



Pregnancy and periodontal disease

Congratulations! You are pregnant or planning on becoming pregnant! Whether or not you want it, everyone you know will be giving you advice about how to eat, sleep, exercise, and take care of your body during this exciting time. However, what some might forget to add to that list is the importance of taking care of your oral health.

Good oral health is always important. However, it may be especially important for expecting mothers as recent research suggests that pregnant women with periodontal diseases may be up to seven times more likely to have a baby that's born too early and too small. Preterm births are dangerous for both baby and mother. They are the leading cause of neonatal death and can lead to life-long health problems such as cerebral palsy, mental retardation, and difficulties with blindness and lung disease.

The likely culprit of this possible connection is a labor-inducing chemical found in oral bacteria called prostaglandin. Very high levels of prostaglandin are found in women with severe cases of periodontal disease.

In addition, other research has identified bacteria commonly

found in the mouth and associated with periodontal diseases in the amniotic fluid of some pregnant women. Amniotic fluid is a liquid that surrounds an unborn baby during pregnancy. Any disruptions in the amniotic fluid, such as a bacterial infection, could potentially be dangerous to both the mother and baby.

Pregnant women are more likely to suffer from a condition called pregnancy gingivitis where they may experience redness, swelling, bleeding and/or discomfort in their gums. Left untreated, this may develop into periodontal disease.

Don't panic! If you have concerns about the health of your gums during pregnancy, talk to your periodontist. If you are diagnosed with periodontal disease, your periodontist might recommend a common non-surgical procedure called scaling and root planing. During this procedure, your tooth-root surfaces are cleaned to remove plaque and tartar from deep periodontal pockets and to smooth the root to remove bacterial toxins. Research suggests that scaling and root planing may reduce the risk of preterm birth in pregnant women with periodontal disease by up to 84 percent.



treatment be performed during pregnancy?

It is generally recommended that no non-emergency periodontal treatment be performed in the first 3 months of pregnancy as this is when the organs of the baby are forming.

It is safe and best to perform periodontal treatment in the second 3 months of pregnancy. If periodontal disease has been diagnosed during pregnancy then it is essential that this is treated in order to reduce the chances of have a pre-term birth or an underweight baby.

