The World Health Organization (1947) defined health as: “a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity.” However, it is well-known that a clinician’s rating of oral health often does not match with patient self-rating. For periodontal diagnosis, the clinician relies mainly on clinical measures such as probing depth, clinical attachment level, and gingival inflammation. The patient’s perception may be drastically different. The reasons for seeking periodontal care are often related to pain, esthetics, teeth migration, mobility or functional problems.

Setting treatment objectives may be another delicate matter. For the periodontist, the desired outcomes of therapy include decreased gingival inflammation, reduction in probing depth, stabilization or gain of clinical attachment, and eventually changes in microbial markers. These parameters can be objectively measured and are used to evaluate the efficacy of therapy. However, these same measurements cannot be precisely evaluated by the patient and thus are meaningless in the context of the patient’s well-being. The patient’s expectations are more subjective and are related to the absence of pain and discomfort, appearance improvement and adequate function. If the aim of plastic periodontal surgery is to improve esthetics, it is clear that the primary outcome measurement should be a self-reported esthetic improvement and not probing measurement!

Consequently, who should be the final arbiter in rating oral health and determining the success of therapy? And who should have the final word – caregiver or patient?

In clinical practice, the approach to periodontal care should be rational, global as well as multidisciplinary. The objectives of treatment have to be based on the patient’s needs and on his or her profile. The patient’s needs and expectations must be recognized and integrated into the objectives of treatment. The periodontist should then select the best therapeutic option which allows the biologic objectives to be fulfilled and the patient’s demands and expectations to be met. A challenge for the clinician!

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