



THE IMPACT OF ORAL HEALTH EDUCATION AND PREVENTIVE DENTAL CARE ON OVERALL HEALTH OUTCOMES IN PATIENTS WITH CHRONIC CONDITIONS MANAGED BY BOTH NURSES AND DENTISTS

Jawaher Abdulqader Alalwi ^{1*}, Fudah Taher Salman Alayesh², Muhannad Salem Alghamdi ³, Maryam Abdullah Albahrani ⁴, Nora farhan khassaf Alanazi⁵ Loulwah khalid wasmi Al wasmi ⁶, Aqila Taleb Taher Buhassan ⁷, Dalal Zaben Radad Aldaferi⁸, Ali Saad A Alsalm ⁹, Mahdi Ahmed Alkhulaif ¹⁰, Fatimah Hussein Aljuaidan¹¹, Afrah Ali ALGhirash ¹², Suad Mohammed Alghafli ¹³, Ahmed Ibrahim Alali ¹⁴, Alawiyyah Hafiz Alhashim ¹⁵.

^{1*}Nursing technician, King Fahad hospital hafof, Saudi Arabia.

²Nurse, Aljaber kidneys center, King fahad hospital hofuf, Saudi Arabia.

³dental hygienist, Ministry of health, Saudi Arabia.

⁴Nurse, Aljaber kidneys center, King fahad hospital hofuf, Saudi Arabia.

⁵Nursing technician, Hafar AlBatin, Saudi Arabia.

⁶Nursing technician, Jishah primary health care, Saudi Arabia.

⁷Nurse, Al mansoura health center, Saudi Arabia.

⁸Nursing Technician, Maternity and Children's Hospital, Hafer AlBatin, Saudi Arabia.

⁹dentist, Alrakah Primary Health Care, Saudi Arabia.

¹⁰nurse Tech., Alshuba Phc, Saudi Arabia.

¹¹Nurse, Prince saud bin jalawy hospital, Saudi Arabia.

¹²Nurse, Primary health care, Saudi Arabia.

¹³Dental assistant, Alomran health center alahsa, Saudi Arabia.

¹⁴Dentist, alkulabia primary health center, Saudi Arabia.

¹⁵Nurse, Alomran general hospital, Saudi Arabia.

***Corresponding Author:** Jawaher Abdulqader AlAlwi

^{*}Nursing technician, King Fahad hospital hafof, Saudi Arabia.

Abstract:

This review article explores the significant impact of oral health education and preventive dental care on the overall health outcomes of patients with chronic conditions, particularly when managed collaboratively by both nurses and dentists. The link between oral health and systemic health has been well-established, with growing evidence suggesting that poor oral health can exacerbate chronic conditions such as diabetes, cardiovascular disease, and respiratory disorders. Despite this interconnection, oral health is often overlooked in the comprehensive care of patients with chronic illnesses. This review aims to highlight the importance of integrating oral health education and preventive dental care into the management of chronic conditions to improve patient outcomes and quality of life. The review discusses the role of nurses and dentists in providing holistic care to patients with chronic conditions, emphasizing the need for interdisciplinary collaboration to address both oral and systemic health issues effectively. By incorporating oral health education into nursing practice and promoting regular dental check-ups as part of the patient's care plan, healthcare providers can

help prevent oral diseases and complications that may impact the management of chronic conditions. Furthermore, early detection and treatment of oral health problems can contribute to better overall health outcomes and reduce the risk of systemic complications in patients with chronic illnesses.

Keywords: Oral health education, Preventive dental care, Chronic conditions, Nurses, Dentists, Interdisciplinary collaboration

Introduction:

Oral health is an essential component of overall health and well-being. It is often overlooked, but poor oral health can have a significant impact on a person's quality of life and can even exacerbate chronic conditions. This is especially true for patients with chronic conditions who are managed by both nurses and dentists [1].

In recent years, there has been a growing recognition of the importance of oral health education and preventive dental care in the management of chronic conditions. Nurses and dentists play a crucial role in educating patients about the importance of oral health and providing preventive dental care to help prevent complications associated with chronic conditions [2].

