

Research Article

Clinical Cardiology Research and Reports

Open Access

The Hypothesis that a Relationship exists between Periodontal Disease and Patient's Systemic Inflammatory

Paul Hegazy

Department of Emergency Medicine, New York, NY

*Corresponding Author: Paul Hegazy, Department of Emergency Medicine, New York, NY

Received Date: March 31, 2022; Accepted Date: April 26, 2022; Published Date: April 30, 2022

Citation: Paul Hegazy, The Hypothesis that a Relationship exists between Periodontal Disease and Patient's Systemic Inflammatory, J Clinical Cardiology Research and Reports.

Copyright: © 2022 Paul Hegaz, This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Abstract

Measuring Lp- PLA2 blood situations evaluates a vascular specific seditious enzyme that participates in atherosclerotic shrine conformation and shrine rupture and has been associated with a significant increased threat for heart attack and stroke if the Lp- PLA2 situations were lesser than 200ng/ml. Lipoproteinassociated phospholipase A2 has been set up to be associated with periodontal inflammation, indicating that periodontal treatments could reduce the threat of cardiovascular conditions. The recognition of this association has led investigators to determine Lp- PLA2 situations drop following periodontal surgical and phase I periodontal remedy.

Keywords: Periodontal disease; Lp-PLA2; cardiovascular disease; perio tray; perio protect method

Introduction

Measuring Lp- PLA2 blood situations evaluates a vascular specific seditious enzyme that participates in atherosclerotic shrine conformation and shrine rupture and has been associated with a significant increased threat for heart attack and stroke if the Lp- PLA2 situations were lesser than 200ng/ ml (1). Lipoproteinassociated phospholipase A2 has been set up to be associated with periodontal inflammation, indicating that periodontal treatments could reduce the threat of cardiovascular conditions. The recognition of this association has led investigators to determine Lp- PLA2 situations drop following periodontal surgical and phase I periodontal remedy (2).

A airman study was accepted to determine if treating a cases periodontal complaint with the Perio cover Method might affect their systemic Lp- PLA2 situations. The Perio cover Method uses a tradition charger (Perio Tray ®, Perio cover LLC,St. Louis, MOwww.perioprotect.com) to deliver specifics into shallow(< 5 mm) and deep(> 5 mm) pockets in combination with mechanical debridement, scaling and surgery if needed(3). The Method easily improves periodontal issues. A six month study of cases with moderate to severe periodontal complaint using a1.7 percent hydrogen peroxide gel (Perio gel ®, QNT Anderson LLC, Bismarck, ND) in a tradition customized charger (Perio Tray ®) as an adjunct to scaling and root planning (SRP) demonstrated over six months there was a clinically significant enhancement in fund depths and bleeding indicators when compared to SRP alone, and it appears that the effect wasn't temporary. The test group reductions from birth were maintained for six months (4). This airman study evaluates if this approach to periodontal complaint treatment will also reduce LpPLA2 situations and benefit cases with cardiovascular complaint.

Styles

Increased blood situations of Lp- PLA2 have been related to an increased threat of cerebral thrombosis (5) original (6) and intermittent (7) coronary events, poor issues after acute coronary events (8) and cardiovascular complaint associated with metabolic pattern (9). There's some contestation regarding the possible affect Lp- PLA2 may have on reducing atherogenesis by dwindling oxidized low- viscosity lipoproteins (oxLDL) and platelet- cranking factor (PAF), as declination of these motes may

also have proinflammatory, proliferative and proatherogenic parcels (11). Because Lp- PLA2 situations relate to an increased threat to the case, it would appear that reducing Lp- PLA2levels would be a salutary thing of cardiovascular remedy (12).

Lp- PLA2 situations have been set up to be elevated in habitual periodontal cases when compared to healthy control subjects (13). Research from this study appreciatively associated serum Lp- PLA2 situations and bleeding upon probing and periodontal inflammation egging the question whether periodontal complaint treatment could reduce the threat of cardiovascular complaint in habitual periodontal cases.

