

Periodontal disease: Prevention begins in the infancy phase

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Abstract

Periodontal disease is a chronic disease affecting a large number of individuals from the world population. For this reason its prevention is an important aspect to establish its control. To achieve this goal it is extremely important to understand the etiological mechanisms that determine the disease. In this editorial a brief discussion on periodontal disease is addressed.

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Editorial

Periodontal disease affects a large part of the world population, has a chronic character and influences the general health of the individual. It is characterized for promoting the destruction of the tissues that support the teeth, reaching populations without distinction of age, sex, race and social status. Has a multi-factorial etiology where bacteria appear to be the essential factor for the onset and development of periodontal disease. However is extremely necessary the association between bacteria and predisposing risk factors to initiate the periodontal disease. The predisposing risk factors may increase the rate of occurrence of a disease however they are not able to induce the disease. Predisposing risk factors for periodontal disease may be considered the predisposing risk factors of local order and the predisposing risk factors of general order. The predisposing risk factors of general order alter the host defense system favoring the bacterial action to promote the destruction of the periodontal tissues. As examples of general predisposing risk factors which when associated with bacteria could trigger periodontal disease can be diabetes mellitus and emotional stress [1].

The two diseases can also disturb the population without distinction of race, age, sex and social status, severely alter the host defense system facilitating bacterial action in the induction of periodontal disease. Diabetes mellitus is a disease that can be prevented with education and good eating habits that should always start in childhood. The emotional stress, which may arise from any condition or thought, appears or disappears at any instant, assaults in several destructive levels, affects the host's immune defense, and rigorously in the stomatognathic system, is very difficult to be controlled but with the help of competent professionals an emotional stability can be reached. When bacteria are associated with predisposing factors of general order, a periodontal disease ith generalized periodontal tissue destruction may arise, since the systemic predisposing risk factor interferes with the host's defense mechanism against the opportunist bacteria, and the host defense factor operates in all periodontal tissues. Predisposing risk factors of local order, may produce a mechanical vulnerability in the periodontal tissues around a tooth, and/or may assist in bacterial retention, development and organization, in order to originate periodontal tissue destruction. Some predisposing risk factors of local order which when associated with bacteria may periodontal disease with destruction are mainly dental caries and iatrogenic dental restorations which promotes bacterial retention, facilitating the organization development of bacterial plaque. Besides of that, others predisposing risk factors of local order also

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may induce periodontal disease with localized destruction by promoting a mechanical vulnerability in the periodontal tissues around a tooth as traumatic occlusion and dental food impaction. These two predisposing risk factors of local order may interfere promoting alterations in periodontal tissues facilitating the bacterial pathogenic action in developing a destructive localized periodontal disease [2,3].

Then periodontal disease is a chronic disease presenting multifactorial etiology where bacteria plays a fundamental role but always requires at least a predisposing risk factor of local and or general order which when associated may induce destructive periodontal disease. Thus In this way, as periodontal disease present multifactorial etiology, it seems easier to control the predisposing risk factors of local and general order that only some individuals have and can be prevented with

education and healthy habits from childhood, than to apply a program of bacteria control that all individuals without exception have in their mouths and that are impossible to be completely eradicated [4].

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