



**Source:** J Can Dent Assoc. 2010;76:a35

**Title:** Impact of periodontitis on the diabetes-related inflammatory status

**Authors:** Santos Tunes R, Foss-Freitas MC, Nogueira-Filho Gda R

**Overview:** This study was a literature review evaluating the effect of inflammation from periodontal diseases on glycemic control in diabetic individuals.

**Summary of research:**

- Meta analysis of 10 interventional studies
- 456 patients with type 1 or type 2 diabetes involved in the studies

**Results and conclusions:**

- Studies had conflicting results in terms of the effect of periodontal treatment on glycemic control
- Periodontitis induced chronic inflammation can contribute to the overall low grade inflammation that occurs in diabetes
- Active periodontal disease prevention to improve glycemic control should be considered as further studies are undertaken

**Key take-aways:**

The studies included in this meta-analysis demonstrated that mechanical periodontal therapy resulted in an average HbA1c reduction of 0.38%, which is not statistically significant. Other studies have shown significant improvement in glycemic control following perio therapy. The authors concluded by stating that periodontitis contributes to the total inflammatory burden, which may aggravate glycemic control. They further stated that even though evidence of the effect of perio treatment on diabetic control is conflicting at this time, proactive co-management between medical and dental professionals should be made while awaiting further studies.

**Implementation Strategies:**

As clinicians, most of us have seen for ourselves the relationship between diabetes and periodontal disease. We have also witnessed how quickly both conditions can worsen when one or both increase in activity. Certainly, co-management of the diabetic patient is indicated between the Dentist, Physician and Nutritionist or Dietitian. Let me share a simple communication technique that has worked well for many offices. Use a form letter with areas for customizing, leave a reply space at the bottom of the page and FAX the document to your colleague. (An example follows) Creating a line of communication using a FAX you will avoid the challenge of trying to set up a suitable time for a phone call. While email will work for this type of communication too, I find most busy people like to have a hard copy to work with. This type of outreach within your professional community is also a great source of external marketing resulting in patient referrals.

**Richard Nagelberg, DDS & Kim Miller, RDH, BSDH, RDHMP**  
531 West Germantown Pike Suite 104  
Plymouth Meeting, PA 19462



To have a professional impact beyond your local community, consider joining the American Academy of Oral Systemic Health (AAOSH) whose call to arms is: 'Putting People First'. AAOSH is an organization to change public and professional behaviors because of the importance of oral health as it relates to whole body health. Visit them at [aaosh.com](http://aaosh.com).

A FAX template follows.

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**Richard Nagelberg, DDS & Kim Miller, RDH, BSDH, RDHMP**  
531 West Germantown Pike Suite 104  
Plymouth Meeting, PA 19462



To: \_\_\_\_\_ Date: \_\_\_\_\_

Regarding our mutual patient: \_\_\_\_\_

I saw this patient on \_\_\_\_\_ for the following procedure(s):

- Comprehensive Exam / New Patient
- Comprehensive Exam / Periodic Exam / Existing Patient
- Periodontal Maintenance: Patient is: **stable / improving / failing**
- Preventive prophylaxis: Patient is: **stable / improving / failing**

I am consulting with you about the following:

- Diabetic status / HbA1c level
- Blood Pressure: \_\_\_\_\_ / \_\_\_\_\_
- C-Reactive Protein levels
- Nutrition & Antioxidant Status
- Progression of periodontal disease
- Other:

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Please reply in the space below and return by FAX to: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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**Thank you for your reply!**

**Sign here**

**Type Your name here**

**Richard Nagelberg, DDS & Kim Miller, RDH, BSDH, RDHMP**  
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Plymouth Meeting, PA 19462