

# Gaixotasun gingibalak

**Egileak:** Aguirre-Zorzano LA, Estefanía-Fresco R, Fernández-Jiménez A, García-De-La-Fuente AM



Osasun periodontala eta gaixotasun gingibalak	Periodontitisa	Periodontoari erasaten dioten beste egoerak	Gaixotasun periimplantarioak
Osasun gingibal eta periodontala	Gaixotasun periodontal nekroziarrak	Txertatzeko ehun periodontalei erasaten dieten gaixotasun edo egoera sistemikoak	Osasun periimplantarioa
Biofilm-arekin lotutako gingibitisa	Periodontitisa	Abzesu periodontalak eta lesio endoperiodontalak	Mukositis periimplantarioa
Biofilm-arekin ez lotutako gaixotasun gingibalak	Periodontitisa, gaixotasun sistemiko baten manifestazio bezala	Lesio mukogingibalak Indar oklusal traumatikoa Protesi eta hortzarekin lotutako faktoreak	Periimplantitisa Ehun periimplantario bigun eta gogorren gabeziak

2. taula. Gaixotasun periodontal eta periimplantarioen sailkapen berria (AAP &amp; EFP 2018)

Caton et al. 2018



## Hanturazko gaixotasun periodontala



**Pazienteak adierazitakoa / Ebaluazio klinikoa:  
Hortzoi-hanturaren seinale eta zantzuak**

# Gaixotasun gingibalak: Gingibitisa



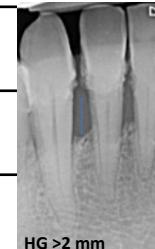
Zantzuak	Hortzoi (osasuntsua)	Gingibitis guztiak
Kolorea	Arrosa korala (melanosi gingibala)	Gorrixka/urdin-morea (ubeldura)
Tamaina	Poltsarik ez	Pseudopoltsak (hortzoiaaren-handitzeak)
Ingurua	Oxkarduna	Oxkardun-patroia galtzen da
Trinkotasuna	Sendoa	Biguna / edemazkoa
Odol-jarioa (zundaketa)	Ez	Bai



# Gaixotasun periodontalak

Aguirre-Zorzano <i>et al.</i> , 2016	<b>Gingibitisa</b>	<b>Periodontitisa</b>
<b>Etiologia</b>		Bakterianoa
<b>Epidemiologia</b>		Adin guztiengan
<b>Lesioen kokapena</b>	Hortzoian bakarrik	Periodonto osoan
<b>Klinika</b>	Hantura, odol-jarioa, zantzu erradiografikorik gabe	Zundaketa-sakonera handitua/hortzoiien atzerageiteak, intsertzio-galera, odol-jarioa, zorne-jarioa, furkazio-lesioak, hortz-mugikortasuna
<b>Iraupena</b>	Itzulgarria (aho-higiene aproposa)	Iraunkorra
<b>Intsertzio-galera</b>	Ez	Bai
<b>Hezur-galera (HG) erradiografikoa</b>	Ez	Bai

Egileen irudiak



# Gingibitisa: sailkapenak



AAP, 1999

- I. Gingival Diseases
  - A. Dental plaque-induced gingival diseases\*
    - 1. Gingivitis associated with dental plaque only
      - a. without other local contributing factors
      - b. with local contributing factors (See VIII A)
    - 2. Gingival diseases modified by systemic factors
      - a. associated with the endocrine system
        - 1) puberty-associated gingivitis
        - 2) menstrual cycle-associated gingivitis
        - 3) pregnancy-associated
          - a) gingivitis
          - b) pyogenic granuloma
        - 4) diabetes mellitus-associated gingivitis
      - b. associated with blood dyscrasias
        - 1) leukemia-associated gingivitis
        - 2) other
    - 3. Gingival diseases modified by medications
      - a. drug-influenced gingival diseases
        - 1) drug-influenced gingival enlargements
        - 2) drug-influenced gingivitis
          - a) oral contraceptive-associated gingivitis
          - b) other
      - 4. Gingival diseases modified by malnutrition
        - a. ascorbic acid-deficiency gingivitis
        - b. other
    - B. Non-plaque-induced gingival lesions
      - 1. Gingival diseases of specific bacterial origin
        - a. *Neisseria gonorrhoeae*-associated lesions
        - b. *Treponema pallidum*-associated lesions
        - c. streptococcal species-associated lesions
        - d. other
      - 2. Gingival diseases of viral origin
        - a. herpesvirus infections
          - 1) primary herpetic gingivostomatitis
          - 2) recurrent oral herpes
          - 3) varicella-zoster infections
          - b. other

Figure 1.

Classification of periodontal diseases and conditions.

\* Can occur on a periodontium with no attachment loss or on a periodontium with attachment loss that is not progressing.