This airman study is an attempt to answer the question if treating periodontal complaint with the Perio cover Method can reduce case's Lp- PLA2 systemic seditious labels. The Perio cover Method <code>@(PPM)</code> combines SRP and/ or surgery with the use of a custom formed medical device (Perio Tray <code>®)</code>, to deliver croaker named specifics into the gingival sulcus or periodontal fund. The charger delivery is used by cases at home under the dentist tradition in agreement with the periodontal conditions and treatments are modified as mending occurs.

The specifics used in the airman study were1.7 hydrogen peroxide gel (Perio Gel ®) and 1-3 drops/ charger Vibramycin saccharinity (50mg/ 5 ml doxycycline). The specifics are placed by the case into the Perio Tray and delivered into the periodontal fund in agreement with the compass and magnitude of the case's periodontal complaint. The Perio cover Protocol was determined by the case deepest periodontal pockets as follows

6 mm pockets 4 times/day at 15 twinkles

 $3\ \text{mm}$ - $6\ \text{mm}$ pockets $3\ \text{times/}$ day at $15\ \text{nanosecond}$ (conservation)

3 mm pockets 2 times/ day at 15 twinkles

The Silver Staff Method of evaluation was used to measure the case's Lp- PLA2 situations. The Silver Staff Method involved having the patient warm the case's hand in warm valve water for 10 twinkles. A cutlet was also sanctified with alcohol and a cutlet stick was performed at the edge of the point spiral. The case's name and identification number were placed on the collection card. Drops of blood were also placed on the collection card until sufficient blood was accumulated to pass a enrollment line. The card was also reused as per the manufacturer's instructions and



Clinical Cardiology Research and Reports

the card/ sample was also posted to tableware Staff for evaluation. The Silver Staff observers were dazed to the samples and testing as they only estimated the blood sample results.

Six cases without passing a cardiovascular event were accepted into this case study. Each of the cases had active periodontal complaint and agreed to have their Lp- PLA2 situations estimated at onset, at one and three months. The acceptance criteria where the case couldn't be under active cardiovascular treatment and couldn't take any cardiovascular or oral antibiotic specifics during the course of the three months airman study.

The cases started their three months periodontal complaint treatment with Perio Tray administration of< 1gm1.7 hydrogen peroxide and one to three drops Vibramycin saccharinity/ charger. Following two weeks of Perio Tray operation scaling and root planning and/ or debridement were completed. One of the six cases also entered point specific surgery as demanded. The cases werere-examined at one month for changes in their periodontal conditions and the blood samples were again taken and measured with the Silver Staff Method to estimate their Lp-PLA2 situations. differences in the frequence of Perio Tray delivery were made in agreement with the treatment progress and/ or new servers were fabricated as needed by the mending that passed.

The original results were maintained by using the Perio Tray deliver of both cures one to two times a day for the remaining 3 months study period. At the three months visit, the periodontal conditions and blood samples were taken to estimate the case's Lp-PLA2 situations. The cases completed the three months case study without any complications or adverse situations. Results

A aggregate of 6 subjects completed the 3 month trial. After 4 weeks of periodontal treatment, analysis of deeper pockets (> 5 mm at birth) showed that fund probing depth (PPD) dropped from birth by further than 0.90 mm. At three months mean PPD diminishments were 1.70 mm for the airman study group. Analysis of shallower pockets (i.e., \leq 5 mm at birth) showed 0.57 mm reduction at one month and 1.08 mm reduction at three months.

Case's Lp- PLA2 situations were measured as ng/ mL previous to treatment and at one and three months of periodontal treatment. The mean Lp- PLA2 situations before treatment were120.5 ng/ ml. The one month Lp- PLA2 situations were80.7 ng/ ml and the three month situations were76.8 mg/ m. This equates to a30.7 drop in Lp- PLA2 situations at one month and a37.1 drop in Lp- PLA2 situations at three months. Individual case results are indicated in Figure 1.

