The Mouth-Body Connection™ Top 10 Talking Points
AGD 2017 Annual Meeting: Oral Systemic Health - Monsters in Your Mouth

1. Conditions in the oral cavity have links to seven out of the eight leading causes of death, which include:
   - Heart disease
   - Cancer
   - Chronic lower respiratory diseases
   - Stroke
   - Alzheimer’s disease
   - Diabetes
   - Influenza

2. Studies have demonstrated a strong similarity between the amount of inflammation in our gums and the amount of inflammation in the major arteries of the neck and heart.[1]

3. Patients with periodontal disease are:
   - 24-35% more likely to develop plaque in their coronary arteries[2]
   - 2-3 x more likely to suffer from a heart attack[1]
   - 4.5 x more likely to suffer from an ischemic stroke[3]
   - 2.6 x more likely to develop Alzheimer’s disease[4]
   - 3 x more likely to suffer from erectile dysfunction (in men)[5]
   - more likely to develop oral and pancreatic cancer
   - 30-50% more likely to give birth pre-term or to a baby with low birth weight (in pregnant mothers)[6]
   - more likely to suffer from chronic lung infections and influenza[7]

4. With the exception of lung infections, a causal relationship has not been agreed upon within the dental community.

5. Varying test results occur due to lack of the following:
   - Uniform definition of periodontal disease
   - Uniform treatment protocol for periodontal disease
   - Uniform definition for end-point of therapy
   - Objective measurement for effective treatment of periodontal disease[8]

6. In 2014, United Concordia found patients who treated their gum disease spent less on medical care.
   - $5681/year on average for patients with cerebrovascular disease (stroke)
   - $1090/year on average for patients with coronary artery disease (heart)
   - $2840/year on average for patients with diabetes
   - $2433/year on average for pregnant female patients[9]
7. In 2014, United Concordia found patients who treated their gum disease were in the hospital less.
   - 21% less on average for patients with cerebrovascular disease
   - 29% less on average for patients with coronary artery disease
   - 39% less on average for patients with diabetes

8. The facts listed above are what is going to separate dentists from being technicians to being diagnosticians and doctors of oral medicine.

9. It only takes two minutes to talk to a patient about The Mouth-Body Connection™. Here’s an example of how to talk to your patient:

   “<Mr./Ms. Patient Name> are you aware of the infection in your gums/tooth? We call it periodontal/endodontic disease, which is an infection in your bone. Studies have shown <insert any statistic from above>. The best way to treat this is by partnering with your primary healthcare provider. The great news is that it is treatable in our office.” (Describe the four-step process: scaling and root planning, laser therapy, irrigation therapy, and referral to periodontist when indicated).

10. You can create personalized care within your office by:
   - Diagnosing periodontal/endodontic disease and taking a closer look at health histories.
   - Talking to patients about their oral condition and how it can affect their wellness.
   - Partnering with the patient’s physician.
   - Providing lab tests specific to their needs (e.g., VELscope, MyPerioPath, MyPerioID).

References:
3. Courtesy of Armin J. Grau, Heiko Becher, Christoph M. Ziegler, Christoph Lichy, Florian Buggle, Claudia Kaiser, Rainer Lutz, Stefan Bültmann, Michael Preusch and Christof E. Dörfer. Periodontal Disease as a Risk Factor for Ischemic Stroke, published by American Heart Association online Jan 5, 2004
6. Courtesy of National Center for Biotechnology Information (NCBI)
9. White paper courtesy of United Concordia Dental – The Mouth: The Missing Piece to Overall Wellness and Lower Medical Costs