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Gum Disease Joins Hot Flashes and PMS Associated With Women's Hormones

ScienceDaily (May 29, 2012) — Women, keep those toothbrushes and dental floss handy. A comprehensive review of women's health studies by Charlene Krejci, associate clinical professor at the Case Western Reserve University School of Dental Medicine, has shown a link between women's health issues and gum disease.

Across the ages, hormonal changes take place during puberty, menstruation, pregnancy and menopause. Krejci found female hormones that fluctuate throughout women's lives can change conditions in the mouth that allow bacteria to grow, enter the blood, and exacerbate certain health issues like bone loss, fetal death and pre-term births.

Her overview of the literature was reported in the article, "Women's Health: Periodontitis and its Relation to Hormonal Changes, Adverse Pregnancy Outcomes and Osteoporosis" in the May issue of *Oral Health and Preventive Dentistry*.

The Case Western Reserve University periodontist reviewed 61 journal articles with nearly 100 studies for a collective answer on whether hormones have a relationship to gum disease and specific women's health issues like preterm labor, bone loss, and the side effect of hormonal replacement therapy.

"There's definitely a gender-specific connection between women's hormones, gum disease, and specific health issues impacting women," Krejci said.

"Although women tend to take better care of their oral health than men, the main message is women need to be even more vigilant about maintaining healthy teeth and gums to prevent or lessen the severity of some of womenspecific health issues," Krejci said.

In addition to the brushing and flossing daily regimen, Krejci recommends visiting the dentist at least every six months, and more if there are any gum problems found or women suffer from bone loss or are pregnant.

She added that it is widely known that hormones cause some women gum problems during pregnancy. Women already susceptible to gum disease before being pregnant, she advises, need to make sure that these oral problems are treated.

Although women were once discouraged from seeing the dentist while pregnant, she said that scaling and planing of the roots of teeth to eliminate some gum disease is now recommended during pregnancy for women. Severe gum disease requiring surgery is still generally postponed until after the baby's birth.

Gum disease begins with the build up of bacterial plaque on the teeth and under the gums. Untreated it can cause

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irritation and inflammation during which harmful and toxic byproducts are released. These toxins erode the bone that anchors teeth and cause breaks and bleeding in the gums.

Collaborating with Krejci on the study was Nabil Bissada, professor and chair of the Department of Periodontology at Case Western Reserve University School of Dental Medicine.

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