AAP PATIENT PAGE



ETHNICITY AND PERIODONTAL HEALTH

Race plays a role in periodontal health

ot everyone is equally susceptible to periodontal disease. For example, men have higher rates of periodontal disease than women. In addition, people

of different races and ethnicities also differ in terms of their oral health.

A study published in the Journal of Periodontology reports that while 25 percent of non-Hispanic whites age 30 to 54 in the United States have periodontitis, 35 percent of Mexican Americans and 42 percent of African Americans in this same age group have the

disease. The trend continues as the groups age, with 47 percent of whites age 55 to 90 having periodontitis, compared with 59 percent of Mexican Americans and 70 percent of blacks.

The reasons for the significant differences between racial groups

prevalence of periodontal disease

in people of Chinese heritage,

according to a study in the Jour-

type that puts more than 30 per-

cent of people of European heri-

tage at increased risk for peri-

odontal disease is barely existent

in Chinese populations. The

study tested 300 people of Chi-

nese heritage, and only about 2

percent carried the IL-1 genotype.

Periodontal disease is a multifac-

torial disease, and it is still unclear whether oral hygiene, genet-

ics or any other risk factor is most

important in explaining why peri-

The Interleukin-1 (IL-1) geno-

nal of Periodontology.

remain a mystery. It may be a compilation of reasons, such as less use of dental services and different in-

flammatory responses. For example, 53 percent of Hispanics report having annual dental visits, compared with 68

resistance or influencing the interaction with the environment. The project has also determined that racial/ethnic groups are more alike than different. However, clusters

> of the population may have a greater prevalence of certain diseases. In addition to higher rates of periodontal disease, Mexican Americans and blacks have higher rates of diabetes. Diabetics are at a higher risk of developing periodontal disease, likely due to an increased susceptibility to contracting infection.

> > No matter how susceptible you may be to periodontal disease, if the

bacteria responsible for the disease are kept under control with good oral hygiene and frequent dental visits, you are not sentenced to a life with periodontal disease. Recognizing your risk factors may help you control for them, so talk to your periodontist about them. **

percent of non-Hispanic whites.

The Human Genome Project, a major initiative to map the genetic components of humans, has declared that genetic factors contribease, increasing susceptibility or

For more information visit www.perio.org ute to virtually every human dis-

A genetic marker strongly asodontal disease is widespread in sociated with periodontal disease Chinese populations. does not play a role in the high

Genetic markers differ in some populations

A separate study confirmed that people of Northern European origin who have the IL-1 genotype are more than five times as likely to develop periodontal disease, making oral hygiene habits, smoking and genetics among the top risk factors for periodontal disease.

The study concluded that giving dental patients a genetic test, which can be performed through a saliva sample, before they even show signs of periodontal disease and getting them into early interventive treatment might help them keep their teeth for a lifetime.

The test may be most useful for specific cases, such as for patients with advanced periodontal disease who seem to lack other major risk factors, for adults considering orthodontic treatment that could make them more susceptible to bone loss around the teeth, and for patients considering extensive treatment to save teeth jeopardized by periodontal disease.

However, the study questions the usefulness of genetic testing for Chinese patients until further research is done. Future studies may determine if other gene candidates contribute to periodontal disease in Asians. 🏶

The American Academy of Periodontology Patient Page is a public service of the AAP and should not be used as a substitute for the care and advice of your personal periodontist. There may be variations in treatment that your periodontist will recommend based on individual facts and circumstances. Call 1-800-FLOSS-EM for a free brochure on periodontal disease.