The impact of oral health education and preventive dental care on overall health outcomes in patients with chronic conditions is significant. Poor oral health has been linked to a variety of chronic conditions, including diabetes, heart disease, and respiratory diseases. For example, patients with diabetes are at a higher risk of developing gum disease, which can in turn make it more difficult to control blood sugar levels. Similarly, patients with heart disease are more likely to have poor oral health, which can increase their risk of developing complications such as endocarditis [3].

By providing patients with the knowledge and tools they need to maintain good oral health, nurses and dentists can help prevent these complications and improve overall health outcomes. This includes educating patients about the importance of regular dental check-ups, proper oral hygiene practices, and the link between oral health and chronic conditions. Preventive dental care, such as cleanings, fluoride treatments, and sealants, can also help reduce the risk of developing oral health problems [4]. In addition to improving overall health outcomes, oral health education and preventive dental care can also help reduce healthcare costs. By preventing complications associated with chronic conditions, such as hospitalizations and emergency room visits, patients can avoid costly treatments and procedures. This not only benefits the patient, but also the healthcare system as a whole[5].

The Link Between Oral Health and Systemic Health in Patients with Chronic Conditions:

Oral health is an essential component of overall health and well-being. Many people are unaware of the significant link between oral health and systemic health, especially in patients with chronic conditions. Chronic conditions such as diabetes, heart disease, and autoimmune disorders can have a profound impact on oral health, and vice versa. Understanding this connection is crucial for healthcare providers to provide comprehensive care for their patients [6].

One of the most well-documented links between oral health and systemic health is the relationship between periodontal disease and chronic conditions. Periodontal disease is a chronic inflammatory condition that affects the gums and supporting structures of the teeth. Research has shown that there is a bidirectional relationship between periodontal disease and chronic conditions such as diabetes and heart disease. Patients with diabetes are more likely to develop periodontal disease, and those with periodontal disease are at a higher risk of developing complications from diabetes. Similarly, patients with heart disease are more likely to have poor oral health, which can exacerbate their cardiovascular condition [6].

The link between oral health and systemic health is not limited to periodontal disease. Poor oral health has also been associated with an increased risk of respiratory infections, rheumatoid arthritis, and even certain types of cancer. For example, research has shown that poor oral health can increase the risk of developing pneumonia and exacerbate existing respiratory conditions. Additionally, patients

with rheumatoid arthritis are more likely to have periodontal disease, which can worsen their joint inflammation and pain [7].

Patients with chronic conditions often face unique challenges when it comes to maintaining good oral health. The medications they take, such as immunosuppressants or anticoagulants, can affect their oral health by causing dry mouth, gum inflammation, or delayed wound healing. Furthermore, the symptoms of their chronic condition, such as fatigue or limited mobility, can make it difficult for them to practice good oral hygiene habits regularly. This can lead to an increased risk of developing oral health problems and exacerbating their systemic condition.

Healthcare providers play a crucial role in addressing the link between oral health and systemic health in patients with chronic conditions. They should educate their patients about the importance of maintaining good oral hygiene and scheduling regular dental check-ups. Additionally, healthcare providers should collaborate with dentists to develop personalized treatment plans that take into account the patient's chronic condition and its impact on their oral health. This interdisciplinary approach can help improve the overall health outcomes of patients with chronic conditions [8].

The link between oral health and systemic health in patients with chronic conditions is a complex and multifaceted relationship. Understanding this connection is essential for healthcare providers to provide comprehensive care for their patients. By addressing oral health as an integral part of overall health, healthcare providers can help improve the quality of life and outcomes for patients with chronic conditions. It is crucial for patients, healthcare providers, and dentists to work together to promote good oral health and systemic health in patients with chronic conditions [9].

Role of Nurses in Providing Oral Health Education and Preventive Care:

Nurses play a crucial role in promoting oral health education and preventive care among patients. Oral health is an integral part of overall health and well-being, and nurses are often the first point of contact for patients seeking healthcare services. By providing education and guidance on proper oral hygiene practices, nurses can help prevent oral health problems and improve the overall health outcomes of their patients [9].

