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3795 Non-Surgical Periodontal Treatment on Diabetic Chinese with Chronic Periodontitis

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Diabetes mellitus (DM) is an established risk factor for periodontal diseases. Previous studies in Caucasians showed that DM patients with poor glycemic control had a less favorable response to periodontal therapy compared to those with good glycemic control and non-DM patients. Whereas similar study is limited in Chinese DM subjects. Objectives: To determine the therapeutic effect of non-surgical periodontal treatment on diabetic Chinese with chronic periodontitis and to examine whether various levels of blood glucose affect short-term healing response to the treatment. Methods: The participants were 36 subjects aged 35-65 yrs with type II DM and untreated moderate to advanced chronic periodontitis (CP), consisting of 20 cases with high and fluctuating blood glucose levels (DM-H) and 16 cases with relatively low and stable blood glucose levels (DM-L). 28 clinically-matched non-DM CP patients aged 35-65 yrs were recruited as controls (Non-DM). Plaque index, gingival index, bleeding on probing, probing depth and clinical attachment loss were recorded for all subjects at 6 sites on each tooth at the baseline and 1, 3 and 6 months after oral hygiene instruction (OHI), scaling and root planing. Results: It was found that the short-term non-surgical periodontal treatment resulted in significant resolution of gingival inflammation and pronounced reduction in probing depth and gain of attachment in both DM and Non-DM CP patients. No statistically significant difference was found in periodontal treatment responses observed over the 6-month period of observation between the DM-H and DM-L patients. Conclusions: This study suggested that non-surgical periodontal therapy resulted in favorable short-term treatment responses in a group of Chinese diabetic subjects with chronic periodontitis and that their various profiles of blood glucose levels did not affect the initial healing response to OHI, scaling and root planing.

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