

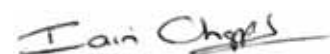
What is Periodontal Medicine?

There are currently two distinct contexts in which the term 'periodontal medicine' is used - one that describes the study of the systemic effects of inflammatory periodontitis and another (the main focus of this volume) that describes periodontal tissue manifestations of systemic diseases. These two disciplines are distinctly different in their scope, method of study and impact on our patients and thus our clinical practice, and yet they are frequently confused.

The title 'periodontitis and systemic disease' better describes the peripheral effects of periodontal bacteria and periodontal inflammation on the onset, clinical course and outcome of diseases of the body's major systems, such as the cardiovascular and cerebrovascular systems, metabolic control in people with diabetes, adverse pregnancy outcome, osteopaenia/osteoporosis and respiratory diseases. Whilst a body of evidence is developing globally to support a link between plaque-induced inflammatory periodontal disease (periodontitis) and some of the above conditions, a lack of prospective intervention studies that assess the impact of successful periodontal therapy on systemic disease outcomes currently limits these relationships to 'associations'. Intervention studies allow us to shed light on true causality or disease modification, but such studies have a long time-course and are thus expensive to run. However, the shorter time-course involved in studying the impact of periodontal therapy on adverse pregnancy outcome is such that studies like the currently active Oral Conditions and Pregnancy study in the United States should help clarify the nature of the periodontitis/adverse pregnancy outcome relationship in the near future.

The term 'periodontal medicine' should be applied in a more focussed manner to the study of non-plaque-induced lesions affecting the periodontal tissues and systemic diseases and conditions that present with periodontal tissue manifestations. These largely involve the gingival tissues and associated muco-gingival complex, but may also involve the periodontal attachment, including alveolar bone. They represent a fascinating array of diseases and disorders, which present the clinician with often complex diagnostic challenges and a need for medical (and more rarely surgical) management, that frequently necessitates the establishment of collaborative care pathways with physicians in disciplines as diverse as dermatology and gastroenterology. There are far in excess of 100 such conditions, and the scope of this traditionally 'Cinderella' field of clinical practice is vast. Often these conditions are overlooked or misdiagnosed, due to the frequently subtle nature of presenting clinical signs, the existence of multiple pathology and the need for a forensic approach to the investigative process. This volume presents a focus article on the condition desquamative gingivitis to whet the reader's appetite and follows up with a series of illustrated clinical reports and a case conference.

We hope that, having read this volume, you will be stimulated to learn more about this important and emerging clinical sub-discipline of periodontal practice. There are large numbers of our patients who suffer from these conditions, but if we don't look for the signs, we will not find the diseases. For readers who wish to learn more about periodontal medicine, the Quintessence textbook *Periodontal Medicine: A Window on the Body* (ISBN 1-85097-079-3) will be available in October 2005.



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