One of the key roles of nurses in oral health education is to educate patients on the importance of maintaining good oral hygiene practices. This includes teaching patients how to brush and floss properly, as well as the importance of regular dental check-ups. By providing this education, nurses can empower patients to take control of their oral health and prevent common dental issues such as cavities, gum disease, and tooth decay [10].

In addition to educating patients on proper oral hygiene practices, nurses also play a critical role in promoting preventive care. This includes advocating for routine dental screenings and cleanings, as well as encouraging patients to adopt healthy lifestyle habits that can improve their oral health. Nurses can also provide information on the importance of a balanced diet and the impact of smoking and alcohol consumption on oral health [11].

Furthermore, nurses can also identify patients who may be at a higher risk for oral health problems and provide targeted education and interventions to prevent these issues from developing. For example, nurses can work with patients who have chronic conditions such as diabetes or cardiovascular disease to help them understand how these conditions can impact their oral health and what steps they can take to mitigate these risks [11].

Nurses can also collaborate with other healthcare providers, such as dentists and dental hygienists, to ensure that patients receive comprehensive oral health care. By working together as a team, healthcare providers can develop individualized treatment plans that address the unique needs of each patient and promote optimal oral health outcomes [12].

Nurses play a vital role in providing oral health education and preventive care to patients. By educating patients on proper oral hygiene practices, promoting preventive care, and collaborating with other healthcare providers, nurses can help improve the overall health and well-being of their patients. It is essential for nurses to continue to prioritize oral health education and preventive care in

their practice to ensure that patients receive the comprehensive care they need to maintain healthy smiles for a lifetime [12].

Role of Dentists in Preventive Dental Care for Patients with Chronic Conditions:

Dentists play a crucial role in providing preventive dental care for patients with chronic conditions. Chronic conditions, such as diabetes, cardiovascular disease, and autoimmune disorders, can have a significant impact on oral health. Patients with chronic conditions are at a higher risk of developing dental problems, such as gum disease, tooth decay, and oral infections. Therefore, it is essential for dentists to be aware of the unique challenges faced by these patients and to provide tailored preventive care to help them maintain good oral health [13].

There is a strong link between chronic conditions and oral health. For example, diabetes can increase the risk of developing gum disease, as high blood sugar levels can weaken the body's ability to fight off bacteria. Similarly, patients with cardiovascular disease may be more prone to developing gum disease, as inflammation in the gums can lead to inflammation in the blood vessels. Additionally, certain medications used to treat chronic conditions can have side effects that affect oral health, such as dry mouth or gum overgrowth [14].

Patients with chronic conditions may also be more susceptible to dental problems due to lifestyle factors. For example, individuals with diabetes may have difficulty controlling their blood sugar levels, which can lead to increased plaque buildup and a higher risk of tooth decay. Patients with autoimmune disorders may have weakened immune systems, making them more vulnerable to oral infections [15].

Dentists play a crucial role in providing preventive dental care for patients with chronic conditions. This includes conducting regular dental exams and cleanings to monitor oral health and detect any problems early on. Dentists can also provide personalized oral hygiene instructions to help patients with chronic conditions maintain good oral health at home [16].

In addition to routine dental care, dentists may recommend additional preventive measures for patients with chronic conditions. For example, patients with diabetes may benefit from more frequent dental cleanings to prevent gum disease. Patients with cardiovascular disease may be advised to use antibacterial mouthwash to reduce inflammation in the gums. Dentists can also work closely with patients' healthcare providers to ensure that their dental care is integrated with their overall medical treatment plan [17].

Furthermore, dentists can educate patients with chronic conditions about the importance of oral health in managing their overall health. Studies have shown that poor oral health can contribute to the progression of chronic conditions, such as diabetes and cardiovascular disease. By maintaining good oral hygiene and seeking regular dental care, patients with chronic conditions can reduce their risk of developing complications related to their condition [18].

