



ORAL BACTERIA

Bacteria are the culprit in periodontal disease

Imagine you're in a jungle. It's warm and moist and there is plenty to feed on. It is also crawling with hundreds of diverse species of living beings. Many are harmless and some are even beneficial to the environment. However, one group can be described as predators, attacking their immediate environment and wreaking havoc far and wide. To stop the wild beasts, you need weapons. What should you grab? A toothbrush and floss. Okay, we're not talking about the Amazon Rain Forest, we're talking about your mouth, but it really is a jungle in there.

More than 500 species of microorganisms have been identified in the mouth. Approximately 15 of these bacterial species have been implicated for playing a role in periodontal disease. Whether or not you get periodontal disease depends on a

complex interplay between these bacteria, your response mechanism and environmental factors, such as smoking. Your saliva includes proteins and antifungal agents, which help get rid of oral bacteria.

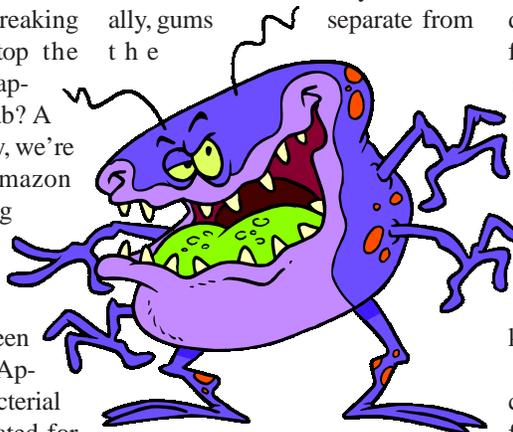
The bacteria in plaque cause the gums to become red and swollen and to bleed easily. Eventually, gums separate from the

Over time, tissue and bone are destroyed and the teeth loosen.

To stop this process, it is necessary to eliminate the infection-causing bacteria that accumulate below the gumline, dental professionals often use simple procedures such as scaling and root planing. These are nonsurgical procedures to remove plaque and tartar from below the gum line. Tooth root surfaces are cleaned and smoothed as the rough surfaces of tartar make it easier for bacteria to get a foothold.

In addition, your periodontist may recommend antibiotic treatments to enhance traditional therapies. These are designed to kill a wide variety of oral bacteria.

Someday, researchers may discover a vaccine to eliminate harmful bacteria from the mouth. Until then, arm yourself with a toothbrush, floss and regular dental visits. 



teeth forming pockets. The pockets fill with even more plaque and infection and eventually deepen.

Don't be a yuck mouth, tame that beastly breath

With all the bacteria proliferating in the human mouth, it is no wonder that about one in four people believe they have halitosis. Bad breath originates from certain oral bacteria producing an abundance of volatile sulfur compounds. Bad breath can be caused by several things, including certain foods, periodontal disease, dry mouth, tobacco use or a medical disorder. Here are some breath freshening tips:

- First, determine if you have bad breath. One method is to take a piece of unwaxed, unflavored dental floss and floss between your upper and lower back molars. Or, use a dry cloth and wipe it across the back part of your tongue for about five seconds. Wait about a half a minute and then smell it. Asking a friend or

family member works too.

- Mouthwashes, breath sprays and mints mask the problem temporarily. In fact, mouthwashes with alcohol may further the problem as, over time, they can dry out the mouth. If you have chronic bad breath, you will want to get to the source of the problem.

- Be aware of foods that trigger bad breath such as garlic, onions and coffee. And, brush your teeth after consuming milk products, fish and meat.

- Keep your mouth moist by drinking plenty of fluids, chewing sugar free gum or sucking on sugarless candy.

- Floss, and brush your teeth,

gums and tongue daily. Do not forget to clean behind the back teeth in each row.

- Denture wearers need to avoid plaque buildup under the dentures. Thoroughly clean dentures daily and remove dentures at night to avoid bacteria growth. Denture wearers should continue to see a dental professional regularly.

- Talk with your dentist or periodontist about oral problems that may be the cause. Your dental professional can also tell you about the latest techniques to treat bad breath.

- If you determine that chronic bad breath is not from an oral source, see your physician. 

The American Academy of Periodontology Patient Page is a public service of the AAP and should not be used as a substitute for the care and advice of your personal periodontist. There may be variations in treatment that your periodontist will recommend based on individual facts and circumstances. Call 1-800-FLOSS-EM for a free brochure on periodontal disease.

For more information visit www.perio.org