



CLINICS AND DIAGNOSTIC OF PERIODONTAL DISEASES

Popovich Ivan Yurevich
Ph. D, assistant of department

Classification of periodontal diseases

N.F. Danilevskiy(1994)

I. Inflammatory diseases

1. Papillitis, gingivitis
2. Localized periodontitis

Primary Secondary
Primary

II. Dystrophic-inflammatory diseases and dystrophic diseases

1. Generalized periodontitis
2. Periodontosis

III. Progressive idiopathic diseases

IV. Productive processis(parodontomas)

Non-malignant and malignant

S
e
c
o
n
d
a
r
y

Inflammatory diseases of periodontium

Papillitis – inflammatory diseases one or two interdental papilla (primary or secondary)

Classification of papillitis (by Danilevskiy N.F., 1958)

1. Catarrhal (*acute, chronic*)
2. Hypertrophic (*with subacute course, chronic, with symptoms gemoragy*)
3. Atrophic
4. Ulcerous



Inflammatory diseases of periodontium

Papillitis

Complains



Discomfort, mild pain, heaviness, itching in a specific area of the dentition during eating, the ingestion of food in contact with residues interdental, application of hygiene, bleeding by mechanical stimulation.

Aching pain in the problem region, which increased at night (ulcerative papillitis)

Anamnesis of disease

Determined etiology.

The presence action of the causative factors (physical, chemical, biological) to the region of the papilla.

Anamnesis of life

Determined etiology.

The presence of somatic disorders, neuro-regulation of the secondary process

Inflammatory diseases of periodontium

Papillitis

Objective
status(general)

Primary

General status
without change

Secondary

May be changes of general status, which specific for present somatic pathology

Inflammatory diseases of periodontium

Papillitis

Objective local
status



Absence reaction
of regional
lymphatic nodes



CHANGE OF:

- ◆ color (arterial
- ◆ or venous hyperemia)
- ◆ shape
- ◆ consistence
- ◆ sensitivity papillae during palpation



PRESENCE
OF GINGIVAL
POCKET



BLEEDING DURING
PROBING

Inflammatory diseases of periodontium

Papillitis

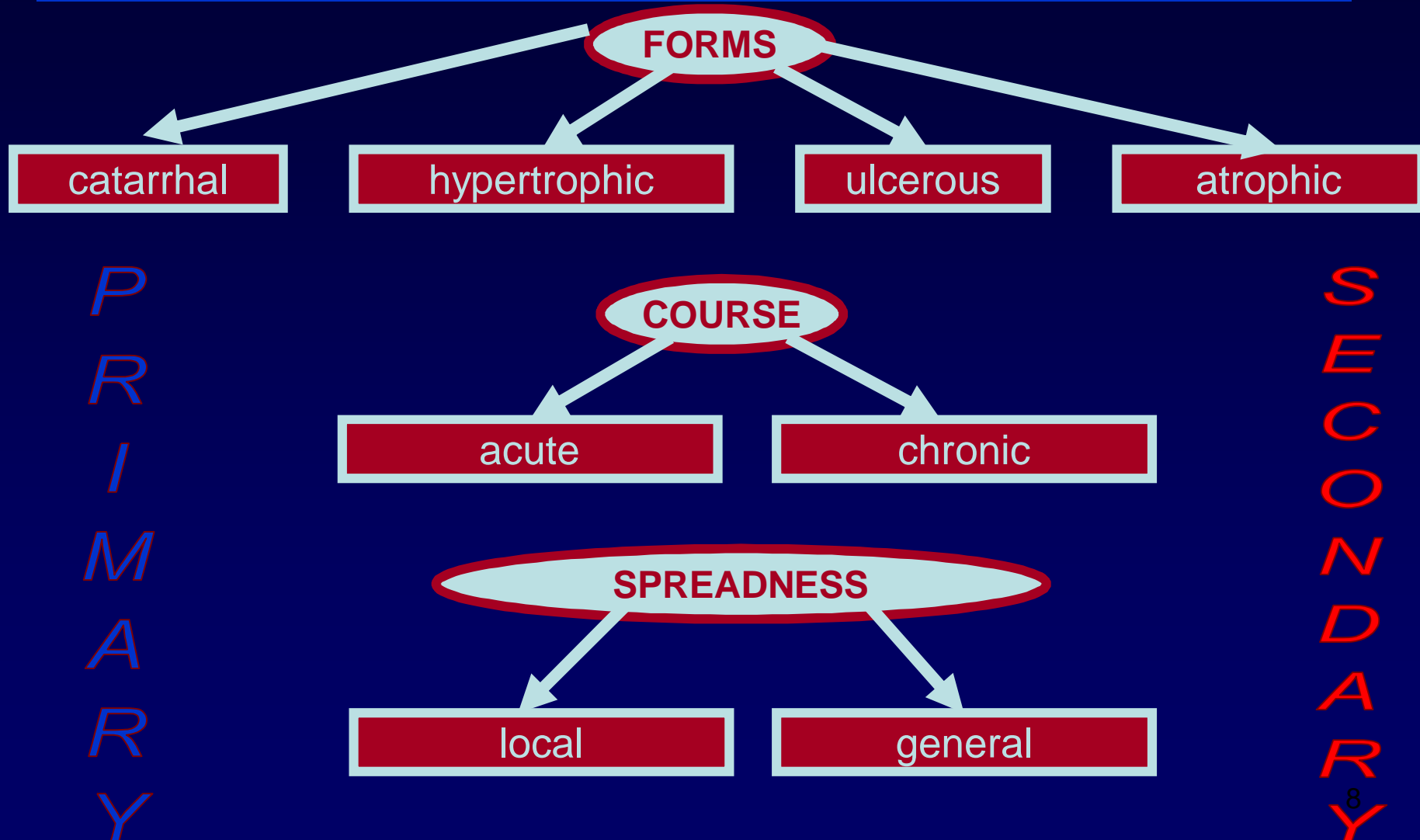
Objective local
status



Presence of illness factors

Inflammatory diseases of periodontium

Gingivitis – inflammation of the gum (primary and secondary)
without destruction of dento-gingival junction



Inflammatory diseases of periodontium

Gingivitis

Complains

Painfulness of the
gum,
discomfort in the gums

Bad breath

Bleeding of the gum:

- during brushing
- during bite hard food
- spontaneous

Inflammatory diseases of periodontium

Gingivitis

Complains

S
e
c
o
n
d
a
r
y

By the general
status
(malaise,
headache,
fever, skin rash
...)

F
o
r

a
c
u
t
e

Increased the
bleeding

Burning, fullness
in the gums

F
o
r

h
y
p
e
r
t
r
o
p
h
i
c

Aesthetic
defect in
proliferation
gums

F
o
r

u
l
c
e
r
o
u
s

Pain in gum

Difficult during
eating

Putrid smell
from the mouth

By the general
status
(malaise,
headache,
fever)



Inflammatory diseases of periodontium

Gingivitis

Anamnesis of diseases

■ The beginning of illness— imperceptible or associated with the action of pathogenic factors

1. Supragingival tooth deposits
2. Not good fabricated fills, orthopedic and orthodontics constructions
3. Acute margins of the tooth, carious cavity
4. Mechanical, thermal, chemical, radiation trauma
5. Extreme mechanical load on tooth
6. Anomalies and deformations of the bite, dental arch, tooth
7. Anomalies of soft tissues of oral cavity
8. Small vestibulum of oral cavity

- I. Stress and psychoemotional tension
- II. Diseases of inner organs
- III. Intoxications (infections, chemical)



Inflammatory diseases of periodontium

Gingivitis

Anamnesis of diseases

- Communication signs of disease to the general non-specific symptoms (for secondary)
- Previous treatment (when, where, efficiency) (important for chronic process, especially secondary)
- seasonality (for catarrhal, ulcerous)



Inflammatory diseases of periodontium

Gingivitis

Anamnesis of life

- ☐ Style of life
- ☐ Previous diseases, injury, operations
- ☐ Inner diseases
- ☐ Allergic anamnesis
- ☐ Bad habits
- ☐ Taken drugs in the past and present

For primary – without features, for secondary - weighed down



Inflammatory diseases of periodontium

Gingivitis

General objective status

Primary

May be change of general status by ulcerous gingivitis medium and hard level (if present intoxication)

Secondary

May be changes of general status which specific for present inner pathology

Inflammatory diseases of periodontium

Gingivitis

Local objective status

□ On palpation of lymph nodes maxillofacial changes are present by:

- expressed acute catarrhal gingivitis,
- ulcerous (primary) gingivitis
- secondary gingivitis (if these symptom specific for somatic pathology)

- Size
- consistence
- connection with the skin
- connection between nodes
- painfulness

Inflammatory diseases of periodontium

Gingivitis

Local objective status



CHANGES:

Acute catarrhal

- ◆ color (arterial or venous hyperemia),
- ◆ form,
- ◆ consistence,
- ◆ sensitivity of the gum



PRESENT GINGIVAL POCKETS



PRESENT OF HALITOSIS



ABSENT PATHOLOGICAL MOBILITY OF
THE TOOTH



SUPRAGINGIVAL DENTAL PLAQUE

Chronic catarrhal 16

Inflammatory diseases of periodontium

Gingivitis

Local objective status

Formaline probe(C.Parma, 1960)

Determining the integrity of dentogingival connection

(5 mm 40% formaline, 20 ml glycerine, 175 ml of water)

A – gingival sulcus in normal condition, during probing penetration in epithelium max. – 2mm.

