Risk factors for periodontal disease:

1. Lack of oral hygiene
2. Crowded or crooked teeth
3. Poorly contoured restorations
4. Crowded or crooked teeth

periodontal disease involves using a scalpel to raise a flap around the tooth and cutting away the infected gum tissue, placing sutures to hold the reduced tissue in place during the healing process. This approach of amputating the gums always results in recession of

Toni Sturm says she had an ongoing problem with her gums. “It think it’s called gingivitis,” says the retired information systems staff analyst.

At the initial stage of periodontal disease, called gingivitis, only the gums are affected. Patients may experience some redness, swollen, tender gums that appear puffy and bleed easily, or they may experience no warning signs at all.

Healty gums adhere closely to the teeth, supporting them so they don’t become loose in the jawbone. However, as periodontal disease progresses, the bone is lost around the tooth and the pockets around the teeth get deeper. If left untreated, gingivitis may lead to a second, more serious stage, which is called periodontitis.

In its more destructive stage, bacteria and plaque migrate more deeply into the tissues on the root surfaces of the teeth. The gums pull away from the teeth, producing areas of periodontal pockets (the gap between teeth and gum). This layer of tissue becomes chronically inflamed and when disturbed may easily bleed.

“Years ago, I had full-mouth gum surgery, one quadrant at a time,” confides Toni. Traditional gum treatment for the gums – a lowering of the level of both diseased and healthy gum tissue. Following conventional gum surgeries, the teeth appear much longer once the gums have healed. If the gum tissue recedes too far, it can leave the sensitive tooth roots exposed.

With the old procedure, they had to pack my gums with something reminiscent of putty,” remembers Toni. “I had a tremendous amount of swelling, and after each quadrant, I had such dreadful pain that it put me to bed for two days.”

Then, in 2010, Toni was informed that she would require additional gum surgery by her present periodontist, Robert J. Yu, DMD.

Dr. Yu is a board-certified diplomate of the American Board of Periodontology and is a diplomate and fellow of the International Congress of Oral Implantologists. As a periodontal specialist, he focuses on gum disease and the surrounding structures of the dentition (gums and bone) at Tampa Bay Dental Implants & Periodontics in St. Petersburg. He is one of the few board-certified periodontists in the Tampa Bay area, and acknowledges that his office offers the most state-of-the-art technology available to industry today.

“Dr. Yu explained that there was a new procedure to treat gum disease, recalls Toni. “He called it microsurgery.”

Microsurgery

For many patients, the traditional method for gum surgery has a positive long-term effect, but for a significant number of patients, the bacteria return, points out Dr. Yu.

“Fortunately, we now have a method of treatment that uses regeneration rather than resection. The recently FDA-approved PeriO-Lase dental laser enables us to destroy bacteria and diseased tissue in the periodontal pocket with a very thin fiber. Once the bacteria are vaporized, the tissue can heal and reattach, closing the pocket.”

Along with the specialized dental laser, Dr. Yu performs the surgery under a microscope.

“Working under magnification dramatically raises the standard of treatment my patients can expect,” informs Dr. Yu. “Magnifying everything from three to over nineteen times enables me to diagnose problems and perform surgery with more precision and, ultimately, to give my patients better outcomes.”

So much better

Dr. Yu performed laser microsurgery for Toni on January 7, 2011.

“He did both sides, top and bottom, in the back sections, all at the same time,” says Toni. “Dr. Yu gave me the option of having one side done at a time, but after the last surgeries, I didn’t want to go through this procedure twice.”

However, Toni says this was entirely different: “It was amazing. There were no sutures. The bleeding was minimal, like none, and there was no pain, no putty. Dr. Yu gave me pain pills, but I didn’t have to use them.

“He followed up with me the next day after the procedure to see how I was doing, and I filled him in. I had no ach- ing, no pain whatsoever.

“When he checked my gums the following week, he said I was healing wonderfully.

“This new procedure is so much better.”

Cone beam CT technology

Another leading-edge technology in Dr. Yu’s arsenal is cone beam technology for patient imaging, diagnostics, and treatment. This innovation is rapidly becoming a vital element in dental practices.

“For decades, we have used x-rays in dental prac- tices,” observes the doctor. “Of course, x-rays are a two-dimensional image of a three-dimensional object, while microsurgery can provide us with an additional dimension of crystal-clear information while exposing our patients to less radiation.”

In the dental arena, this new technology is useful for many different procedures, including implants, peri- odontics, bone grafting, orthodontics, extractions, and other oral surgeries.

For excellent oral health

Dr. Yu and his staff look forward to meeting the readers of Pinellas Health Care News. For more information or to schedule an appointment, please call (727) 894-9122. His office is located at 6700 Crosswinds Dr. N., Suite 200 B, in St. Petersburg.

Robert J. Yu, DMD, is a board-certified diplomate of the American Board of Periodontology and is a diplomate and fellow of the International Congress of Oral Implantologists. Dr. Yu completed his undergraduate degree at the University at Albany – State University of New York. He earned his Doctor of Dental Medicine degrees from Nova Southeastern University, College of Dental Medicine, Ft. Lauderdale, followed by postgraduate training in periodontics at the University of Pittsburgh School of Dental Medicine, where he served a three-year residency. Among other professional affiliations, Dr. Yu is a member of the American Dental Association and the American Academy of Periodontology.