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"Monday Morning Pearls of Practice by Bobby Baig"

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Periodontal and Periapical Lesions around Teeth:

Introduction:

Odontogenic infections are one of the most prevalent diseases and the primary reason patients seek out dental care throughout the world. The most common infection is the periapical abscess (25 percent), pericoronitis (11 percent) and periodontal abscess (7 percent).

Periodontal Abscess:

The periodontal abscess is the third most common dental emergency and is prevalent in patients with untreated periodontitis as well as in periodontal patients in supportive therapy. The microorganisms associated with a dental abscess are predominantly anaerobic and in the case of the periodontal abscess, they are similar to the pathogens associated with periodontal disease.

Endodontic Abscess:

In the case of the endodontic abscess, many microbiologic similarities with the periodontal abscess can be found but distinct differences do exist. The majority of odontogenic infections are anaerobic and polymicrobial, and these infections can be further characterized as chronic or acute.

Acute Infection:

- 1. Invading and multiplying bacteria characterize the acute infection.
- They are associated with pain, swelling, and localized heat production as a result of the initial immunologic response to the invading organism, which is primarily a nonspecific inflammatory reaction, dominated by polymorphonuclear leukocytes.

Chronic Infection:

- 1. The chronic infection occurs when the microorganisms cease invasion, but are still retained within the tissues.
- 2. In contrast to the acute lesion, the chronic lesion has little to no symptoms and patients are commonly

- unaware of the infection.
- 3. Chronic infection is associated with granulation tissue development and lymphocyte activity.
- 4. The bacteria in these lesions increasingly become resistant to phagocytosis.
- 5. The chronic infection often leads to further tissue destruction, commonly seen as radiographic bone loss associated at the apex of an endodontically involved tooth or around periodontally diseased teeth.
- 6. It is important to understand that an acute lesion can become chronic once drainage is established, and the chronic lesion can transform into an acute lesion when host-bacteria homeostasis is altered. This often occurs following incomplete instrumentation of roots with chronic severe periodontal disease or over instrumentation of the chronically diseased root canal past the apex.

Conclusion:

<u>Treatment of the Odontogenic Abscess:</u>

- 1. Involves three basic principles, establishment of drainage, identification and elimination of the infection source, and reconstruction of the tissue damage if needed.
- 2. Diagnosis and treatment of infections associated with teeth have been well researched in the literature.
- 3. Treatment strategies include mechanical debridement, surgery and systemic antibiotic administration.
- 4. Treatment of the odontogenic infections is important in overall patient health.

Reference:

- 1. Schoo WH, van der Veleden U. Marginal soft tissue recessions with and without attached gingiva. A five-year longitudinal study. *J Periodontal Res* 1985;20(2):209-211.
- 2. Kisch J, Badersten A, Egelberg J. Longitudinal observation of "unattached" mobile gingival areas. *J Clin Periodontol* 1986;13(2):131-134.
- 3. Tenenbaum H. A clinical study comparing the width of attached gingiva and the prevalence of gingival recessions. *J Clin Periodontol* 1982;9(1):86-92.
- Kennedy JE, Bird WC, Palcanis KG, Dorfman HS. A longitudinal evaluation of varying widths of attached gingiva. J Clin Periodontol 1985; 12(8): 667-675.
- 5. Stetler KJ, Bissada NF. Significance of the width of keratinized gingiva on the periodontal status of teeth with submarginal restorations. *J Periodontol* 1987;58(10):696-700.
- 6. Egreja AM, Kahn S, Barceleiro M, Bettencourt S. Relationship between the width of the zone of keratinized tissue and thickness of gingival tissue in the anterior maxilla. *Int J Perio Rest Dent* 2012;32(5):573-579.
- 7. Lindhe J, Echeverria J. Consensus report of session II. In: Lang NP, Karring T, eds. *Proceedings of the First European Workshop on Periodontology*. Berlin: Quintessence; 1994:210-214.
- 8. Wilson TG Jr., Glover ME, Schoen J, Baus C, Jacobs T. Compliance with maintenance therapy in a private periodontal practice. *J Periodontol* 1984;55:468-473.
- 9. Wennström JL, Derks J. Is there a need for keratinized mucosa around implant to maintain health and tissue stability? *Clin Oral Implants Res* 2012; 23(suppl 6): 136-146.
- 10. Frisch E, Ziebolz D, Vach K, Ratka-Krüger P. The effect of keratinized mucosa width on peri-implant outcome under supportive post-implant therapy. *Clin Imp Dent Relat Res* 2013; Epub ahead of print.
- 11. Esposito M, Maghaireh H, Grusovin MG, Ziounas I, Worthington HV. Interventions for replacing missing teeth: Management of soft tissues for dental implants. *Cochrane Database Syst Rev* 2012; Epub 2012 Feb. 15.
- 12. Bengazi F, Wennström JL, Lekholm U. Recession of the soft tissue margin at oral implants A two-year longitudinal prospective study. *Clin Oral Impl Res* 1996; 7:303-310.
- 13. Lin Guo-Hao, Chan Hsun-Liang, Wang Hom-Lay. The significance of keratinized mucosa on implant health: A systematic review. *J Periodontol* 2013;84:1755-1767.
- 14. Brito, C, Tenenbaum HC, Wong BKC, Schmitt C, Nogueira- Filho G. Is keratinized mucosa indispensable to maintain peri- implant health? A systematic review of the literature. *J Biomed Mater Res B Appl Biomater* 2014;102(3):643-650.
- 15. Gobbato L, Avila-Ortiz G, Sohrabi K, Wang CW, Karimbux N. The effect of keratinized mucosa width on peri-implant health: A systematic review. *Int J Oral Maxillofac Implants* 2013; 28:1536-1545.
- 16. Bouri A Jr., Bissada N, Al-Zahrani MS, Faddoul F, Nouneh I. Width of keratinized gingiva and the health status of the supporting tissues around dental implants. *Int J Oral Maxillofac Implants* 2008; 23(2): 323-326.