B – gingival pocket with gingivitis. Loose of epithelium connection is absent

C – gingival pocket with gingivitis by edema, loose of epithelium connection is absent



Probing of gingival sulcus

GP

GP

Inflammatory diseases of periodontium

Gingivitis

Index estimation the condition of gingiva

Index of degree inflammation in gum

- PMA (1960)
- Sillness-Loe (1963)
- Russel (1956)
- Ramfjord (1974)
- SBI – gum bleeding (1958)
- PBI – papillae bleeding(1977)
- probe Shiller-Pisarev



Index of degree destruction of periodontal tissues

- Ramfjord (1959),
- Sandler-Stahl (1957),
- Miller – gum recession(1985)

Inflammatory diseases of periodontium

Gingivitis

Hygiene condition of oral cavity

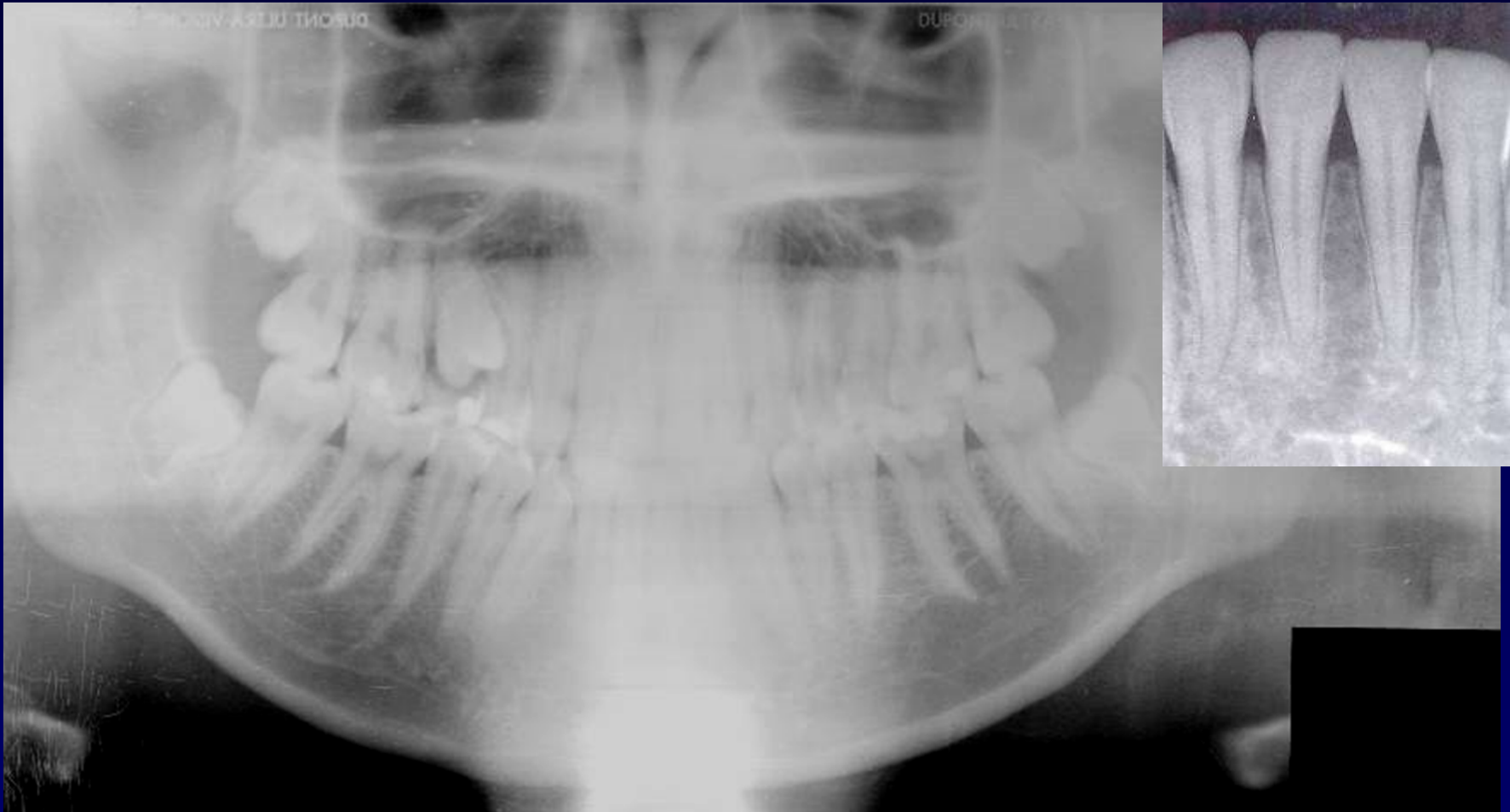


- Green-Vermillion (1964),
- Sillness-Loe (1962)
- HYG – interdental hygienic index (Rateitchak, 1989)
- by Fedorova-Volodkina

Inflammatory diseases of periodontium

Gingivitis

Additional methods



Chronic general catarrhal gingivitis

Inflammatory diseases of periodontium

Gingivitis

Additional methods

Probe Roterr's Determination of tissue saturation with ascorbic acid
(2,6-dichlorophenolindophenol - paint Tilemans)

Biochemical analysis of blood

Clinical analysis of venous blood

Cytomorphometry

Probe of Yasinovsky Activity of the inflammatory process, the
state of local immune mediated.

Inflammatory diseases of periodontium

Gingivitis

Additional (functional) methods

- Reoparodontography
- Laser Doppler flowmetry
- High-frequency ultrasound
- Doppler
- Capillaroscopy, contact biomicroscopy
- Probe of Kulagenko

✓
E
S
S
E
L
S

B
O
N
E

- ✓ Ultrasonic ehoosteometriya
- ✓ Densitometry (X-ray, ultrasound)

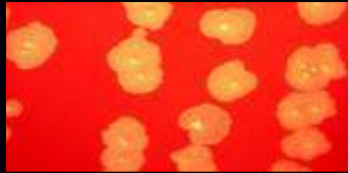
Inflammatory diseases of periodontium

Gingivitis

Additional (microbiological) methods

General catarrhal gingivitis

staphylococcal infection– **chronic activation**
with frequent exacerbations



Enterobacter spp.



Pseudomonas
aeruginosae



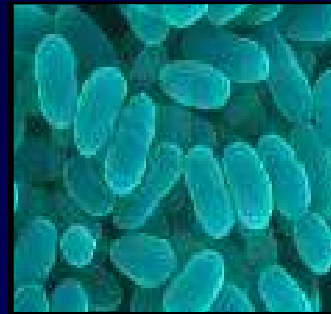
Bacteroides forsythus

Associants fungi Candida with Staph. and strept. – **current active chronic inflammation**



