

Guest Editorial

Periodontal Medicine: A New Frontier for Periodontology.

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First introduced by Offenbacher in 1996, the term “Periodontal Medicine” was proposed to be a broad term defining a developing branch of periodontology focussing on the relationships between periodontal health and disease and systemic health or disease (Offenbacher, 1997).^[1] This concept was subsequently embraced by the US Surgeon who, in a landmark publication titled “Oral Health in America. A Report of the Surgeon General, suggested that oral health and general health should not necessarily be dissociated as they have in the past and that in the interests of an holistic approach to patient care oral health must be considered as a critical issue for general well-being (US Department of Health and Human Services, 2000).^[2]

Today the unifying concept of periodontal medicine states that periodontal infection results in a significant chronic inflammatory burden at the systemic level. The significance of this inflammatory load from the periodontium can best be understood if one were to calculate the total ulcerated gingival sulcus area in a patient with 28 teeth and average pocket depths of 5mm.

According to several sources this surface area would equate to an area of between 20 cm² to 75 cm (Page, 1998; Hujuel et al., 2001).^[3,4] Therefore there are now two ways in which we can view periodontal disease. One embraces the conventional paradigm in which a susceptible host in the presence of periodontal pathogens and absence of beneficial bacteria together with a conducive local environment within the gingival sulcus combine and contribute to the development of the clinical condition we know as periodontitis. The other way to view periodontitis is within the context of periodontal medicine which inverts the traditional paradigm (Page, 1998)^[3] in which periodontitis has the potential to impact on systemic condition either through disease associations or disease causality. Periodontal medicine now allows us to consider periodontitis and systemic conditions as a “two way” relationship in which periodontitis can affect systemic health but also that systemic health can affect periodontitis. This new field now opens new vistas for periodontology with opportunities arising in new diagnostic strategies, new treatment



strategies and new educational responsibilities for the profession.

This new journal titled “Journal of Periodontal Medicine and Clinical Practice” embraces of the above concepts and will provide a valuable educational resource for researchers, educators and clinicians alike.

References

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