pursues evidence-based science in periodontal and oral health, promoting events and campaigns aimed at both professionals and the public. The EFP organises EuroPerio, the world’s leading congress in periodontology and implant dentistry, as well as other important professional and expert events such as Perio Master Clinic and Perio Workshop. The annual Gum Health Day, on 12 May, organised by the EFP and its member societies, brings key messages on gum health to millions of people across the world. The EFP also organises workshops and outreach campaigns with its partners: projects have covered the relationship between periodontal disease and diabetes, cardiovascular disease, and caries, as well as women’s oral health during pregnancy. The EFP’s Journal of Clinical Periodontology is the most authoritative scientific publication in this field and the federation also publishes a monthly digest of research (JCP Digest) and the quarterly Perio Insight magazine which offers expert views and debates. The federation’s work in education is also highly significant, notably its accredited programme for postgraduate education in periodontology and implant dentistry. The EFP has no professional or commercial agenda.

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