Candida albicans

streptococcal infection–
lingering inflammation

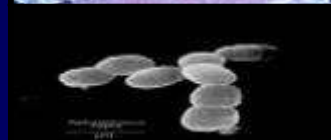


Streptococcus
sanguis

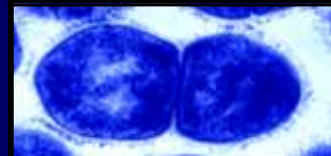
Streptococcus
mutans



Streptococcus
haemolyticus



Peptostreptococcus
micros



Streptococcus
intermedia

Inflammatory diseases of periodontium

Gingivitis

Additional (microbiological) methods

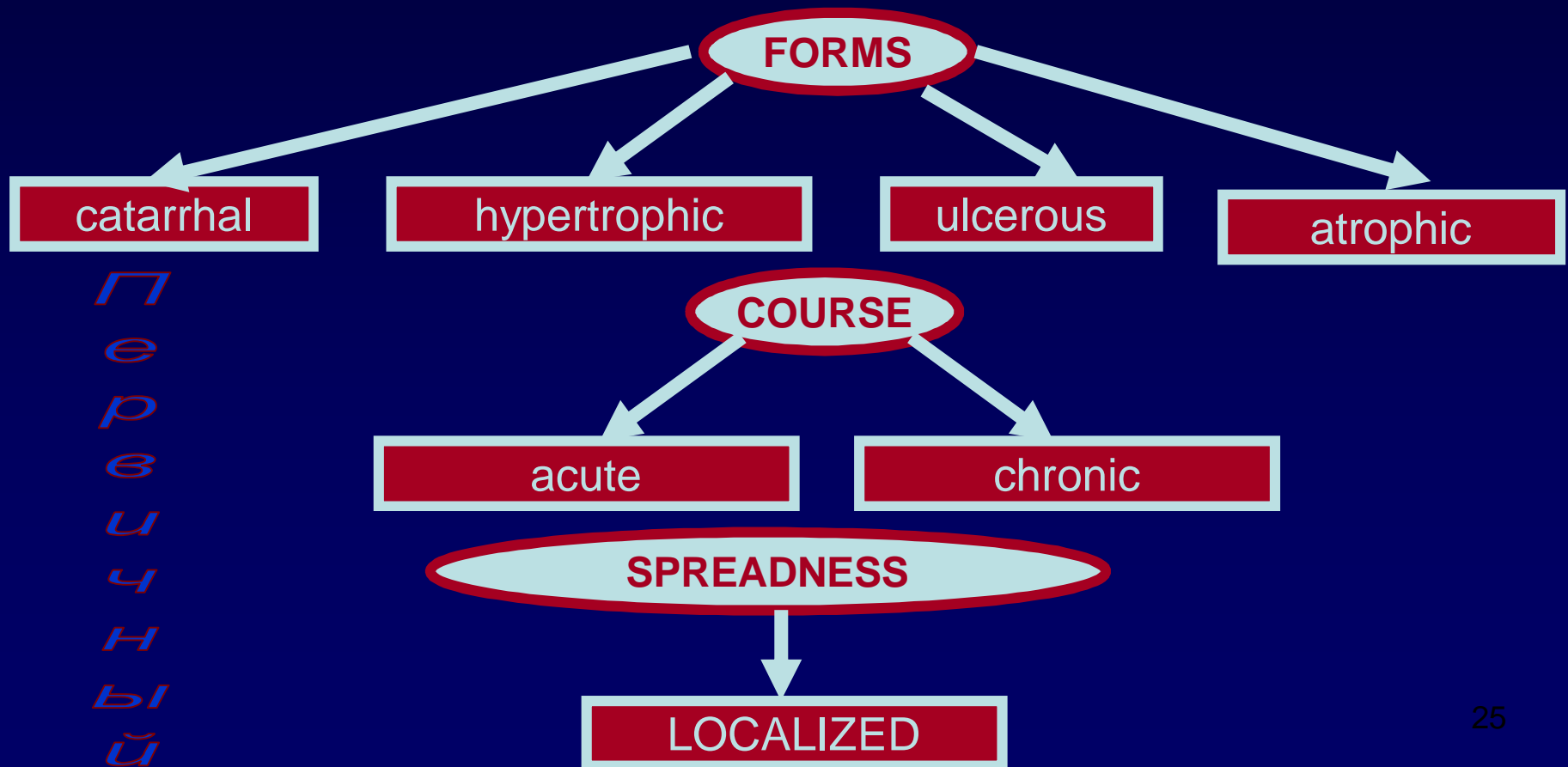
Ulceronecrotic (Vincent)



fusiform bacillus
spirochete Vincent

Inflammatory diseases of periodontium

Localized periodontitis – inflammation-dystrophic diseases of periodontal tissues (primary) with destroyed of tooth-gingival junction in one sextant of the



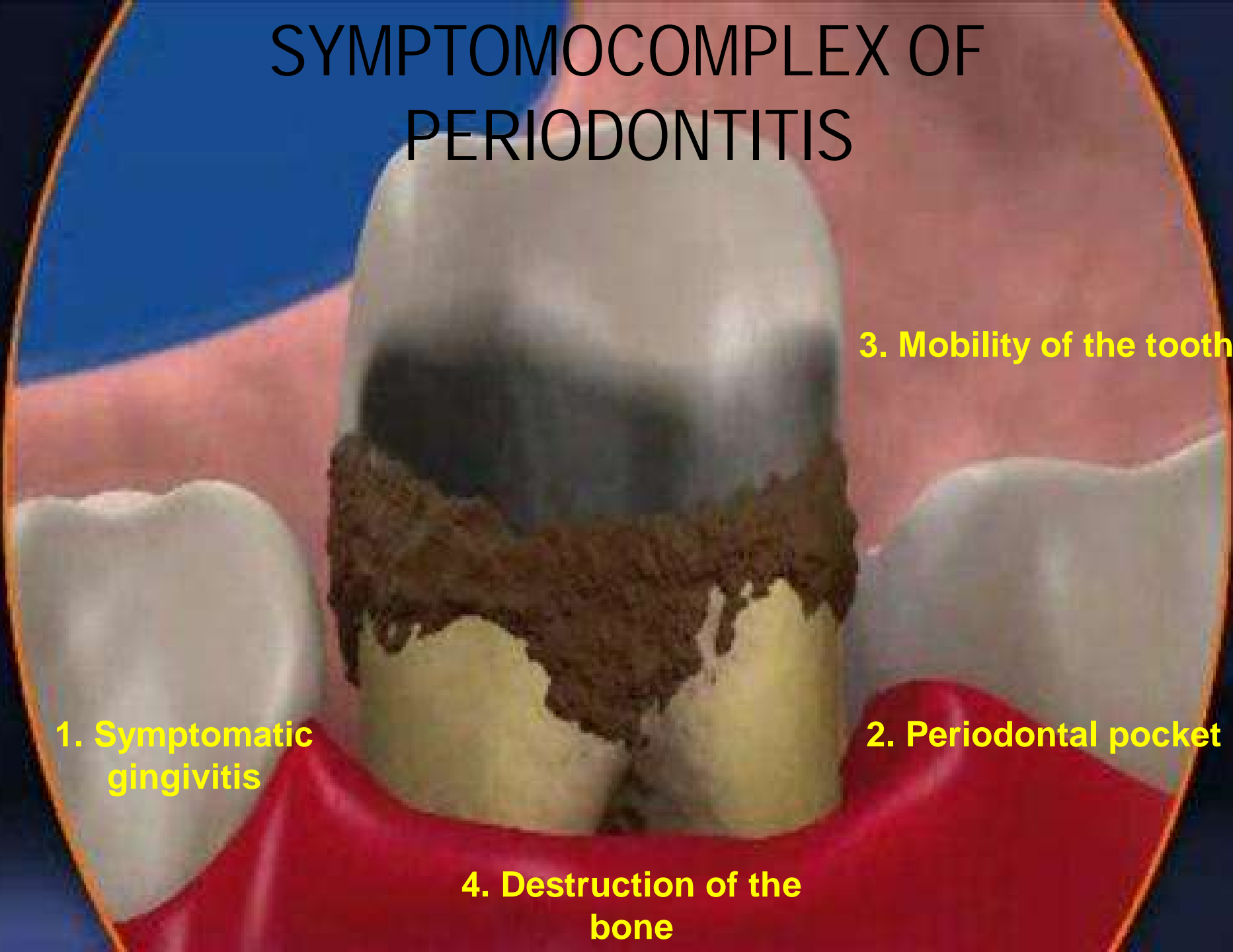
SYMPTOMOCOMPLEX OF PERIODONTITIS

1. Symptomatic
gingivitis

3. Mobility of the tooth

2. Periodontal pocket

4. Destruction of the
bone



Inflammatory diseases of periodontium

Localized periodontitis

Complains

1. Symptomatic gingivitis

Gum painless,

Discomfort in the gum

Bad breath

Bleeding of the gum:

- during brushing
- by bite hard food
- spontaneous



Inflammatory diseases of periodontium

Localized periodontitis

Complains

Aesthetic defect at lowering the gums and
teeth dysposition

High sensitive of the tooth to
temperature, chemical and mechanical
irritation factors

Tooth mobility

Inflammatory diseases of periodontium

Localized periodontitis

Anamnesis of disease

■ Start of disease — imperceptible or associated with the action of pathogenic factors

1. Dental calculus
2. Not good fabricated fillings, orthopedic and orthodontic construction
3. Acute margins of the tooth, carious cavity
4. Mechanical, thermal, radial, chemical trauma
5. Extreme mechanical load on tooth
6. Anomalies and deformations of the bite, dentition and tooth.
7. Anomalies of soft tissues in oral cavity
8. Extreme mechanical load on tooth

■ Previous treatment (when, where, effect) (important for chronic process)

■ Seasonality



Inflammatory diseases of periodontium

Localized periodontitis

Anamnesis of life

- ☐ Style of life
- ☐ Previous diseases, trauma, operations
- ☐ Present diseases
- ☐ Allergy anamnesis
- ☐ **Bad habits**
- ☐ Used drugs in past and present time