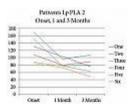


Figure 1 Lp- PLA2 attention in ng/ml were recorded (tableware Staff) previous to treatment (onset) and at one and three months of treatment

Bleeding upon probing (BOP) was recorded as the number of bleeding spots recorded after probing the mesial buccal, buccal and distal buccal, mesial lingual, lingual and distal lingual aspects of each tooth. The reduction in bleeding for the test group showed a clinical enhancement for both deep and shallow pockets (Figure 2). The mean BOP reductions for PPDs> 5 mm were roughly 62 at one month and an 80 drop at three months. For PPDs in the< 5 mm range, there was a 74 drop in bleeding upon probing at one month and nearly a 90 drop in the number of bleeding points at three months (Figure 3). The data indicate that tradition charger delivery of 1.7 hydrogen peroxide gel and Vibramycin redounded in a lesser reduction of bleeding points in shallow pockets.

www.alcrut.com Copyright: © 2022 Paul Hegazy

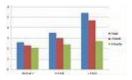


Figure 2: Cases mean fund probing depths were recorded at the onset of the Perio cover system treatment and at one and three months.

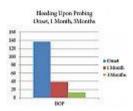


Figure 3: Bleeding upon probing (BOP) were recorded at 924 spots previous to the Perio cover treatment.

Discussion

The effectiveness of periodontal complaint treatment using the Perio cover system 's combination of mechanical remedy with tradition charger delivery of specifics was estimated in subjects with habitual periodontitis to determine if treating their periodontal conditions would affect their systemic Lp- PLA2 seditious labels. The results demonstrated the periodontal treatment was effective in reducing fund depths and bleeding upon probing (numbers 2 and 3) corroborating the findings of earlier trials. The results also show reductions in birth Lp- PLA2 scores for each case.

It was hypothecated that treating periodontal complaint would drop cases Lp- PLA2 situations. Case's Lp- PLA2 situations were estimated at the onset of the study and at one and three months of using the Perio cover system with the custom formed Perio Tray. The mean Lp- PLA2 position previous to treatment was set up to be a mean of120.5 ng/ ml. The Lp- PLA2 situations dropped to a mean of76.8 ng at one month and farther dropped to a mean of80.7 ng at three months. This equates to a30.7 reduction in Lp- PLA2 situations in one month and a37.1 reduction by the third month (Figure 1).

The only treatments rendered during the course of this study were dental procedures using the Perio cover system to address the case's periodontal conditions. All cases were biddable in their periodontal treatments. Advancements in the case's periodontal conditions (fund probing depth and bleeding upon probing) appeared to coincide with case's advancements in Lp-PLA2 situations, but the airman study involved only 6 cases, which isn't a significant number of cases for statistically significant findings to be determined.

Conclusion

This airman study reports on unique findings where six cases with periodontal complaint were treated with the Perio cover Method and their Lp- PLA2 situations bettered as their periodontal conditions bettered. The results of this study appear to support the thesis that a relationship exists between periodontal complaint and case's systemic seditious Lp- PLA2 situations and that treating the periodontal complaint may relate with bettered cases Lp- PLA2 situations. farther examinations will be needed to determine the significance of this airman program and if long- term operation of periodontal complaint will appreciatively affect long- term Lp- PLA2 situations and/ or cardiovascular health.

Competing interests

The author declares that he is the CSO of Perio Protect.

