

## PERIODONTAL DISEASE

The proposed treatment for periodontal disease, based on the initial examination at Modri zob, Ukmarjeva St. 6, 1000 Ljubljana, requires your consent. Periodontal disease is an inflammation of the gums, bone, root, and connective tissue that links the root to the bone. It is a chronic bacterial infection that can lead to the complete loss of the supporting bone and tooth loss. The disease progresses slowly, with pockets forming around the teeth where bacteria accumulate.

## **PROCEDURE IMPLEMENTATION**

1. Hygiene Phase: Ultrasonic removal of soft and hard dental deposits (dental calculus).

2. Scaling and Root Planing:

Removal of hard dental deposits from periodontal pockets and root surfaces.

Smoothing of root surfaces to reduce the adherence of new deposits.

3. **Surgical Treatment - Flap Surgery:** An operative procedure where the gum is lifted, roots are exposed, inflamed tissue is removed, and irregular bone defects are corrected (if scaling and root planing yield good results, surgical treatment may not be necessary).

4. **Maintenance or Supportive Therapy:** Regular removal of bacterial biofilm from periodontal pockets, i.e., regular hygiene phases. The periodontologist will provide information on how frequently these should be performed.

With these procedures, we aim to prevent further gum recession and the progression of periodontal disease, reduce the depth of periodontal pockets, enable better oral hygiene maintenance, and improve the long-term prognosis of the teeth. The procedures are conducted in several phases, with intervals between phases. Maintenance therapy lasts a lifetime, with intervals between 3 and 12 months (hygiene phases).

## **PROBABILITY OF SUCCESS**

The success rate of treatment is high with good patient cooperation and regular oral hygiene maintenance. Smoking negatively affects the success of procedures and maintenance after the procedures are completed. Nicotine in cigarettes reduces blood circulation in the gums, which slows down the healing process after surgical procedures. Due to a weakened immune response and reduced ability to fight infections, smokers are more likely to develop infections after procedures. Smokers also have a higher risk of recurrent periodontal disease, even after successful initial treatment.

## **POSSIBLE COMPLICATIONS**

During the procedure, discomfort is minimal due to local anesthesia. Post-procedure, there may be sensitivity, swelling, and minor pain, which are usually managed with analgesics. Complications are rare but can include infection, excessive bleeding, and discomfort. Regular monitoring and maintenance reduce the risk of complications. Progression of periodontal disease leads to the loss of supporting bone and tooth loss. Due to the chronic infection, general health can also deteriorate.

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