Dentists play a vital role in providing preventive dental care for patients with chronic conditions. By understanding the link between chronic conditions and oral health, dentists can tailor their preventive care to meet the unique needs of these patients. Through regular dental exams, personalized oral hygiene instructions, and collaboration with healthcare providers, dentists can help patients with chronic conditions maintain good oral health and improve their overall well-being. It is essential for patients with chronic conditions to prioritize their oral health and work closely with their dentists to prevent dental problems and complications related to their condition [18].

Interdisciplinary Collaboration Between Nurses and Dentists in Managing Oral Health:

In recent years, there has been a growing recognition of the importance of interdisciplinary collaboration between healthcare professionals in providing comprehensive and holistic care to patients. One area where this collaboration is particularly crucial is in the management of oral health, where nurses and dentists play a key role in promoting and maintaining the oral health of individuals [19].

Nurses and dentists bring unique skills and expertise to the table when it comes to managing oral health. Nurses are trained to assess and monitor patients' overall health, provide education on preventive measures, and support patients in managing chronic conditions. On the other hand, dentists are experts in diagnosing and treating oral diseases, performing procedures such as cleanings, fillings, and extractions, and promoting good oral hygiene practices [20].

By working together, nurses and dentists can provide a more comprehensive approach to oral health care. Nurses can screen patients for oral health problems during routine health assessments, educate patients on the importance of oral hygiene, and refer them to dentists for further evaluation and treatment. Dentists, in turn, can collaborate with nurses to develop individualized care plans for patients with complex medical conditions that may impact their oral health [21].

Interdisciplinary collaboration between nurses and dentists is particularly important in vulnerable populations, such as children, the elderly, and individuals with chronic diseases. For example, children may be more prone to dental caries due to poor oral hygiene habits, while the elderly may face challenges in accessing dental care due to mobility issues or financial constraints. By working together, nurses and dentists can identify and address these barriers to care, leading to better oral health outcomes for these populations [22].

Furthermore, interdisciplinary collaboration can also help in the early detection and prevention of oral health problems. Nurses can educate patients on the signs and symptoms of oral diseases, such as gum disease and oral cancer, and encourage them to seek timely care from a dentist. Dentists, on the other hand, can work with nurses to develop protocols for screening patients for oral health problems during routine health assessments, allowing for early intervention and treatment [23].

Interdisciplinary collaboration between nurses and dentists is essential in managing oral health and promoting overall well-being. By leveraging their complementary skills and expertise, nurses and dentists can provide more comprehensive care to patients, leading to improved oral health outcomes and quality of life. It is imperative for healthcare organizations to foster a culture of collaboration and communication between these two professions, in order to optimize patient care and achieve better health outcomes [24].

Impact of Oral Health Education and Preventive Dental Care on Overall Health Outcomes:

Oral health education and preventive dental care play a crucial role in maintaining overall health outcomes. The mouth is a gateway to the body, and poor oral health can have significant implications on one's general well-being. By understanding the impact of oral health education and practicing preventive dental care, individuals can mitigate the risk of various health issues and improve their quality of life [25].

One of the key benefits of oral health education is raising awareness about the importance of maintaining good oral hygiene practices. Many people are unaware of the connection between oral health and overall health, and may neglect their oral care as a result. By educating individuals about the link between the two, they are more likely to prioritize their oral health and take steps to prevent dental problems [26].

Preventive dental care, such as regular dental check-ups, cleanings, and screenings, is essential for maintaining good oral health. These preventive measures can help identify dental issues early on, before they escalate into more serious problems. For example, regular dental exams can detect cavities, gum disease, and oral cancer in their early stages, making treatment more effective and less invasive [27].

Furthermore, preventive dental care can also help prevent systemic health issues. Poor oral health has been linked to various medical conditions, including heart disease, diabetes, respiratory infections, and pregnancy complications. By maintaining good oral hygiene and seeking regular dental care, individuals can reduce their risk of developing these health problems [27].

In addition to preventive measures, oral health education also promotes healthy lifestyle habits that can benefit overall health. For example, individuals who prioritize their oral health are more likely to

eat a balanced diet, avoid tobacco use, and manage stress effectively. These lifestyle choices not only improve oral health but also contribute to better overall health outcomes [28].