Without features



Inflammatory diseases of periodontium

Localized periodontitis

Objective general status

WITHOUT FEATURES

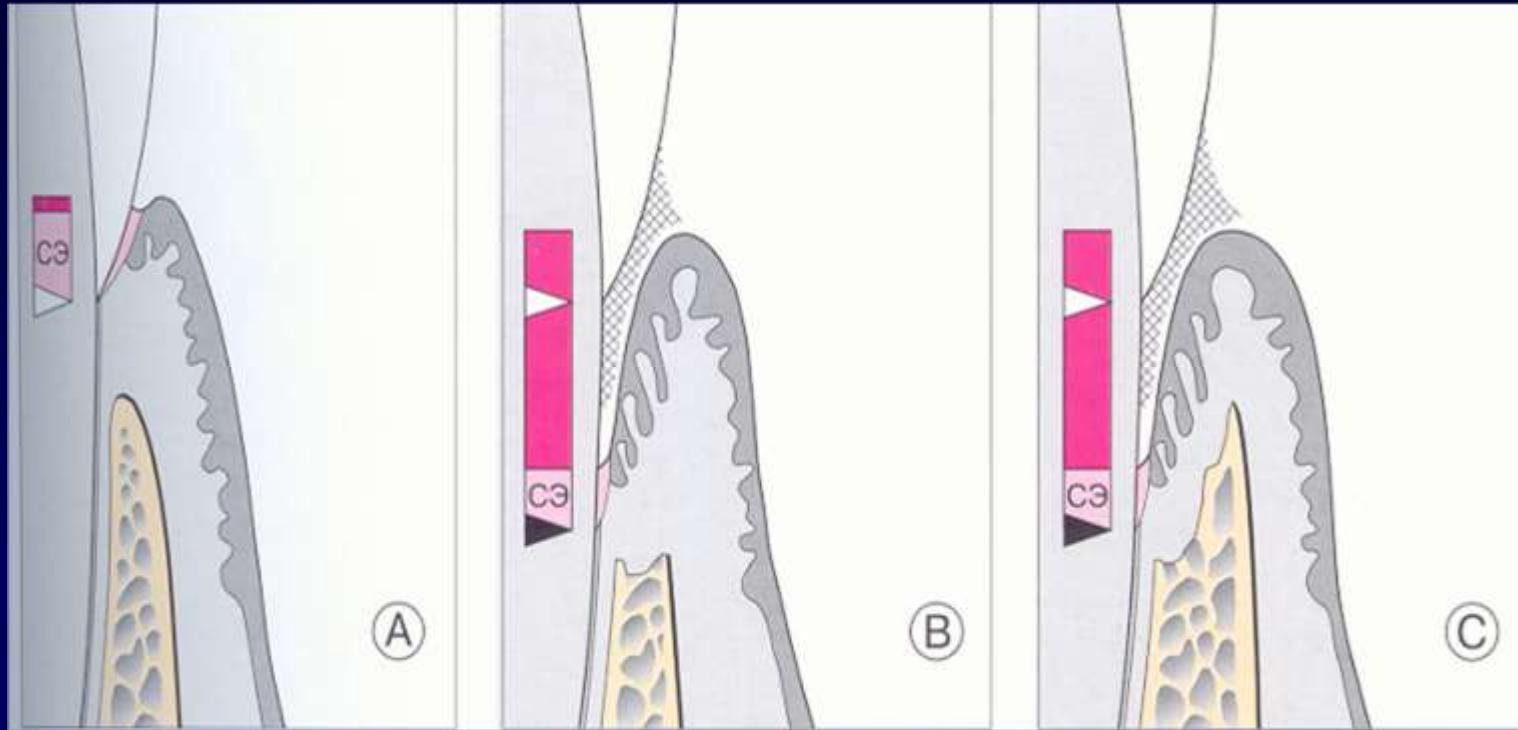
Local objective status

- ➡ ABSENCE REACTIONS OF REGIONAL LYMPH NODES (in chronic process)
- ➡ PRESENCE OF SYMPTOMATIC GINGIVITIS (objective status is the correspondce of form of the gingivitis)
- ➡ APPEAR OF PERIODONTAL POCKETS (depth is correspondce of severity)
- ➡ APPEAR OF PATHOLOGICAL MOBILITY OF THE TOOTH

Inflammatory diseases of periodontium

Localized periodontitis

DIAGNOSTIC OF PERIODONTAL POCKETS



A – gingival sulcus in norm, apical region of CE is localized on the level of cementum-enamel border

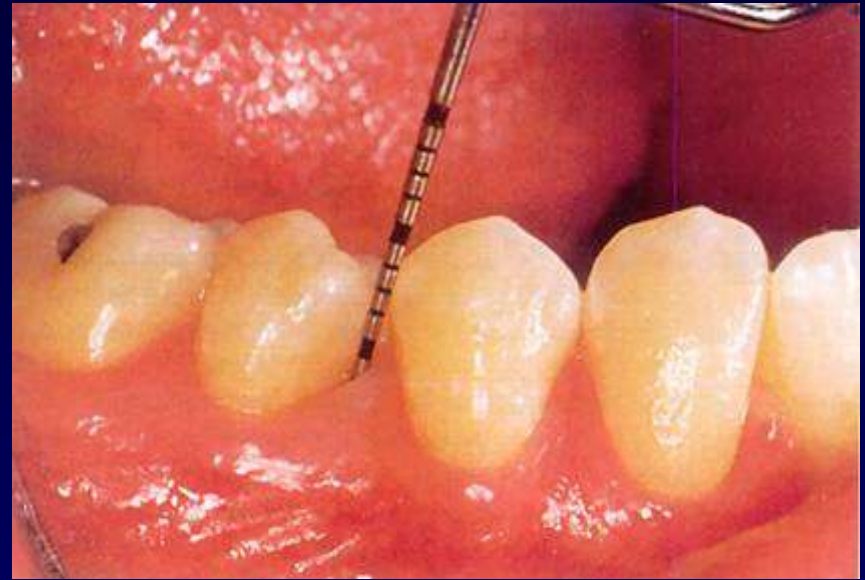
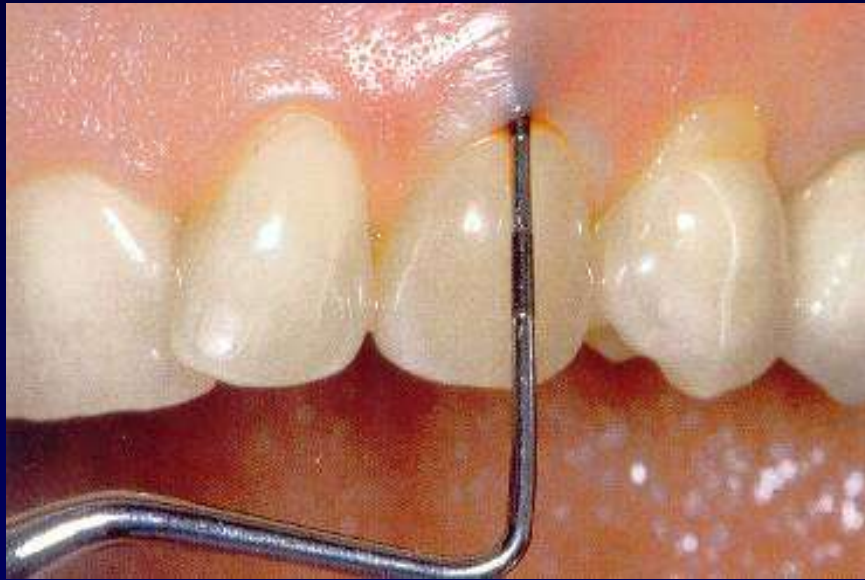
B – Suprabone pocket, loose of connection, proliferation of epithelium of pocket. On the bottom of pocket – remains of CE.

