

BIOLOGICAL CAUSES, TREATMENT AND PREVENTION OF THE ORIGIN OF GINGIVITIS

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Annotation: Gingivitis (gum inflammation) usually happens before periodontitis (gum disease). But not all gingivitis leads to periodontitis. Most people get gingivitis at some point in their lives, and its mild symptoms make it easy to ignore. But without treatment, it can turn into bigger problems for your mouth. The good news is that you can prevent or even reverse it by simply brushing your teeth, flossing, and having regular dental cleanings and checkups.

Key words: gingivitis, inflammation, symptoms, causes, dentis.

In the early stage of gingivitis, bacteria in plaque build up, causing the gums to become inflamed and to easily bleed during tooth brushing. Although the gums may be irritated, the teeth are still firmly planted in their sockets. No irreversible bone or other tissue damage has occurred at this stage.

When you forget to brush, floss, and rinse with mouthwash, a sticky film of bacteria and food called plaque builds up around your teeth. The gunk releases acids that attack your teeth's outer shell, called enamel, and cause decay. After 72 hours, plaque hardens into tartar, which forms along the gum line and makes it hard to clean your teeth and gums completely. Over time, this buildup irritates and inflames your gums, causing gingivitis.

In a person with periodontitis, the inner layer of the gum and bone pull away from the teeth and form pockets. These small spaces between teeth and gums collect debris and can become infected. The body's immune system fights the bacteria as the plaque spreads and grows below the gum line.

Toxins or poisons - produced by the bacteria in plaque as well as the body's "good" enzymes involved in fighting infections -- start to break down the bone and connective tissue that hold teeth in place. As the disease progresses, the pockets deepen and more gum tissue and bone are destroyed. When this happens, teeth are no longer anchored in place, they become loose, and tooth loss occurs. Gum disease is the leading cause of tooth loss in adults. The goals of gum disease treatment are to promote reattachment of healthy gums to teeth; reduce swelling, the depth of pockets, and the risk of infection; and to stop disease progression. Treatment options depend on the stage of disease, how you may have responded to earlier treatments, and your overall health. Options range from nonsurgical therapies that control bacterial growth to surgery to restore supportive tissues. A full description of the various treatment options is provided in Gum Disease Treatments. Gingivitis can be reversed and gum disease can be kept

from getting worse in nearly all cases when proper plaque control is practiced. Proper plaque control consists of professional cleanings at least twice a year and daily brushing and flossing.

Brush your teeth twice a day. Use a soft-bristled brush and fluoride toothpaste. Replace your toothbrush every 3 months, or sooner if the bristles become frayed. Old, worn-out ones won't clean teeth as well. Brushing gets rid of plaque on the surfaces of the teeth that can be reached.

Flossing removes food particles and plaque from in between the teeth and under the gum line. Floss every day. Don't wait until something gets stuck between your teeth. Daily flossing gets plaque out of places your toothbrush can't reach. You can also try interdental cleaners, picks, or small brushes that fit in between teeth. Ask your dentist how to use them so you don't damage your gums.

Rinse your mouth. Antibacterial mouthwash not only prevents gingivitis, it fights bad breath and plaque. Antibacterial rinses can reduce bacteria that cause plaque and gum disease, according to the American Dental Association. Ask your dentist which mouthwash would work best for you.

Despite following good oral hygiene practices and making other healthy lifestyle choices, the American Academy of Periodontology says that up to 30% of Americans may be more likely to get gum disease because of their genes. And those who are genetically predisposed may be up to six times more likely to get some form of gum disease. If anyone in your family has gum disease, it may mean that you are at greater risk as well. If you are more likely to have gum disease, your dentist or periodontist may recommend more frequent checkups, cleanings, and treatments to better manage the condition.

If it's been 6 months since you last saw the dentist, set up a cleaning to remove tartar and plaque buildup from your teeth. Ask your dentist about the proper way to brush. Bearing down too hard or missing spots can lead to gingivitis. After a cleaning, your gums should get better within a week or so as long as you brush twice a day, and floss and rinse once a day.

According to the CDC, researchers have uncovered potential links between gum disease and other serious health conditions. In people with healthy immune systems, the bacteria in the mouth that makes its way into the bloodstream is usually harmless. But under certain circumstances, these microorganisms are associated with health problems such as stroke and heart disease. Diabetes is not only a risk factor for gum disease, but gum disease may make diabetes worse.

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