

# Wisdom Teeth Speed Onset of Periodontal Disease

*Gum disease has been linked to stroke, heart and renal vascular disease, and obstetric complications.*

BY ROBERT FINN  
San Francisco Bureau

Almost two-thirds of people with four normal wisdom teeth show signs of periodontal disease in their 20s, and in many the periodontal disease is progressive, according to a study discussed at a press briefing sponsored by the American Association of Oral and Maxillofacial Surgeons.

"Most people would think that you don't get periodontal disease until you are 35 years old," said Raymond P. White Jr., D.D.S., one of the authors of the study.

"The finding that surprised all of us is that the prevalence of periodontal disease in people in their 20s is much higher than anyone would have anticipated," said Dr. White of the University of North Carolina at Chapel Hill.

He expected that only about 10% of people in this age group would have signs of periodontal disease.

Many other studies have confirmed linkages between periodontal disease and a number of systemic illnesses including

coronary artery disease, stroke, renal vascular disease, diabetes, and obstetric complications.

As a result, Dr. White recommended that adults be evaluated for periodontal disease well before the age of 25, and if disease is present they should give serious thought to having their wisdom teeth removed, even if they're asymptomatic.

The study involved 254 individuals, mean age 27.5, who had four asymptomatic wisdom teeth (more formally known as "third molars"), and who were followed for at least 2 years; 93% of the subjects were at least high-school graduates.

At baseline, 59% of the subjects had a periodontal probing depth (PD) of 4 mm or more on at least one wisdom tooth, and 26% had a PD of 5 mm or more.

Gingival pockets of at least 3-4 mm in depth indicate the presence of periodontal disease.

Among the subjects who had PDs of 4 mm or more, 38% experienced an increase in PD of at least 2 mm in the subsequent 2 years.

More than half of those subjects had

other indicators of periodontal disease, including high levels of bacteria and inflammatory markers. Subjects with both a baseline third molar PD of at least 4 mm and high bacteria levels had 19.7 times the chance of having progressive periodontal disease, compared with subjects with neither risk factor.

Removing the wisdom teeth is not the only option for patients with periodontal disease. Scaling and root planing every 3 or 4 months is another approach, but dentists have a difficult time working that far back in the mouth.

Studies have shown that dentists are unlikely to remove more than 50% of the bacteria in patients with deep gingival pockets, Dr. White noted.

The message to patients is, "If you ignore [this] and you don't do something about it, you're running the

risk of chronic oral inflammation and then not only problems in your mouth but also systemic problems," Dr. White said.

"Just because you have no symptoms doesn't mean that you have no problem. What we're recommending is that everybody with wisdom teeth should have them evaluated. Twenty percent or maybe 25% of people can keep their wisdom teeth with no problems, but you can't ignore them. They need to be evaluated seriously," he added.



This x-ray shows an impacted healthy third molar crowding second molar, which can lead to early periodontal disease.

AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS

## Dental Health Has Improved in Adult Americans; Medicaid Benefits Must Continue, to Keep Gains

BY SHERRY BOSCHERT  
San Francisco Bureau

Among U.S. adults aged 60 years or older, 6% fewer lost all their teeth in 1999-2002, compared with 1988-1994, the Centers for Disease Control and Prevention reported.

The proportion of older adults with no natural teeth decreased from 31% in 1988-1994 to 25% in the most recent time period, a 20% improvement, according to an analysis of data from the National Health and Nutrition Examination Survey (MMWR 2005;54(SS-3):1-44).

Smokers were more likely than nonsmokers to have no natural teeth: 14% of current

smokers had lost all their teeth, compared with 5% of people who had never smoked.

The dental health of U.S. adults as a whole had improved by the 1999-2002 survey, but there were still disparities based on race and income, the report shows. Among higher-income adults, 16% had untreated tooth decay in the most recent time period, compared with 41% of poor adults. Non-Hispanic blacks retained fewer teeth than Mexican Americans or non-Hispanic whites.