C – intrabone pockets

Inflammatory diseases of periodontium

Localized periodontitis

DIAGNOSTIC OF PERIODONTAL POCKETS



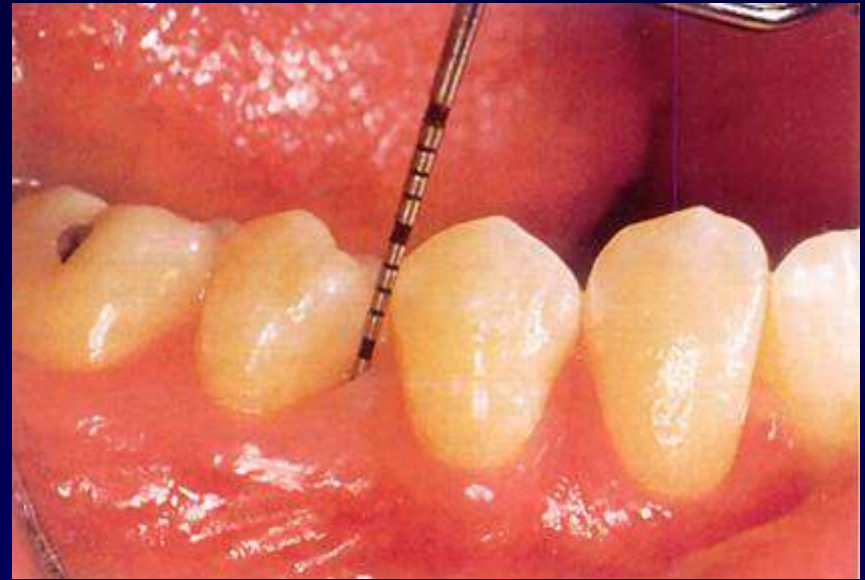
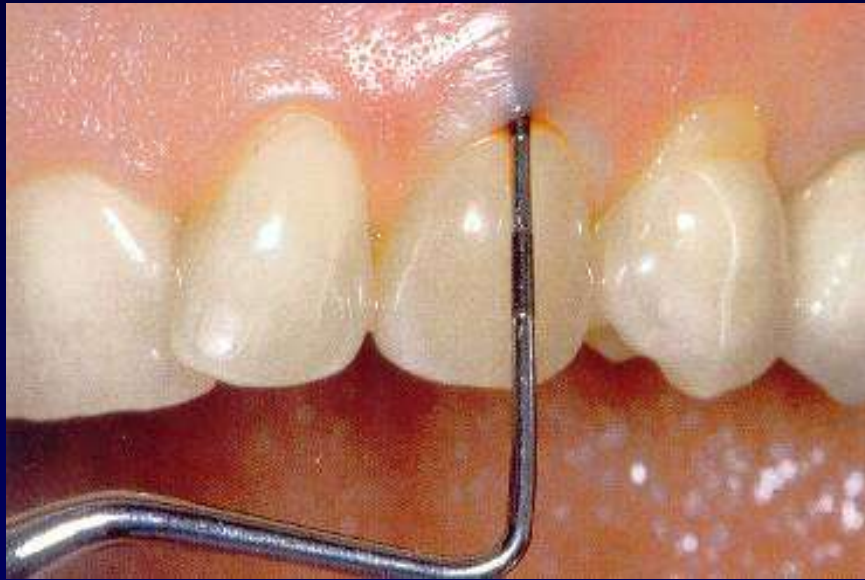
Pocket depth (PD) – the distance from the gingival margin to the point where the probe stops (imprecise measurement)

Clinical level of connection (CLC) – the distance from cementum-enamel border to the point where the probe stop (precise measurement)

Inflammatory diseases of periodontium

Localized periodontitis

DIAGNOSTIC OF PERIODONTAL POCKETS



Loose of attachment (connection)

I degree – loose till 3,5 mm

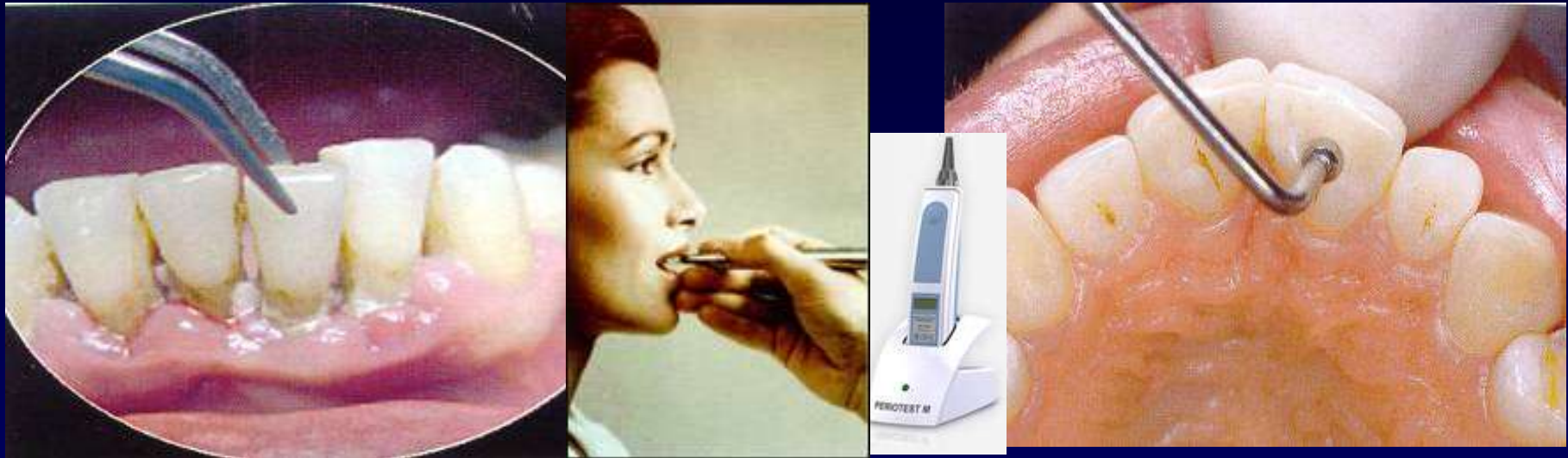
II degree – loose 4-5 mm

III degree – loose over 5 mm

Inflammatory diseases of periodontium

Localized periodontitis

DIAGNOSTIC STATIC OF THE TOOTH



PATHOLOGICAL MOBILITY

I stage of periodontitis – I level of tooth mobility

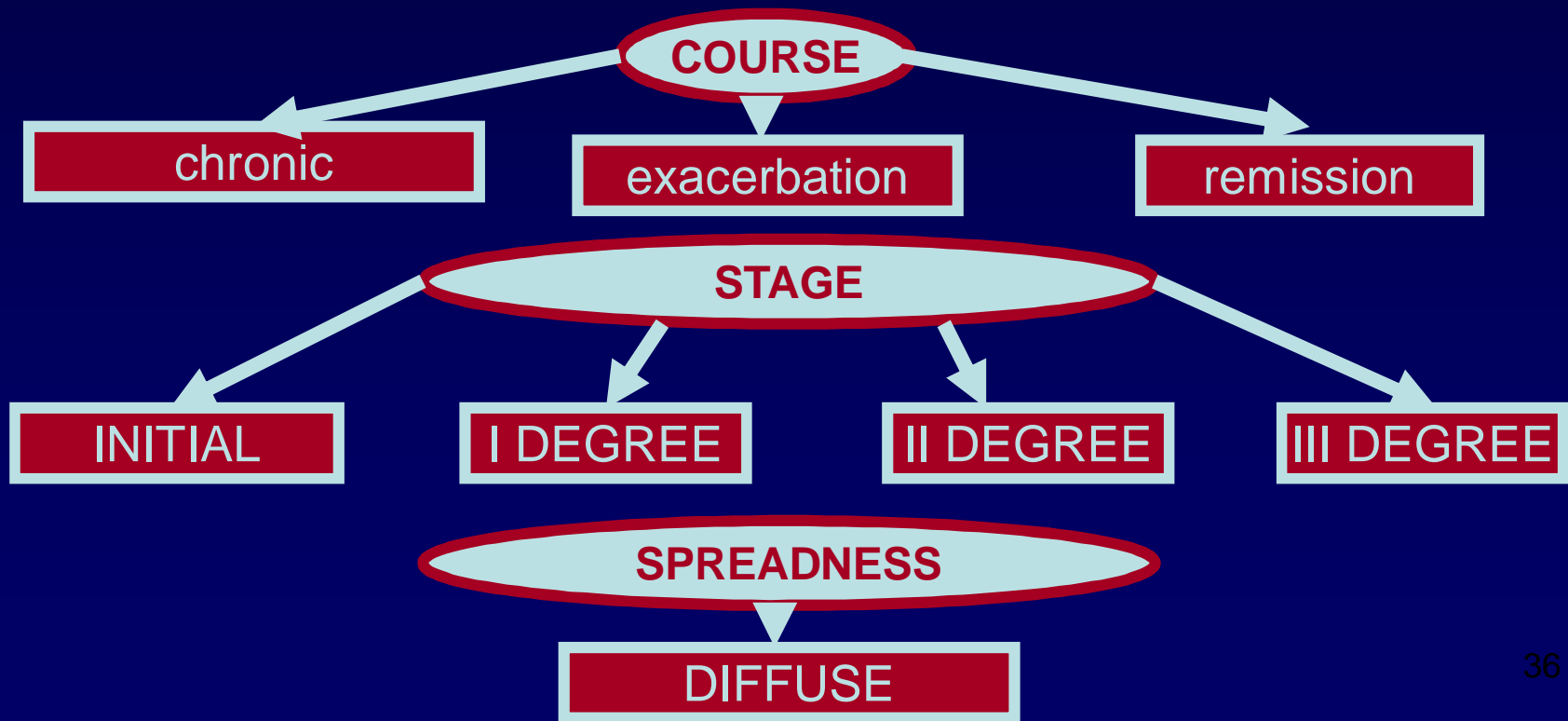
II stage of periodontitis – I, II level of tooth mobility

III stage of periodontitis – I-III level of tooth mobility

Inflammatory-dystrophic diseases of periodontium

Generalized periodontitis - inflammatory-dystrophic diseases of periodontal tissues (secondary) with destroyed of tooth-gingival junction

