Make sure that gum disease does not become an issue during pregnancy

GUM DISEASE: what it is, how it evolves

**Tooth divides into 2 parts:**
- **Crown**
  - is the visible part we live with
- **Root**
  - is the invisible part, which
    - places the tooth to the bone and
    - bone to the gum through the periodontium (tissues that surround & support the tooth)

**Crown**
- is the visible part we bite with
  - consists of 4 components
    - Periodontium: the pink, visible cover
    - Gum or gingiva: covering & holding the root
    - Cementum: attachment fibres fastening tooth to the bone
    - Periodontal ligament: where the root is anchored

**Root**
- Alveolar bone: what it is, how it evolves

**Gum disease (periodontal disease) begins at the gum margin, and shows itself by gum bleeding, e.g. after toothbrushing, or even spontaneously**

**PROGRESSION OF GUM DISEASE:**

1. **GINGIVITIS**
   - Pregnancy hormones
   - Poor dental plaque removal
   - Stress
   - Poor oral hygiene

   Solution:
   - Good plaque removal including brushing twice a day and cleaning between the teeth as demonstrated by your periodontist/dentist/therapist/hygienist + removal of tartar by a dental professional
   - This will result in healing and no irreversible damage to the gums

2. **PERIODONTITIS**
   - Pregnancy hormones
   - Poor dental plaque removal
   - Stress
   - Poor oral hygiene
   - Gingiva: covering & holding the root

   Treatment:
   - Improvement in plaque removal + management of risk factors such as smoking + diabetes, deep scaling & cleaning below the gum margin + follow-up by periodontist/dentist/therapist/hygienist
   - This should stabilise the disease and prevent further damage to the supporting tissues
   - Initial treatment is followed by long term follow up care

Most pregnant women do suffer gum disease to a greater or lesser degree

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**EFP**
- European Federation of Periodontology

**BSP**
- British Society of Periodontology

**Oral Health & Pregnancy**

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