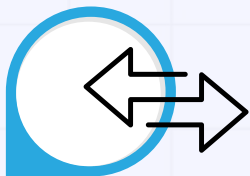


# PERIODONTITIS & DIABETES

## ADVICE FOR THE DENTAL TEAM



### BI-DIRECTIONAL



Diabetes and periodontitis are directly linked, there is a 2-way relationship. If diabetes is poorly controlled, then this will impact their periodontal parameters - and vice versa. Diabetics are 3x more likely to also suffer with periodontitis. Successful periodontal treatment can result in significant improvements to a patient's diabetes risk - the equivalent to that achieved by adding a second medication to a metformin pharmacological regime.

### DIABETES IN THE POPULATION

There are approximately 4.6million people in the UK with diabetes (90% have Type 2) and this figure is on the rise. There are thought to be 1.3million undiagnosed cases - many of whom will present at your practice with periodontitis.



### HbA1C

HbA1c (glycated haemoglobin) is a blood test that measures the average blood sugar level over the past 2-3 months. It is an indicator of how well the diabetes is managed. Target level is 48mmol/mol. It is worth asking your diabetic patient if they know their latest reading. If they don't know, you should consider writing to their GP, especially if they present with unstable perio.



### THE UNDIAGNOSED DIABETIC

Please be wary that your perio patient might be an undiagnosed diabetic. If they present with shared risk factors, in addition to their medical history you should ask about whether they have recently been tested for diabetes. You might experience a perio case that does not improve as well as you would expect following treatment, and this might be due to undiagnosed diabetes.



### RISK ASSESSMENT

Please be on the lookout for the classic diabetes risk factors, such as:

- High BMI
- Poor diet & lifestyle
- Hypertension
- Age
- Ethnicity (people from South Asian origin)

CARDIFF WEST  
CLUSTER

**The dental team can help reduce the shared risk factors, and play a part in improving your patients' general and oral health.**