В
м
о
р
у
ч
н
ы
й



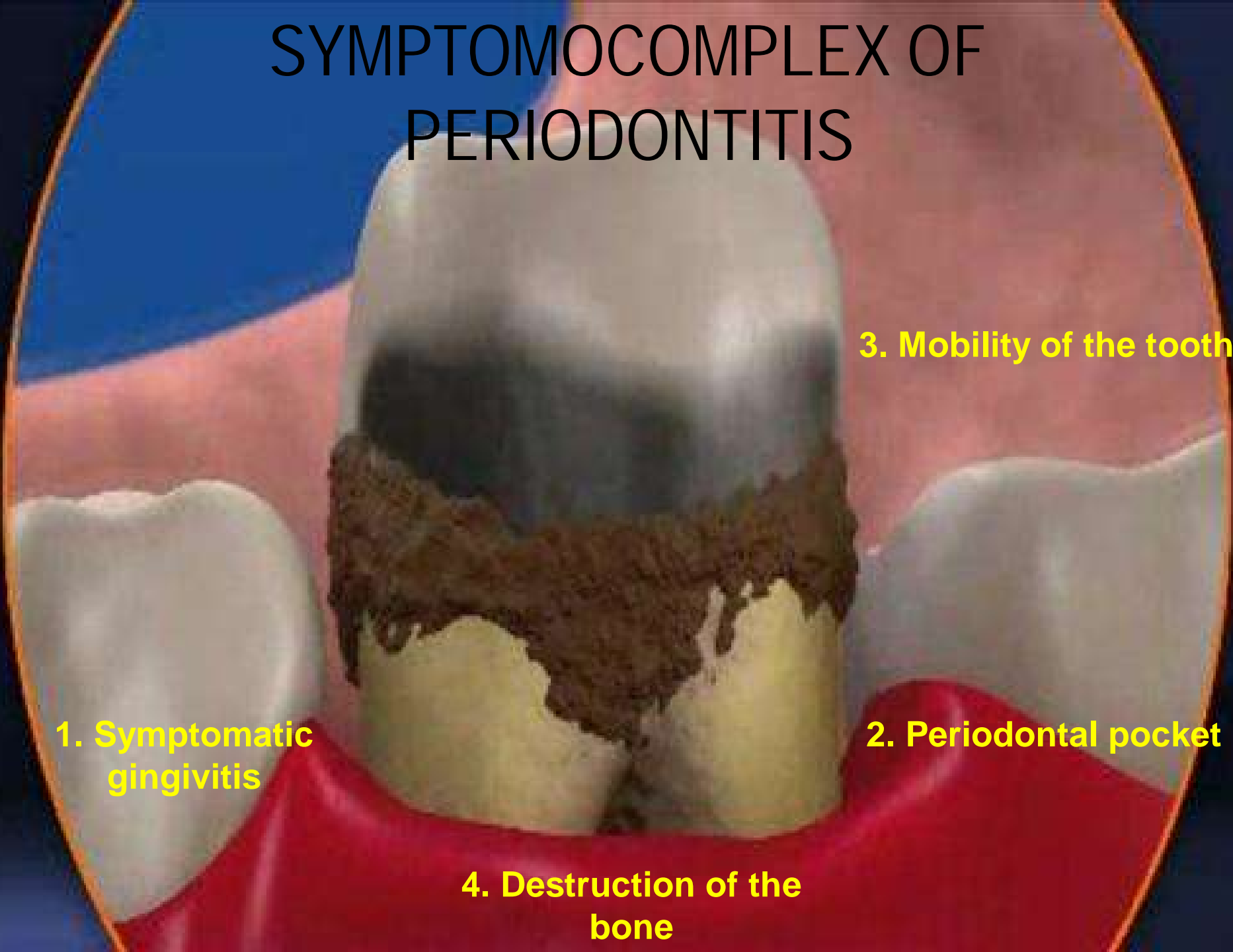
SYMPTOMOCOMPLEX OF PERIODONTITIS

1. Symptomatic
gingivitis

3. Mobility of the tooth

2. Periodontal pocket

4. Destruction of the
bone



Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Complains

1. Symptomatic gingivitis

Gum painless,

Discomfort in the gum

Bad breath

Bleeding of the gum:

- during brushing
- by bite hard food
- spontaneous

Inflammatory-dystrophic diseases of the periodontium

Generalized Periodontitis

Complains

Aesthetic defect at lowering the gums and
teeth nomination

High tooth sensitive to temperature,
chemical, mechanical factors

Tooth mobility

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Complain

Loose of the tooth

The formation of heavy deposits on teeth

Change position of the tooth,
diction

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Complains at exacerbation

Pain in the gum during brushing, eating

Increased gum
bleeding

The appearance
of the gum
swelling

Appearance of ulcerous on
the gum

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Complain at remission



Aesthetic defect at lowering the gums and
teeth nomination

High tooth sensitive to temperature,
chemical, mechanical factors



Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Anamnesis of diseases

- Start of diseases— imperceptible or associated with the action of pathogenic factors:
 - **Social**
 - **Biological**
 - **physical**
 - **Chemical**
 - **Cosmic-planetary**
- Connection appear signs of diseases with general nonspecific symptoms of somatic pathology
- Previous treatment (when, where, effect)
- Seasonality



Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Anamnesis of life

- ☐ Style of life
- ☐ Heredity (especially for women)
- ☐ Profession (place of work)
- ☐ Previous diseases, trauma, operations
- ☐ Present diseases
- ☐ Allergic anamnesis
- ☐ Bad habits
- ☐ Used drugs in past and present

weighed



Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

General objective status

May be changes of general status, which specific for present somatic pathology

Local objective status

- ➡ ABSENCE REACTION OF REGIONAL LYMPH NODES (at chronic process, remission)
- ➡ SYMPTOMATIC GINGIVITIS (objective status corresponds form of gingivitis)
- ➡ PRESENCE OF PERIODONTAL POCKET (depth corresponds heavy)
- ➡ PATHOLOGICAL TOOTH MOBILITY

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Index estimation the condition of gingiva

