

Can fixing the gums save the heart?

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SAN DIEGO – Successful treatment of periodontal disease appears to slow progression of sub-clinical cardiovascular disease, Anders Holmlund, D.D.S., reported at the annual meeting of the American College of Cardiology.

Previous studies have described an association between periodontal disease and increased risk of cardiovascular disease. This new Swedish observational study breaks fresh ground in showing for the first time that among patients who seek treatment for periodontal disease, treatment responders have an adjusted 28% lower risk of future fatal or non-fatal MI, stroke, or heart failure than that of non-responders, according to Dr. Holmlund of Uppsala (Sweden) University.

He reported on 5,298 individuals with peri-

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Key clinical point: Successful treatment of periodontal disease may reduce the risk of future cardiovascular disease.

Major finding: During nearly 90,000 patient-years of follow-up of individuals who were treated in a specialized periodontal clinic, those whose gum disease responded to therapy had a 28% lower risk of developing cardiovascular disease.

Data source: An observational study of 5,298 Swedes treated for periodontal disease and followed for a median of 16.8 years.

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odontal disease who were referred to a specialized university periodontal clinic for treatment. Twenty percent were classified as treatment nonrespond-

ers, meaning that 1 year after beginning active treatment, more than 20% of their initial problem gum pockets remained at least 5 mm deep and at least one in five of their pockets exhibited bleeding upon probing.

Analysis of Swedish comprehensive national registries showed that during a median of 16.8 years of follow-up, the incidence of new-onset cardiovascular disease was 21.6% in the periodontal treatment nonresponders, compared with 16.3% in responders.

Upon adjustment for patient demographics, smoking, education level, baseline number of teeth, number of pockets 5 mm deep or more, and bleeding upon probing, the treatment responders had a 28% lower risk of fatal or nonfatal MI, stroke, or heart failure.

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