

CLINICAL MANIFESTATIONS OF PERIODONTAL DISTURBANCES IN CHRONIC OBSTRUCTIVE PULMONARY DISEASES PATIENTS

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Abstract

A systemic disorder, such as chronic obstructive pulmonary disease (COPD), significantly accelerates a bone resorption, especially in elderly patients and postmenopausal women. This makes the clinical study of periodontal disorders in these patients valuable.

The aim was to study the clinical features of periodontal abnormalities in COPD patients.

Materials and methods. We examined 64 COPD patients and 30 apparently healthy subjects 40 to 80 years of age. The following methods of examination were used: questionnaires, clinical and periodontal examination, multi-slice computed tomography (MSCT) of maxillofacial area and pulmonary function test.

Results. The most frequent periodontal disturbance observed in COPD patients was stage I–II generalized periodontitis and its complications — partial or complete secondary adontia, partial loss of teeth and abnormal dental occlusion, requiring not only periodontal therapy but a wide orthodontic procedures in these patients.

Group D COPD patients, with severe clinical symptoms, severe ventilation disturbances and high risk of complications, accounted for 47 % of all secondary adontia patients.

Clinical inspection and MSCT of periodontium in COPD patients have revealed more significant abnormalities in comparison with healthy controls. High rate of bacterial infection of periodontal tissues and oral cavity of study patients worsened the course of COPD.

Conclusion. High prevalence and intensity of dental plaque and periodontal disease are the risk factors of complicated somatic diseases as well as potentially unfavorable influence on body in general and on COPD course due to the spread of infection down the bronchial tree and the presence of odontogenic infection foci in affected teeth, promoting progression of systemic inflammation.

Key words: chronic obstructive pulmonary disease, periodontal disease

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