Volume 1 Issue 1 Page 2 of 3



Clinical Cardiology Research and Reports

References

- Davidson MH, Corson MA, Alberts MJ, Anderson JL, Gorelick PB, Jones PH, Lerman A, McConnell JP and Weintraub HS. Consensus panel recommendation for incorporating lipoprotein-associated phospholipase A2 testing into cardiovascular disease risk assessment guidelines. Am J Cardiol. 2008; 101:51F-57F.
- Keles GC, Cetinkaya BO, Pamuk F and Balli U. Activity of platelet activating factor acetylhydrolase following phase I periodontal therapy. West Indian Med J. 2013; 62:62-7.
- Schaudinn C, Gorur A, Keller D, Sedghizadeh PP and Costerton JW. Periodontitis: an archetypical biofilm disease. J Am Dent Assoc. 2009; 140:978-86.
- Putt MS and Proskin HM. Custom tray application of peroxide gel as an adjunct to scaling and root planing in the treatment of periodontitis: results of a randomized controlled trial after six months. J Clin Dent. 2013; 24:100-7.
- Ballantyne CM, Hoogeveen RC, Bang H, Coresh J, Folsom AR, Chambless LE, Myerson M, Wu KK, Sharrett AR and Boerwinkle E. Lipoprotein-associated phospholipase A2, high-sensitivity Creactive protein, and risk for incident ischemic stroke in middle-aged men and women in the Atherosclerosis Risk in Communities (ARIC) study. Arch Intern Med. 2005; 165:2479-84.
- 5. Koenig W, Khuseyinova N, Lowel H, Trischler G and Meisinger C. Lipoprotein-associated phospholipase A2 adds to risk prediction of incident coronary events by C-reactive protein in apparently healthy middle-aged men from the general population: results from the 14-year follow-up of a large cohort from southern Germany. Circulation. 2004; 110:1903-8.
- 7. Koenig W, Twardella D, Brenner H and Rothenbacher D. Lipoprotein-associated phospholipase A2 predicts future cardiovascular events in patients with coronary heart disease

independently of traditional risk factors, markers of inflammation, renal function, and hemodynamic stress. Arterioscler Thromb Vasc Biol. 2006; 26:1586-93.

www.alcrut.com Copyright: © 2022 Paul Hegazy

- 8. <u>Möckel M, Müller R, Vollert JO, et al. Lipoprotein-associated phospholipase A2 for early risk stratification in patients with suspected acute coronary syndrome: a multi-parameter approach. Clin Res Cardiol. 2007; 96:604-612.</u>
- 9. Persson M, Hedblad B, Nelson JJ and Berglund G. Elevated Lp-PLA2 levels add prognostic information to the metabolic syndrome on incidence of cardiovascular events among middle-aged nondiabetic subjects. Arterioscler Thromb Vasc Biol. 2007; 27:1411-6.
- 10. Stafforini DM. Biology of platelet-activating factor acetylhydrolase (PAF-AH, lipoprotein associated phospholipase A2). Cardiovasc Drugs Ther. 2009; 23:73-83.
- 11. Burke JE and Dennis EA. Phospholipase A2 biochemistry. Cardiovasc Drugs Ther. 2009; 23:49-59.
- 12. Reddy KJ, Singh M, Bangit JR and Batsell RR. The role of lipoprotein-associated phospholipase A2 on cardiovascular disease risk assessment and plaque rupture: a clinical review. J Clin Lipidol. 2009; 3:85-93.
- 13. Zhou SY, Xiao WM and Ouyang XY. Lipoprotein-associated phospholipase A2 and serum lipid levels in subjects with chronic periodontitis and hyperlipidemia. Chin J Dent Res. 2012; 15:25-9.
- 14. <u>Keller D. Managing periodontal disease in a patient suffering</u> from renal failure. *Dent Today*. 2008; **27**:144-7.
- 15. Keller D. Management of periodontitis for HIV-AIDS patients: case study. Dent Today. 2006; 25:112-3.

Ready to submit your research? Choose Alcrut and benefit from:

- fast, convenient online submission
- rigorous peer review by experienced research in your field
- > rapid publication on acceptance
- authors retain copyrights
- unique DOI for all articles
- immediate, unrestricted online access

At Alcrut, research is always in progress.

Learn more:

 $\frac{https://www.alcrut.com/Journals/index.php?jname=Clinical\%20Cardiology\%20Research\%20and\%20Reports}{}$



This work is licensed under creative commons attribution 4.0

To submit your article Click Here: Submit Manuscript

