

Management of periodontitis



The European Federation of Periodontology (EFP) has developed a step-by-step treatment plan for managing periodontitis (gum disease).

Treatment is divided into 4 main steps:

Step 1: Personal care and professional support

The first step emphasises developing good oral hygiene habits and managing risk factors. Patients are encouraged to brush and clean between their teeth effectively, and professionals may remove plaque and calculus. Key focus areas include controlling factors like tobacco use and diabetes. Evidence on the benefits of increasing physical activity or weight control for gum health remains unclear.

Step 2: Subgingival (below the gum line) instrumentation (deep cleaning)

This step focuses on cleaning below the gum line to remove the subgingival biofilm and calculus. Deep cleaning can be done with specialised hand or powered instruments. Some additional therapies, for example antibiotics, may be recommended for severe cases. Other additional therapies like lasers are not advised.

Step 3: Advanced treatment for non-responsive areas

If certain areas do not respond adequately to the above, further treatments may be required. This may be repeat subgingival instrumentation or periodontal surgery. Periodontal surgery can involve:

- Lifting the gums to access and clean deeper areas
- Reshaping the soft tissue ± bone
- Using regenerative techniques (including the use of biomaterials or bone-derived grafts) to reconstruct lost tissues in some instances.

These procedures are typically done by specialists or dentists with additional training.

Step 4: Supportive periodontal care (SPC)

The last step is long-term maintenance which involve visits to the dentist, therapist or hygienist every 3-12 months based on individual needs. During these visits, the dental team assesses gum health, helps maintain good oral hygiene habits, and provides professional cleaning to reduce the risk of disease recurrence.

Following these structured steps, patients can expect improved periodontal health, helping to prevent tooth loss and other complications associated with periodontitis.

References

Sanz M, Herrera D, Kebschull M, Chapple I, Jepsen S, Beglundh T, Sculean A, Tonetti MS; EFP Workshop Participants and Methodological Consultants. Treatment of stage I-III periodontitis-The EFP S3 level clinical practice guideline. *J Clin Periodontol.* 2020 Jul;47 Suppl 22(Suppl 22):4-60. doi: 10.1111/jcpe.13290. Erratum in: *J Clin Periodontol.* 2021 Jan;48(1):163. doi: 10.1111/jcpe.13403. PMID: 32383274; PMCID: PMC7891343.