PRICHARD

THE DIAGNOSIS

AND TREATMENT OF

PERIODONTAL DISEASE
IN GENERAL

DENTAL PRACTICE

THE DIAGNOSIS AND TREATMENT OF PERIODONTAL DISEASE

John F. Prichard, D.D.S.

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To My Grandchildren, Missy and Justin

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PREFACE

The object of this book is to aid the clinician in private practice with the diagnosis and treatment of problems affecting the periodontium. Some aspects of traditional examination and treatment procedures are questioned and more practical approaches are discussed. Treatment techniques described include both the practical and the exotic in modern periodontics.

Periodontists are currently in the process of a critical reappraisal of all therapeutic procedures. Reduction of pocket depth is a major objective of periodontal treatment, and the techniques used for pocket reduction are presented in detail in the various chapters. It can be predicted, however, that pocket reduction as an objective of treatment will become secondary to efforts to maintain the gingival margin as near the cementoenamel junction as possible. In the future, treatment will be aimed at management and prevention of infectious disease instead of at repair of damage as it has been in the past. Such an approach has been anticipated in the preparation of this book.

I wish to express appreciation to many people for assistance in the preparation of this book. I especially appreciate my coauthors, who have contributed excellent chapters and have graciously accepted editorial changes.

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JOHN F. PRICHARD

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INTRODUCTION AND ORIENTATION

John F. Prichard

Dentistry exists as a profession to save the natural dentition. If its primary role were *removal* rather than retention of teeth, dentistry would be merely a branch of general surgery. However, nature intended for the teeth to last a lifetime, and with proper home and professional care from early childhood, there are few persons who cannot realize this expectation.

Patients place great demands on members of the dental profession. The demands are emotional as well as physical. In other parts of the body they usually accept change from disease and aging as inevitable. However, the oral cavity is viewed differently. Three factors are responsible for this: The oral cavity is visible; it has great cosmetic importance to the individual; and, more significantly, it is used to express emotions.

Unfortunately, many patients neglect their oral health until prognosis for the dentition is hopeless or nearly so. Then they expect to be restored to ideal oral health without discomfort, inconvenience, loss of tissue, or decrease in function.

More teeth are lost by adults from periodontal disease than from dental caries, but it is not the combination of dental caries and periodontal disease that causes the greatest loss of teeth. The members of the dental profession themselves are responsible for a substantial percentage of lost teeth because of incorrect diagnosis and treatment planning. Extraction is indicated for only a small percentage of the teeth that are removed.

Almost all dental problems and treatments have an effect on the periodontium, and a practical application of the science of oral biology is essential in patient care.

Webster defines "practical" as "that which can be used; workable; useful," and further, "[that which] is concerned with application of knowledge to useful ends, as distinguished from theory." The practice of dentistry requires a search for the practical in biological, physical, chemical, artistic, and mechanical science. However, the practitioner must also remember the human factor. The patient is a person, not just a case.

Practical should not be confused with expedient, which implies action for an immediate or special advantage. Something that is expedient may or may not be practical. The purpose of this book is to help the practicing dentist diagnose and treat the many and varied patient problems encountered in office practice.