Index of degree inflammation in gum

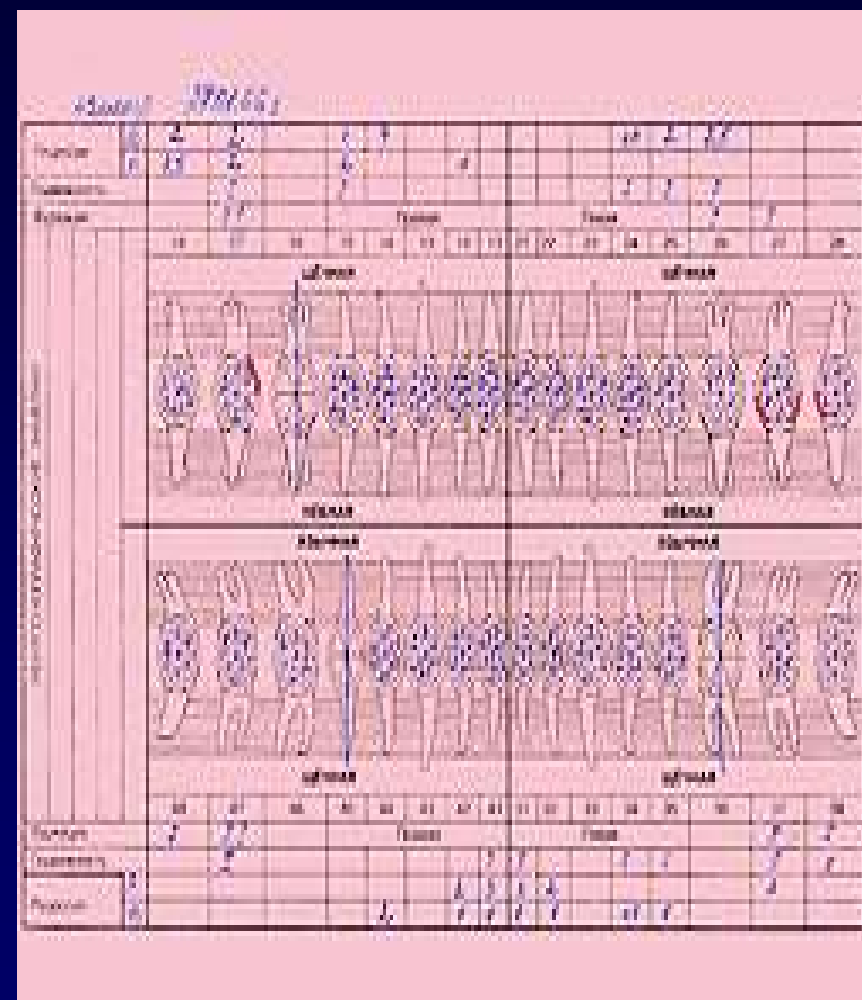
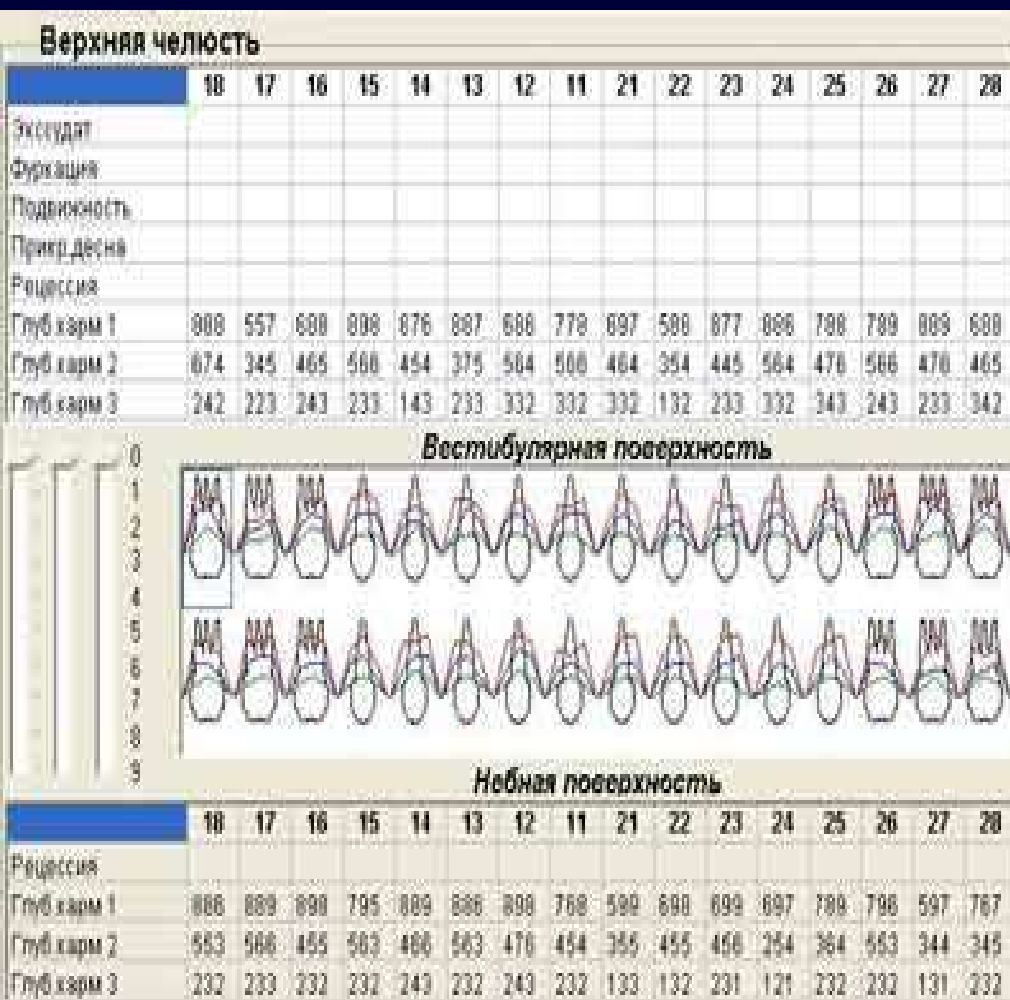
- PMA (1960)
- Sillness-Loe (1963)
- Russel (1956)
- Ramfjord (1974)
- SBI – gum bleeding (1958)
- PBI – papillae bleeding (1977)
- Probe Shiller-Pissarev



Index of degree the destruction of periodontium

- Ramfjord (1959),
- Sandler-Stahl (1957),
- Miller – gum recession (1985)

Write of periodontogramm



Write of periodontogramm

Дата осмотра 1 22.06.04 2 3

	18	17	16	15	14	13	12	11	28	22	23	24	25	26	27	28	
молудит																	молудит
фуркации		+															фуркации
подвижность																	подвижность
тона пр. дес.																	тона пр. дес.
рецессия																	рецессия
гальв. 3																	гальв. 3
гальв. 2																	гальв. 2
гальв. 1																	гальв. 1

постерулярная подвижность

П
Р
А
В
О

восьмая подвижность

	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28	
гальв. 1		665		554	552	343					844		443				гальв. 1
гальв. 2																	гальв. 2
гальв. 3																	гальв. 3
рецессия																	рецессия

П
Р
А
В
О

	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28	
гальв. 1		48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38
гальв. 2								4	5	5	5						гальв. 2
гальв. 3																	гальв. 3
гальв. 2																	гальв. 2
гальв. 1																	гальв. 1

гальв. подвижность

П
Р
А
В
О

медиальная подвижность

	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28	
гальв. 1				242	262	344	501	304	244	239	244	239	239	235	235		гальв. 1
гальв. 2																	гальв. 2
гальв. 3																	гальв. 3
рецессия							4	4	5	5	5	4					рецессия
тона пр. дес.																	тона пр. дес.
подвижн.								6	6	6	6						подвижн.
фуркации																	фуркации
молудит																	молудит

П
Р
А
В
О

Первый контакт в нецентральной окклюзии между _____ клы - во нем между нецентральной губной и нижней
 осевой контакта в центральной окклюзии _____ мм.

Figure 1 is a dental chart for a patient. The chart displays the maxillary and mandibular arches with various dental procedures indicated by colored codes. The legend on the right includes:

- Legend:**
 - Fillings (Composite, Amalgam, Glass Ionomer)
 - Crowns (Metal, Ceramic, Metal-Ceramic)
 - Bridges (Metal, Ceramic, Metal-Ceramic)
 - Extractions (Upper, Lower)
 - Implants (Mandibular, Maxillary)
 - Orthodontics (Brackets, Bands, Aligners)
 - Periodontics (Scaling, Root Planing, Grafts)
 - Endodontics (Root Canal, Periapical, Apical)
 - Prosthetics (Partial, Complete)
 - Other (X-ray, CBCT, Panoramic)
- Chart Details:**
 - Maxillary Arch:** Shows various procedures including fillings, crowns, and bridges.
 - Mandibular Arch:** Shows various procedures including fillings, crowns, and bridges.
 - Legend:** Detailed list of dental procedures and their corresponding codes.
 - Notes:** Additional information about the patient's dental history and treatment plan.

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional methods



Bone tissues of periodontium in normal

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional methods



I degree

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional methods



II degree

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional methods



III degree

Inflammatory-dystrophic diseases of the periodontium

Generalize periodontitis

Additional methods

Probe of Rotter

Hypovitaminosis of vitamin C

Biochemical analysis of blood

Clinical analysis of venous blood

The severity of the changes appropriate to the type of somatic disease

Cytomorphometry

Probe of Yasinovsky

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional methods

Estimate of mineral metabolism
and hormones regulation of calcium

- Number of calcium, magnesium, phosphorus, serum
- parathyroid hormone
- calcitonine
- calcitriolum
- Lime acid
- Free oxyproline

Changes in bone
metabolism markers of bone
formation and resorption

- bone alkaline phosphatase
- osteocalcinum
- Deoxypyridinoline



Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional (functional) methods

- Reoparodontography
- Laser Doppler flowmetry
- High-frequency ultrasound
- Doppler
- Capillaroscopy, contact biomicroscopy
- Probe of Kulagenko

✓
E
S
S
E
L
S

B

O

N

E

✓ Ultrasonic ehoosteometriya

✓ Densitometry (X-ray, ultrasound)

Inflammatory-dystrophic diseases of the periodontium

Generalized periodontitis

Additional (microbiological methods)

I, II degree with small exudation from PP

Anaerobic microflora with
dominated of peptostreptokokkov
(Peptostreptococcus sp., Porfiromonas sp.,
Actinomyces sp., Fusobacterium sp.)

III degree with big exudation from PP

The predominance of aerobic coccal
flora and facultative anaerobic
association

(Strept. pyogenes, mitis, Staph. aureus,
Strept. Epidermidis)

Regularities clinical periodontal changes in somatic diseases

- ✍ Generalized character of inflammatory-dystrophic process in periodontium
- ✍ The severity of generalized periodontitis determined by the severity of somatic pathology
- ✍ Severe clinical generalized periodontitis (subjective and objective)
- ✍ Faster progression of periodontal disease



