

DIABETES DETECTION IN THE DENTAL OFFICE?

BY DR. SUSAN MAPLES

In light of the well-documented impact Diabetes Mellitus (DM) has on oral disease, and *vice versa*, the ability to detect DM has become your dentist's/hygienist's opportunity, and perhaps soon their responsibility!

More than 60% of those with Diabetes have moderate to severe Periodontal Disease (PD). There is, in fact a *bidirectional* relationship between active PD and uncontrolled DM, meaning *each makes the other worse!*

Meanwhile, a dual epidemic is upon us! 60-70% of US adults have active PD. Similarly, Diabetes and its precursor, PreDiabetes (PDM), together affect 103 million people, one-third of our population! And just like our patients with Periodontitis, 24% with Diabetes and 89% with PreDiabetes don't know it...unless their health professionals tell them.

How can dental professionals help?

They can:

1. Learn the DM/PDM risk factor criteria, as well as oral signs of Diabetes such as: Gingivitis, Periodontitis (gum disease), dry mouth, tooth decay, Candida overgrowth, oral infections and neurosensory disorders (taste, smell, swallowing interferences).
2. Recognize the bidirectional effects of diabetes on gum disease. In fact, *evidence suggests that periodontal changes are the first clinical manifestation of Diabetes*. We are beginning to recognize our critical role in helping diabetic patients gain both glycemic control and periodontal stability, simultaneously.

3. Help you personally address, the root causes of your PDM/DM progression and support a new resolve around diet change and increasing body movement. *Influencing lifestyle change might become dentistry's greatest gift, since we have time with you on a regular basis at your preventive recall visits.*

4. Learn the screening criteria that invite an "A1c" test to measure 2- to 3-months average circulating blood sugar, and get comfortable completing a point-of-care finger stick A1c blood test. Not so incidentally, there is now a dental insurance code for A1c testing in the dental office.

5. Routinely *monitor* A1c at your periodontal maintenance visits if you also have diabetes, since it's critical for disease stabilization.

6. Work collaboratively with your medical colleagues for pharmacologic assistance in gaining glycemic control and preventing PDM/DM progression.

7. Develop a current and evidence-based protocol for full mouth periodontal disinfection for the diabetic patient—one that includes saliva testing for pathogen identification.

Total Health Dentistry is the future of our profession. It helps save teeth and improve your overall health at the same time! ■



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Our Mission Is:

- To treat each person with integrity, respect and kindness.
- To help each person take a significant step toward his or her desired oral and systemic health.
- To serve as leaders in our community in the quest towards total-health promotion and the partnership between all health professionals.



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