



CLINICAL DIABETES MANAGEMENT

Periodontal Disease and Diabetes

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[Dan Hazelwood] Thank you for joining us for this edition of Clinical Diabetes Management, brought to you by the National Diabetes Education Program, or NDEP. NDEP is a joint initiative of the Center for Disease Control and Prevention and the National Institutes of Health. I'm your host, Dan Hazelwood. Our topic today is periodontal disease and diabetes. Joining me is Dr. Gina Thornton-Evans, a dentist here at CDC and Dr. JoAnn Gurenlien from the American Dental Hygienist's Association. Both are members of the NDEP. Welcome.

[Dr. Gurenlien] It's a pleasure being here, Dan.

[Dr. Thornton-Evans] Thanks for having us, Dan.

[Dan Hazelwood] Dr. Thornton-Evans, tell us about periodontal disease.

[Dr. Thornton-Evans] Periodontal disease is a chronic bacterial infection that affects the gums and bones supporting the teeth. It can lead to tooth loss, mouth infections, and can adversely affect blood glucose control.

[Dan Hazelwood] Dr. Gurenlien, can you elaborate on the relationship between diabetes and periodontal disease?

[Dr. Gurenlien] Almost twenty-one million Americans have diabetes and few realize that diabetes increases the risks of periodontal disease. Many health care providers don't realize that there is a link between poor glycemic control and periodontal disease. What we know from research is that there is a bidirectional relationship between oral health and periodontal disease and diabetes. What I mean by that is that, as we improve someone's oral health we can improve their glycemic control. And our research also shows that if we improve someone's glycemic control, we can improve their oral health.

[Dan Hazelwood] Can dental problems lead to other health problems?

[Dr. Gurenlien] Yes. Dental problems can lead to a variety of health problems. In terms of the mouth, if someone has difficulty chewing, they may be more likely to select poor dietary choices, and poor food choices lead to poor blood glucose control. In addition, our research shows that there may be other links between periodontal disease and systemic diseases, including cardiovascular disease and stroke, respiratory diseases, adverse pregnancy outcomes.

[Dan Hazelwood] Dr. Thornton-Evans, what can non-dental health care professionals do to help?

[Dr. Thornton-Evans] The entire health care team should deliver the consistent message that good oral hygiene is an important part of diabetes care. One step is to recognize the signs and symptoms of periodontal disease and refer them promptly. But prevention is the best. Comprehensive diabetes care means emphasizing the importance of visiting the dentist and dental hygienist at least twice a year.

[Dan Hazelwood] Dr. Gurenlien, is it realistic for someone who is not a dental professional to look into a person's mouth for signs of periodontal disease?

[Dr. Gurenlien] Yes, it is realistic. Other health care providers have an opportunity to do a cursory examination of the mouth and notice changes such as fruity breath, swollen gums, and then can follow up with several questions to ask that patient about any other signs and symptoms that could suggest that the person may have diabetes.

[Dan Hazelwood] Where can health care professionals get more information about diabetes and oral health?

[Dr. Gurenlien] NDEP recently created a publication entitled *Working Together to Manage Diabetes: A Guide for Pharmacists, Podiatrists, Optometrists, and Dental Professionals*. This guide includes photos of periodontal disease and other common problems of the mouth, as well as eye and foot complications. The guide focuses on the importance of team care and the critical concepts these health care professionals should understand about diabetes. We want to make sure all members of the health care team recognize potential complications early and know what to do to intervene. The guide is available at www.YourDiabetesInfo.org.

[Dan Hazelwood] What else is available from NDEP?

[Dr. Gurenlien] NDEP also has materials for patients on diabetes control and prevention in English, Spanish, and 15 Asian and Pacific Islander languages, as well as materials for specific groups, such as children with diabetes and ethnic minorities.

[Dan Hazelwood] What is the one take-home message you'd like to leave with our listeners? Dr. Thornton-Evans?

[Dr. Thornton-Evans] Good oral hygiene and regular dental visits is an important part of diabetes care. As health care professionals you can help prevent diabetes complications by referring people with diabetes for routine dental care twice a year.

[Dan Hazelwood] And Dr. Gurenlien?

[Dr. Gurenlien] That other health care professionals including eye care specialists, podiatrists, and pharmacists can recommend and reinforce the message that oral health is an important part of total health and that oral health care will improve their diabetes control.

[Dan Hazelwood] Thank you for being here with us today. The National Diabetes Education Program, or NDEP, has more information and free educational materials for health care professionals and for people with diabetes. Visit www.YourDiabetesInfo.org or call toll free, 1-888-693-NDEP.

For the most accurate health information, visit www.cdc.gov or call 1-800-CDC-INFO, 24/7.