Regularities clinical periodontal changes in somatic diseases

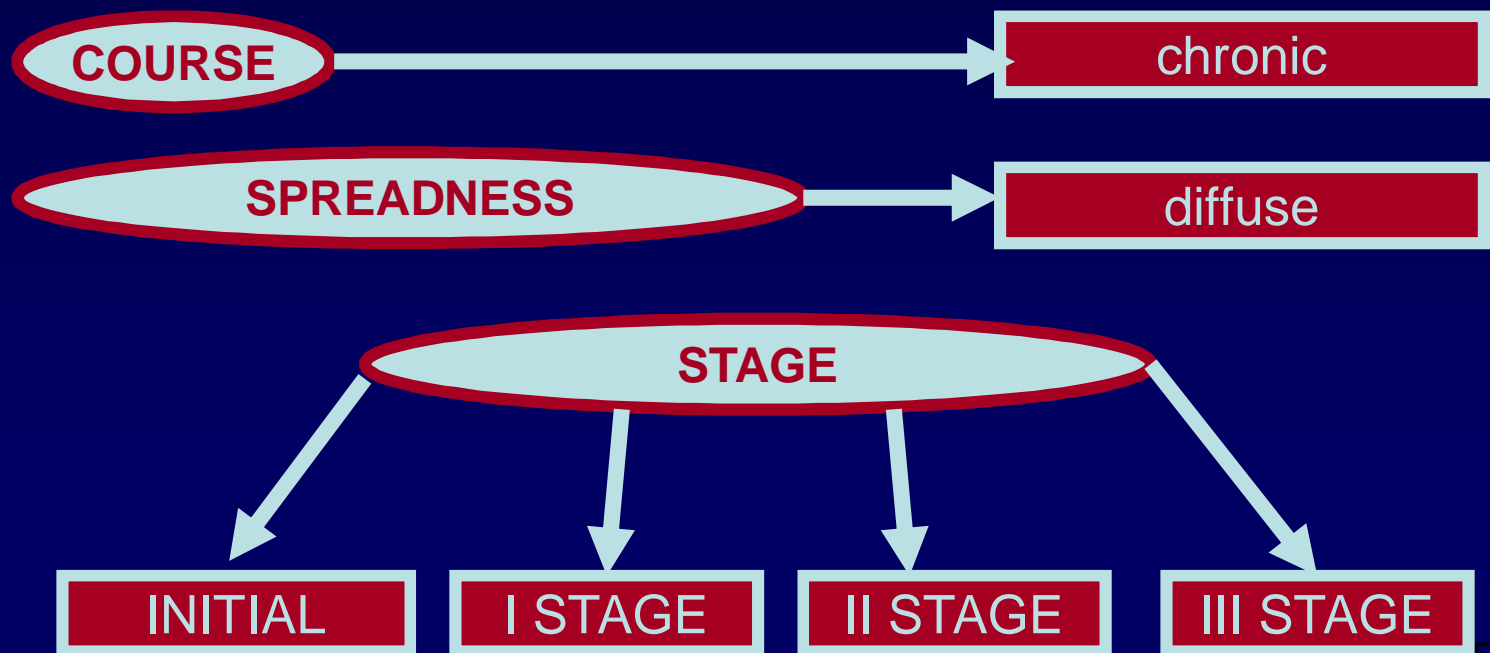
- ✍ Frequent exacerbation of the process in the periodontium, which correlate with exacerbation of somatic pathology
- ✍ Increasingly acute periodontal disease precede exacerbations of somatic disease
- ✍ The inefficiency of 'traditional' treatments
- ✍ The low level of oral hygiene



Dystrophic diseases of periodontium

Periodontosis – the diseases of periodontal tissues (secondary) which characterizes by primary dystrophic changes which have general increase of alveolar part of the bone and have gum recession without inflammatory process c

secondary



Dystrophic diseases of periodontium

Periodontosis

Complains

Itching, burning, "aches"
in different parts of the
jaw

Hypersensitivity of the teeth,
the appearance of defects on
the tooth

Aesthetic defects by lowering
gums (II degree)

Mobility and dislocation of the
tooth (III degree)

Dystrophic diseases of periodontium

Periodontosis

Anamnesis of diseases

- Start of disease— imperceptible or associated with the action of pathogenic factors:
 - **Social**
 - **physical**
 - **Biological**
 - **Cosmic-planetary**
- Connection appear the signs of diseases with general nonspecific symptoms of somatic pathology
- Previous treatment (When, where, effect)
- Seasonality (**not typical**)



Dystrophic diseases of periodontium

Periodontosis

Anamnesis of life

- ☐ Style of life
- ☐ Heredity
- ☐ Profession, place of work
- ☐ Previous diseases, trauma, operations
- ☐ Present diseases (cardiovascular diseases)
- ☐ Allergic anamnesis
- ☐ Bad habits
- ☐ Used drugs in past and present



Dystrophic diseases of periodontium

Periodontosis

General objective status

May be changes of general status, which typical for present somatic pathology

Local objective status

- ⇒ ABSENCE REACTION OF REGIONAL LYMPHATIC NODES
- ⇒ ABSENCE INFLAMMATION OF THE GUM (pallor, density, thickening)
- ⇒ PRESENT GUM RECESSION
- ⇒ PRESENT NON-CARIOUS DEFECTS
- ⇒ PATHOLOGICAL TOOTH MOBILITY (IN II, III degree)
- ⇒ PRESENT SUPRAGINGIVAL DENTAL CALCULUS (in II, III degree)

Dystrophic diseases of periodontium

Periodontosis

Index estimation gum condition

Index of degree inflammation in gum

- PMA (1960)
- Sillness-Loe (1963)
- Russel (1956)
- Ramfjord (1974)
- SBI – gum bleeding(1958)
- PBI – papillae bleeding(1977)
- Probe Shillarev-Pisarev

Index of degree the destruction of periodontium

- Ramfjord (1959),
- Sandler-Stahl (1957),
- Miller – gum recession(1985)

Dystrophic diseases of periodontium

Periodontosis

Additional methods



Dystrophic diseases of periodontium

Periodontosis

Additional methods

Probe of Rotter

Hypovitaminosis of vitamin C

Biochemical analysis of blood

Clinical analysis of venous blood

The severity of the changes appropriate to the type of somatic disease

Cytomorphometry

Probe of Yasinovsky

Microbiological diagnostic

Dystrophic diseases of periodontium

Periodontosis

Additional methods

Estimate of mineral metabolism
and hormones regulation of calcium

- Number of calcium, magnesium, phosphorus, serum
- parathyroid hormone
- calcitonine
- calcitriolum
- Lime acid
- Free oxyproline

Changes in bone
metabolism markers of bone
formation and resorption

- bone alkaline phosphatase
- osteocalcinum
- Deoxypyridinoline



Dystrophic diseases of periodontium

Periodontosis

Additional (functional) methods

- Reoparodontography
- Laser Doppler flowmetry
- High-frequency ultrasound
- Doppler
- Capillaroscopy, contact biomicroscopy
- Probe of Kulagenko

B

O

N

E

✓ Ultrasonic ehoosteometriya

✓ Densitometry (X-ray, ultrasound)

✓
E
S
S
E
L
S

Idiopathic progressive periodontal disease

Generalized loss of periodontal tissue (secondary) with progressive bone lysis

1. Diseases of blood
2. Histiocytosis X
3. Diseases associated with impaired metabolism
4. Periodontal lesions in immunodeficient states
5. Periodontal lesions in congenital diseases

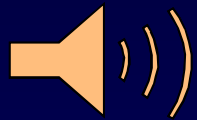
Idiopathic progressive periodontal disease

Generalized loss of periodontal tissue (secondary) with progressive bone lysis

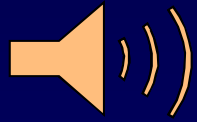
- ⦿))) Occur most often in young children, progresses through puberty. May occur in adults
- ⦿))) Aggressive type of periodontal tissue lysis is accompanied by loss of teeth for 2-3 years
- ⦿))) The clinical picture is similar to the exacerbation of generalized periodontitis
- ⦿))) Problem of periodontal tissue of both jaws

Idiopathic progressive periodontal disease

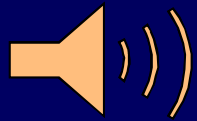
Generalized loss of periodontal tissue (secondary) with progressive bone lysis



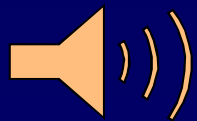
The disease occurs with damage to internal organs and the corresponding changes in laboratory parameters



Characteristic X-ray - a tendency to funnel-shaped type of bone resorption of the alveolar process, osteoporosis, bone



Radiographic bone changes ahead clinical



Resistant to conservative treatment

Idiopathic progressive periodontal diseases

3. Diseases associated with impaired metabolism

Type 1 diabetes (insulin-dependent)

- V anaerobic flora in the gingival econiche
- Aggressive course of periodontitis with abscess formati
- Pronounced suppuration of the pockets
- V granulation tissue in pockets
- Significant loss of periodontal tissue in a short period

+

- Xerostomia
- Halitosis
- Erosion of enamel, wade-shade defects
- High intensive of caries
- Catarrhal stomatitis
- Candidosis of oral cavity

Idiopathic progressive periodontal diseases

3. Diseases associated with impaired metabolism

Type 2 diabetes (non-insulin dependent)

compensated form of diabetes

latent way

Prevalent aerobic microorganisms in
gingival

noncompensated form of diabetes

Progressive way

A mixed aerobic-anaerobic microflora in
gingival

High speed and number of mineralized dental plaque form

Parodontomy

Productive processes in periodontal tissues
(nonmalignant and malignant)

Epulis – hearth proliferation of
connective tissue on the gums or in the
thickness of the jaw





Thank you for attention !