The study included data on 16,128 adults aged 20 years or older in 1988-1994 and 8,805 in

1999-2002. The mean number of permanent teeth among adults averaged 23 in the earlier time period and 24 in the more recent time period. A normal, full set



Physicians and dentists need to partner to help patients maintain their dental health.

DR. MAAS

includes 28 teeth.

The prevalence of root caries decreased from 23% in 1988-1994 to 18% in 1999-2002.

The report is the first by the CDC to look at the rate of enamel fluorosis, a disfiguring hypomineralization of enamel related to exposure to fluoride during tooth formation. Enamel fluorosis occurred in 23% of adults in the 1999-2002 survey, though most cases were mild, with white spots on the teeth. Moderate to severe fluorosis, which involves dis-

coloration or pitting of teeth, was reported in about 2% of adults.

Physicians can contribute to adult patients' dental health by considering, for example, how medications might affect saliva flow and make teeth more susceptible to decay, said William R. Maas, D.D.S., director of the CDC's division of oral health. Smokers in the study had fewer teeth and more untreated decay. Tooth loss also is related to diet, nutritional status, and obesity.

"By attending to these issues, physicians can work in partnership with the dental profession" to help their patients maintain dental health, he said.

While the overall improvement in dental health is encouraging, the fact that lower-income adults have twice the rate of untreated tooth decay, compared with more affluent adults, is unacceptable, said Richard Haight, D.D.S., president of the American Dental Association.

As the federal and state governments consider reforming Medicaid, it's important to ensure that Medicaid will continue to cover dental benefits and will emphasize prevention of dental disease, he added.

## Staph. Aureus Spells Trouble

MIAMI — Surgical site infections were significantly more likely among women who harbored *Staphylococcus aureus* prior to undergoing breast cancer surgery, according to data from 615 patients, A. Krishna, M.D., said at the joint annual meeting of the Surgical Infection Society and the Surgical Infection Society-Europe.

In a multicenter, prospective study conducted by Dr. Krishna and his colleagues at South Glasgow (Scotland) University Hospital, 83 of the 615 women (14%) carried *S. aureus*, as determined by preoperative nasal, axillary, and perineal swabs.

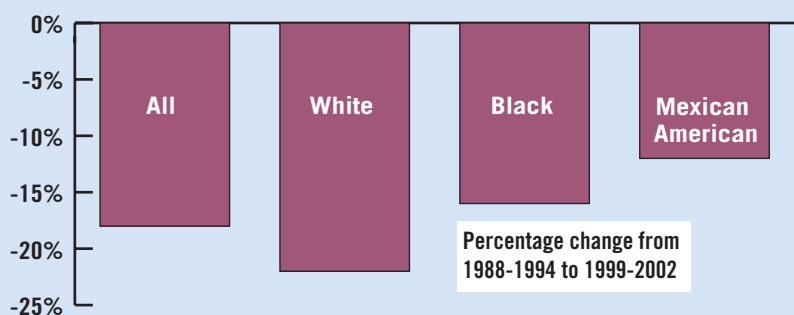
The patients were evaluated for surgical site infections for 30 days after their surgery. Within 30 days, infections occurred in 22 of the 83 women with *S. aureus*, compared with 75 of 532 women without *S. aureus* (27% vs. 14%).

Approximately 1 in 4 patients with *S. aureus* is likely to develop a postoperative wound infection, and the infection rate reported in this study falls within the range of rates reported in previous studies, Dr. Krishna noted.

The women enrolled in the study were undergoing primary surgery for breast cancer and were part of a larger randomized, controlled study of prophylactic antibiotic use.

—Heidi Splete

### Prevalence of Untreated Tooth Decay Declines



Note: Based on the National Health and Nutrition Examination Survey of adults aged 20 years and older.

Source: Centers for Disease Control and Prevention