Overall, the impact of oral health education and preventive dental care on overall health outcomes cannot be overstated. By educating individuals about the importance of oral health and encouraging preventive measures, we can reduce the prevalence of dental problems and improve the quality of life for many people. It is essential for healthcare providers, educators, and policymakers to prioritize oral health education and preventive dental care to promote better health outcomes for all [29].

Recommendations for Integrating Oral Health into the Care of Patients with Chronic Conditions:

Oral health is an integral part of overall health and well-being. However, it is often overlooked in the care of patients with chronic conditions. Patients with chronic conditions such as diabetes, cardiovascular disease, and respiratory diseases are at a higher risk of developing oral health problems, yet oral health is not always given the attention it deserves in their care plans. [30].

First and foremost, it is important to understand the connection between oral health and chronic conditions. Poor oral health has been linked to a variety of chronic conditions, including diabetes, cardiovascular disease, and respiratory diseases. For example, individuals with diabetes are more likely to develop gum disease, which can in turn make it more difficult to control blood sugar levels. Similarly, individuals with cardiovascular disease have been found to have a higher prevalence of gum disease, which can increase their risk of heart attacks and strokes. Additionally, individuals with respiratory diseases such as asthma are more likely to have oral health problems, as the medications used to treat these conditions can cause dry mouth and increase the risk of cavities and gum disease [31].

Given the strong connection between oral health and chronic conditions, it is essential for healthcare providers to integrate oral health into the care of their patients with chronic conditions. This can be achieved through a variety of strategies, including education, screening, and collaboration with dental professionals [32].

One of the key recommendations for integrating oral health into the care of patients with chronic conditions is to provide education to both patients and healthcare providers. Patients should be educated on the importance of maintaining good oral hygiene practices, such as brushing and flossing regularly, as well as the potential impact of their chronic condition on their oral health. Healthcare providers should also be educated on the connection between oral health and chronic conditions, so that they can better understand the importance of addressing oral health in their patients' care plans [33].

In addition to education, screening for oral health problems should be a routine part of the care of patients with chronic conditions. Healthcare providers should conduct oral health assessments during regular check-ups and screenings, and refer patients to dental professionals for further evaluation and treatment as needed. By identifying oral health problems early, healthcare providers can help prevent complications and improve their patients' overall health outcomes [34].

Collaboration with dental professionals is another important recommendation for integrating oral health into the care of patients with chronic conditions. Dental professionals can provide specialized care for oral health problems, such as gum disease and cavities, and work closely with healthcare providers to develop comprehensive care plans for patients with chronic conditions. By working together, healthcare providers and dental professionals can ensure that patients receive the integrated care they need to maintain good oral health and manage their chronic conditions effectively [35].

Integrating oral health into the care of patients with chronic conditions is essential for improving their overall health outcomes. By providing education, screening, and collaboration with dental professionals, healthcare providers can help their patients maintain good oral health and prevent complications related to their chronic conditions. It is important for healthcare providers to recognize the connection between oral health and chronic conditions and prioritize oral health in the care of

their patients. By following these recommendations, healthcare providers can make a positive impact on the oral health and overall well-being of their patients with chronic conditions [36].

Conclusion:

In conclusion, oral health education and preventive dental care play a crucial role in the management of chronic conditions. By working together, nurses and dentists can help improve overall health outcomes in patients with chronic conditions and reduce healthcare costs. It is essential that healthcare providers prioritize oral health education and preventive dental care to ensure the well-being of their patients.

References:

1. Glick M, Williams DM, Kleinman DV, Vujicic M, Watt RG, Weyant RJ. A new definition for oral health developed by the FDI World Dental Federation opens the door to a universal definition of oral health. *J Public Health Dent.* 2017;77(1):3-5.
2. Petersen PE, Ogawa H. The global burden of periodontal disease: towards integration with chronic disease prevention and control. *Periodontol 2000.* 2012;60(1):15-39.
3. Kassebaum NJ, Bernabé E, Dahiya M, Bhandari B, Murray CJL, Marcenes W. Global burden of severe periodontitis in 1990-2010: a systematic review and meta-regression. *J Dent Res.* 2014;93(11):1045-1053.
4. Pihlstrom BL, Michalowicz BS, Johnson NW. Periodontal diseases. *Lancet.* 2005;366(9499):1809-1820.
5. Chapple ILC, Genco R; working group 2 of the joint EFP/AAP workshop. Diabetes and periodontal diseases: consensus report of the Joint EFP/AAP Workshop on Periodontitis and Systemic Diseases. *J Clin Periodontol.* 2013;40(S14):106-112.
6. Sanz M, Ceriello A, Buysschaert M, Chapple I, Demmer RT, Graziani F, et al. Scientific evidence on the links between periodontal diseases and diabetes: consensus report and guidelines of the joint workshop on periodontal diseases and diabetes by the International Diabetes Federation and the European Federation of Periodontology. *J Clin Periodontol.* 2018;45(2):138-149.
7. Tonetti MS, Jepsen S, Jin L, Otomo-Corgel J. Impact of the global burden of periodontal diseases on health, nutrition and wellbeing of mankind: a call for global action. *J Clin Periodontol.* 2017;44(5):456-462.
8. Mealey BL, Oates TW; American Academy of Periodontology. Diabetes mellitus and periodontal diseases. *J Periodontol.* 2006;77(8):1289-1303.
9. Taylor GW, Burt BA, Becker MP, Genco RJ, Shlossman M, Knowler WC, et al. Non-insulin dependent diabetes mellitus and alveolar bone loss progression over 2 years. *J Periodontol.* 1998;69(1):76-83.
10. Lalla E, Papapanou PN. Diabetes mellitus and periodontitis: a tale of two common interrelated diseases. *Nat Rev Endocrinol.* 2011;7(12):738-748.
11. Chapple ILC, Van der Weijden F, Doerfer C, Herrera D, Shapira L, Polak D, et al. Primary prevention of periodontitis: managing gingivitis. *J Clin Periodontol.* 2015;42(S16):71-76.
12. Kassebaum NJ, Smith AGC, Bernabé E, Fleming TD, Reynolds AE, Vos T, et al. Global, regional, and national prevalence, incidence, and disability-adjusted life years for oral conditions for 195 countries, 1990-2015: a systematic analysis for the Global Burden of Diseases, Injuries, and Risk Factors. *J Dent Res.* 2017;96(4):380-387.
13. Genco RJ, Borgnakke WS. Risk factors for periodontal disease. *Periodontol 2000.* 2013;62(1):59-94.
14. Preshaw PM, Alba AL, Herrera D, Jepsen S, Konstantinidis A, Makrilakis K, et al. Periodontitis and diabetes: a two-way relationship. *Diabetologia.* 2012;55(1):21-31.
15. Sanz M, Ceriello A, Buysschaert M, Chapple I, Demmer RT, Graziani F, et al. Scientific evidence on the links between periodontal diseases and diabetes: consensus report and guidelines of the

