Diabetes and Gum (Periodontal) Disease Children



Diabetes that isn't controlled well can lead to gum (periodontal) disease. This can happen at any age. Gum disease is an infection of the gums and the bones that hold the teeth in place.

How diabetes affects mouth health

Diabetes causes changes to blood vessels. This affects the flow of nutrients to your body tissues. It affects how waste is removed from tissues. This can weaken the gums and jaw bone. It can raise your risk for infection.

If diabetes isn't controlled well, higher blood sugar levels in saliva will help bacteria grow. This can cause gum disease. Poor blood sugar control makes it harder for your immune system to fight gum disease. And gum disease may make it harder to control your diabetes.

Smoking is a third factor that's harmful to oral health. If you have diabetes and you smoke, you're at a much higher risk for gum disease than a person who doesn't have diabetes.

What are the symptoms of gum disease?

These are the most common symptoms of gum disease:

- · Red, swollen, sore gums
- · Bleeding while brushing, flossing, or both
- · Receding gums
- Loose or separating teeth
- Ongoing (chronic) bad breath or a strange taste in your mouth
- Dentures that no longer fit
- Pus between the teeth and gums
- · A change in bite and jaw alignment

The symptoms of gum disease may look like other conditions. Talk with a dentist or other oral health specialist for a diagnosis.

What are the types of gum disease?

Gum disease is staged when the dentist assesses it. The stages are:

- **Gingivitis.** This is the mildest form of gum disease. The gums become red, swollen, and sore. They may bleed easily during daily cleaning and flossing. Treatment by a dentist and good care at home help stop gingivitis.
- Mild periodontitis. Untreated gingivitis leads to mild periodontitis. In this stage of gum disease, gums
 pull away from the teeth. This causes a pocket between the teeth and gums. Bacteria can settle here.
 This can lead to early loss of bone around the teeth. Quick medical care can stop more damage.
- Moderate to advanced periodontitis. This is the most advanced stage of gum disease. There is major bone loss, deepening of gum pockets, and may be receding gums around the teeth. Your teeth may move and change how you bite. Teeth may loosen and need to be pulled.

Treatment for gum disease

Treatment may include any of these:

- Deep cleaning. This means tartar and plaque removal beneath the gums. It's also called scaling and
 root planing. It can help remove the plaque and tartar under the gums. It can remove infected tissue in
 the early stages of the disease. It can smooth the damaged root surfaces of the teeth. The gums can
 then reattach to the teeth.
- Medicine. Antibacterial medicines may be put in the gum pockets. Or you may take this medicine by mouth.
- Surgery. When the disease is advanced, the dentist will clean the infected areas under the gums. Then they will reshape or replace the tissues. Types of surgeries include:
 - Pocket reduction
 - o A regeneration procedure
 - A soft-tissue graft
 - Crown lengthening
- Dental implants. These can permanently replace teeth that have been extracted. They can also serve
 as an anchor for dentures. If you have dentures, they should fit well and not be loose.

Other oral problems from diabetes

Diabetes can cause other oral problems. These include:

- **Thrush.** Thrush is a fungal infection of the mouth. It happens more often in people with diabetes. This is because of high blood sugar in the saliva. Fungus thrives on sugar.
- Burning feeling. Uncontrolled blood sugar can cause a burning feeling in your mouth.
- Dry mouth. Dry mouth is often a symptom of undiagnosed diabetes. It means the mouth doesn't have
 enough saliva to keep itself wet. Saliva helps digest food. It also helps prevent infection and tooth
 decay. It does this by controlling bacteria and fungi. Dry mouth can make it harder to taste, chew, and
 swallow food. It can affect how you speak. It can cause mouth infections and tooth decay.

Symptoms of dry mouth may include sticky, dry mouth, dry lips, sense of burning in the mouth, rough tongue, and mouth sores or infection.

To help prevent dry mouth symptoms:

- o Take frequent sips of water or sugarless fluids.
- O Drink fluids during meals.
- Don't drink caffeine.
- Don't eat spicy or salty foods.
- Don't use tobacco or drink alcohol.
- Use a humidifier at night.
- o Chew sugarless gum or sugarless candy.
- O Use medicine your dentist may prescribe to help keep your mouth moist.

How to brush and floss well

Good care of your teeth and gums can help prevent oral problems linked to diabetes. These tooth brushing and flossing tips are advised by the National Institutes of Diabetes and Digestive and Kidney Diseases:

- Brush 2 to 3 times daily with a soft, nylon brush with rounded bristles and fluoride toothpaste.
- Use small, circular motions and short back-and-forth motions. Don't use hard back-and-forth motions.

Brushing

- · Brush your tongue each time you brush your teeth.
- Brush for about 3 minutes to clean all of the teeth well.
- Brush the top, back, and front of each tooth.
- Use about 18 inches of dental floss each time you floss.
- Floss at least 1 time a day.
- Don't use a sawing motion in between the teeth.

Flossing

- Curve the floss around each tooth and scrape up and down several times, from below the gum to the top of the tooth.
- · Rinse after flossing.

Talking with your dentist

Your dentist is part of your diabetes management team. Tell your dentist about changes in your health or medicines at each visit. You can tell them your diabetes test results. This includes your A1C test results or your fasting blood glucose test results. This can help the dentist better manage your dental care. If your diabetes isn't controlled well, ask your dentist if you need antibiotics before and after dental treatment.

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