

THE ORAL-SYSTEMIC CONNECTION UPDATE:



Periodontal Health, for Pregnancy and Postnatal Health

Smoking, alcohol use and drug use during pregnancy are well-known contributors to prematurity and low birth weight in newborn babies. New evidence adds maternal periodontitis and gingivitis to the risk factors for adverse pregnancy outcomes.¹ In light of this evidence, periodontal health is proving important for a successful full-term pregnancy and the birth of a healthy baby.

THE RISKS, THE REASONING

According to this new research, the chance that a baby will be born too early or too small is seven times more likely for pregnant women with periodontal disease.² Should the periodontal condition worsen during pregnancy, so too might the risk for preterm birth.

PERIODONTAL TREATMENT DURING PREGNANCY: SAFE FOR MOTHER AND CHILD?

All studies to date involving the treatment of periodontal disease in pregnant women suggest it is safe for the mother and child, though most of these studies occurred during the second trimester.¹ Safe treatment includes both diagnosis (including necessary dental X-rays) and procedures for conditions requiring immediate attention.³ Whether treatment can improve pre- and postnatal outcomes, or even reverse damage incurred, is yet unknown; multicenter trials are in progress to gauge this.¹

You can also update your practice information on our Web site. Just visit www.emblemhealth.com and update your profile. We appreciate your assistance!

ADVISING EXPECTANT MOTHERS ON PERIODONTAL CARE

A recent study shows 75.2 percent of pregnant women have some degree of periodontal disease. This underscores the urgency of incorporating oral care into prenatal care and well child visits.¹

We encourage you to notify patients who are pregnant, as well as those planning for pregnancy, of the connection between periodontal health and pregnancy health and to provide them with:

- A periodontal evaluation (including risk assessment, exam and health history)
- Specialty referrals as needed
- Referrals to prenatal classes that address oral care and hygiene
- Supportive educational materials
- Encouragement to follow your recommendations for treatment or follow-up

Sources

1 Yiorgos A. Bobetsis, DDS, Ph.D., et al. 2006. Exploring the relationship between periodontal disease and pregnancy complications. *The Journal of the American Dental Association* 137. jada.ada.org/cgi/content/full/137/suppl_2/7S (accessed May 26, 2010).

2 American Academy of Periodontology. 2009. Gum Disease and Pregnancy Problems. www.perio.org/consumer/mbc.baby.htm (accessed May 26, 2010).

3 New York State Department of Health. 2006. Oral Health Care during Pregnancy and Early Childhood: Practice Guidelines. http://www.nyhealth.gov/publications/0824/pda/windows_mobile/0824_prenatal_care_providers.pdf (accessed May 26, 2010).



EmblemHealth®

GHI and HIP are EmblemHealth companies

Group Health Incorporated (GHI), HIP Health Plan of New York (HIP), HIP Insurance Company of New York and EmblemHealth Services Company, LLC are EmblemHealth companies. EmblemHealth Services Company, LLC provides administrative services to the EmblemHealth companies.





Dental News

The Newsletter for EmblemHealth and GHI Dental Practitioners



Spring 2011

The Oral-Systemic Connection: Salivary Testing for Systemic Diagnoses

Oral health is essential to overall health, and dentistry can partner with the medical community to help patients achieve positive health outcomes, including disease prevention. Now, in-office saliva testing for HIV, diabetes, heart disease, arthritis and various forms of cancer offers dental professionals a new way to integrate potentially life-saving preventive care into routine dental treatment.*



Widely used to detect oral disease (including periodontal disease and caries risk), salivary diagnostics are now proving their potential to detect systemic disease and reveal new information about oral-systemic health.¹ Supporting this development are technological advances that break down barriers to widespread salivary testing such as low speed and poor sensitivity and functionality. For example, with some new technologies, the clinician can screen for disease using only a small amount of bodily fluid and measure in saliva many things one can measure in blood.

As a research tool, saliva may tell us more about our health than we once believed. As a clinical tool, it is compelling because it meets a demand for:

- ▶ **Noninvasive screening**, reducing patient anxiety and discomfort and simplifying the process of repeat sampling.
- ▶ **Quick, easy and inexpensive methods**, creating opportunities for more widespread use and making it possible to diagnose disease even in remote or impoverished settings.
- ▶ **Ease of collection, storage and shipping**, representing some advantages of saliva over serum.
- ▶ **Fewer procedural manipulations**, made possible because saliva does not clot.

In a January 2010 survey from the American Dental Association, 87.7 percent of 1,900 dentists surveyed said they would be willing to perform salivary diagnostics.² With this level of support and enthusiasm, the goal of [Healthy People 2020](#) could be achievable — that is, to bring preventive interventions in a dental setting to a greater number of adults, including screenings for oral and pharyngeal cancer and tests or referrals for glycemic control.

IN THIS ISSUE

>> Features

- ▶ [GHI Family Dental Practice Embraces CAMBRA Model](#)
- ▶ [Rapid HIV Screening in the Dental Setting: EmblemHealth Hosts CE Course](#)
- ▶ [The Oral-Systemic Connection: Salivary Testing for Systemic Diagnoses](#)
- ▶ [Free Electronic Claims Submission for Dental Providers](#)
- ▶ [Focus on Preventive Care for Kids](#)

>> Reminders and Updates

- ▶ [Claims Corner](#)
- ▶ [Our Web Site Capabilities and Online Tools](#)

*Screening services may not be covered under EmblemHealth and GHI dental plans. Related ADA CDT codes are as follows: collection and preparation of saliva sample for laboratory diagnostic testing (D0417) and analysis of saliva sample (D0418).

References

1. Wong, David T., DMD, DMSc. 2006. [Salivary diagnostics powered by nanotechnologies, proteomics and genomics](#). *The Journal of the American Dental Association*. Vol. 137, No. 3, 313–21.
2. Greenberg, Barbara L., MSc, PhD, Michael Glick, DMD, Julie Frantsve-Hawley, RDH, PhD and Mel L. Kantor, DDS, MPH, PhD. 2010. [Dentists' attitudes toward chairside screening for medical conditions](#). *The Journal of the American Dental Association*. Vol. 141, No. 1, 52–62.