- joint workshop on periodontal diseases and diabetes by the International Diabetes Federation and the European Federation of Periodontology. *J Clin Periodontol*. 2018;45(2):138-149.
16. Chapple ILC, Genco R; working group 2 of the joint EFP/AAP workshop. Diabetes and periodontal diseases: consensus report of the Joint EFP/AAP Workshop on Periodontitis and Systemic Diseases. *J Clin Periodontol*. 2013;40(S14):106-112.
 17. Eke PI, Dye BA, Wei L, Slade GD, Thornton-Evans GO, Borgnakke WS, et al. Update on prevalence of periodontitis in adults in the United States: NHANES 2009 to 2012. *J Periodontol*. 2015;86(5):611-622.
 18. Petersen PE, Ogawa H. The global burden of periodontal disease: towards integration with chronic disease prevention and control. *Periodontol 2000*. 2012;60(1):15-39.
 19. Pihlstrom BL, Michalowicz BS, Johnson NW. Periodontal diseases. *Lancet*. 2005;366(9499):1809-1820.
 20. Tonetti MS, Jepsen S, Jin L, Otomo-Corgel J. Impact of the global burden of periodontal diseases on health, nutrition and wellbeing of mankind: a call for global action. *J Clin Periodontol*. 2017;44(5):456-46270.
 21. Chapple ILC, Van der Weijden F, Doerfer C, Herrera D, Shapira L, Polak D, et al. Primary prevention of periodontitis: managing gingivitis. *J Clin Periodontol*. 2015;42(S16):71-76.
 22. Kassebaum NJ, Bernabé E, Dahiya M, Bhandari B, Murray CJL, Marcenes W. Global burden of severe periodontitis in 1990-2010: a systematic review and meta-regression. *J Dent Res*. 2014;93(11):1045-1053.
 23. Sanz M, Ceriello A, Buyschaert M, Chapple I, Demmer RT, Graziani F, et al. Scientific evidence on the links between periodontal diseases and diabetes: consensus report and guidelines of the joint workshop on periodontal diseases and diabetes by the International Diabetes Federation and the European Federation of Periodontology. *J Clin Periodontol*. 2018;45(2):138-149.
 24. Lalla E, Papapanou PN. Diabetes mellitus and periodontitis: a tale of two common interrelated diseases. *Nat Rev Endocrinol*. 2011;7(12):738-748.
 25. Mealey BL, Oates TW; American Academy of Periodontology. Diabetes mellitus and periodontal diseases. *J Periodontol*. 2006;77(8):1289-1303.
 26. Taylor GW, Burt BA, Becker MP, Genco RJ, Shlossman M, Knowler WC, et al. Non-insulin dependent diabetes mellitus and alveolar bone loss progression over 2 years. *J Periodontol*. 1998;69(1):76-83.
 27. Preshaw PM, Alba AL, Herrera D, Jepsen S, Konstantinidis A, Makrilakis K, et al. Periodontitis and diabetes: a two-way relationship. *Diabetologia*. 2012;55(1):21-31.
 28. Genco RJ, Borgnakke WS. Risk factors for periodontal disease. *Periodontol 2000*. 2013;62(1):59-94.
 29. Eke PI, Dye BA, Wei L, Slade GD, Thornton-Evans GO, Borgnakke WS, et al. Update on prevalence of periodontitis in adults in the United States: NHANES 2009 to 2012. *J Periodontol*. 2015;86(5):611-622.
 30. Kassebaum NJ, Smith AGC, Bernabé E, Fleming TD, Reynolds AE, Vos T, et al. Global, regional, and national prevalence, incidence, and disability-adjusted life years for oral conditions for 195 countries, 1990-2015: a systematic analysis for the Global Burden of Diseases, Injuries, and Risk Factors. *J Dent Res*. 2017;96(4):380-387.
 31. Glick M, Williams DM, Kleinman DV, Vujicic M, Watt RG, Weyant RJ. A new definition for oral health developed by the FDI World Dental Federation opens the door to a universal definition of oral health. *J Public Health Dent*. 2017;77(1):3-5.
 32. Chapple ILC, Genco R; working group 2 of the joint EFP/AAP workshop. Diabetes and periodontal diseases: consensus report of the Joint EFP/AAP Workshop on Periodontitis and Systemic Diseases. *J Clin Periodontol*. 2013;40(S14):106-112.
 33. Petersen PE, Ogawa H. The global burden of periodontal disease: towards integration with chronic disease prevention and control. *Periodontol 2000*. 2012;60(1):15-39.

34. Kassebaum NJ, Bernabé E, Dahiya M, Bhandari B, Murray CJL, Marcenes W. Global burden of severe periodontitis in 1990-2010: a systematic review and meta-regression. *J Dent Res*. 2014;93(11):1045-1053.
35. Pihlstrom BL, Michalowicz BS, Johnson NW. Periodontal diseases. *Lancet*. 2005;366(9499):1809-1820.
36. Sanz M, Cieriello A, Buysschaert M, Chapple I, Demmer RT, Graziani F, et al. Scientific evidence on the links between periodontal diseases and diabetes: consensus report and guidelines of the joint workshop on periodontal diseases and diabetes by the International Diabetes Federation and the European Federation of Periodontology. *J Clin Periodontol*. 2018;45(2):138-149.