<https://aap.onlinelibrary.wiley.com/doi/epdf/10.1902/annals.1999.4.1.1>



AAP & EFP, 2018

- 3. Gingival diseases of fungal origin
  - a. *Candida*-species infections
    - 1) generalized gingival candidosis
    - b. linear gingival erythema
    - c. histoplasmosis
    - d. other
- 4. Gingival lesions of genetic origin
  - a. hereditary gingival fibromatosis
  - b. other
- 5. Gingival manifestations of systemic conditions
  - a. mucocutaneous disorders
    - 1) lichen planus
    - 2) pemphigoid
    - 3) pemphigus vulgaris
    - 4) erythema multiforme
    - 5) lupus erythematosus
    - 6) drug-induced
    - 7) other
  - b. allergic reactions
    - 1) dental restorative materials
      - a) mercury
      - b) nickel
      - c) acrylic
      - d) other
    - 2) reactions attributable to
      - a) toothpastes/dentifrices
      - b) mouthrinses/mouthwashes
      - c) chewing gum additives
      - d) foods and additives
    - 3) other
  - 6. Traumatic lesions (factitious, iatrogenic, accidental)
    - a. chemical injury
    - b. physical injury
    - c. thermal injury
  - 7. Foreign body reactions
  - 8. Not otherwise specified (NOS)
- 2. Gingivitis - dental plaque-induced: intact periodontium; reduced periodontium in non-periodontitis patient; reduces periodontium in successfully treated periodontitis patient.<sup>a</sup>
  - A. Associated with biofilm alone
  - B. Mediated by systemic or local risk factors
    - i. Systemic risk factors (modifying factors)
      - (a) Smoking
      - (b) Hyperglycemia
      - (c) Nutritional factors
      - (d) Pharmacological agents (prescription, non-prescription and recreational)
      - (e) Sex steroid hormones
        - Puberty
        - Menstrual cycle
        - Pregnancy
        - Oral contraceptives
      - (f) Hematological conditions
    - ii. Local risk factors (predisposing factors)
      - (a) Dental plaque biofilm retention factors (e.g., prominent restoration margins)
      - (b) Oral dryness
  - C. Drug-influenced gingival enlargement
- 3. Gingival diseases - non-dental plaque-induced<sup>2b</sup>
  - A. Genetic/developmental disorders
    - i. Hereditary gingival fibromatosis<sup>a</sup>
  - B. Specific infections
    - i. Bacterial origin
      - (a) *Neisseria gonorrhoeae*<sup>a</sup>
      - (b) *Treponema pallidum*<sup>a</sup>
      - (c) *Mycobacterium tuberculosis*<sup>a</sup>
      - (d) *Streptococcal* gingivitis
    - ii. Viral origin
      - (a) Coxackie virus (hand-foot-and-mouth disease)<sup>a</sup>
      - (b) Herpes simplex I & II (primary or recurrent)<sup>a</sup>
      - (c) Varicella zoster (chicken pox & shingles – V nerve)<sup>a</sup>
      - (d) Molluscum contagiosum<sup>a</sup>
      - (e) Human papilloma virus (squamous cell papilloma; condyloma acuminatum; verruca vulgaris; focal epithelial hyperplasia)
    - iii. Fungal origin
      - (a) Candidosis
      - (b) Other mycoses, e.g., histoplasmosis, aspergillosis
  - C. Inflammatory and immune conditions
    - i. Hypersensitivity reactions
      - (a) Contact allergy<sup>a</sup>
      - (b) Plasma cell gingivitis<sup>a</sup>
      - (c) Erythema multiforme<sup>a</sup>
    - ii. Autoimmune diseases of skin and mucous membranes
      - (a) Pemphigus vulgaris<sup>a</sup>
      - (b) Pemphigoid<sup>a</sup>
      - (c) Lichen planus<sup>a</sup>
      - (d) Lupus erythematosus<sup>a</sup>
    - iii. Granulomatous inflammatory lesions (orofacial granulomatoses)
      - (a) Crohn's disease<sup>a</sup>
      - (b) Sarcoidosis<sup>a</sup>
  - D. Reactive processes
    - i. Epulides
      - (a) Fibrous epulis
      - (b) Calcifying fibroblastic granuloma
      - (c) Vascular epulis (pyogenic granuloma)
      - (d) Peripheral giant cell granuloma<sup>a</sup>
  - E. Neoplasms
    - i. Premalignancy
      - (a) Leukoplakia
      - (b) Erythroplakia
    - ii. Malignancy
      - (a) Squamous cell carcinoma<sup>a</sup>
      - (b) Leukemic cell infiltration<sup>a</sup>
      - (c) Lymphoma<sup>a</sup>
      - Hodgkin
      - Non-Hodgkin
  - F. Endocrine, nutritional & metabolic diseases
    - i. Vitamin deficiencies<sup>a</sup>
      - (a) Vitamin C deficiency (scurvy)
  - G. Traumatic lesions
    - i. Physical/mechanical trauma
      - (a) Frictional keratosis
      - (b) Mechanically induced gingival ulceration
      - (c) Factitious injury (self-harm)
    - ii. Chemical (toxic) burn
    - iii. Thermal insults
      - (a) Burns to gingiva
  - H. Gingival pigmentation
    - i. Melanocytoma<sup>a</sup>
    - ii. Smoker's melanosis
    - iii. Drug-induced pigmentation (antimalarials, minocycline)
    - iv. Amalgam tattoo

<sup>a</sup>Conditions marked with an "a" have associated systemic involvement or are oral manifestations of systemic conditions; therefore, other health-care providers may be involved in diagnosis and treatment.

<https://aap.onlinelibrary.wiley.com/doi/epdf/10.1002/JPER.17-0719>



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AAP & EFP, 2018

## A. Bakterio-plakak (“biofilm”) eragindako gingibitisa:

### 1. Periodonto osoa

### 2. Periodonto murriztua:

#### a) Paziente EZ periodontal

#### b) Paziente periodontal EGONKORRA

## B. Bakterio-plakak (“biofilm”) ez eragindako gingibitisa

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AAP & EFP, 2018

## A. Bakterio-plakak (“biofilm”) eragindako gingibitisa:

1. *Periodonto osoa*

2. *Periodonto murriztua:*

a) *Paziente EZ periodontal*

b) *Paziente periodontal EGONKORRA:*

● *Periodontitisaren berreritzea*

● *Periodonto murriztuaren gingibitisa*

## B. Bakterio-plakak (“biofilm”) ez eragindako gingibitisa

<sup>a</sup>Conditions marked with an “a” have associated systemic involvement or are oral manifestations of systemic conditions; therefore, other health-care providers may be involved in diagnosis and treatment.

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# A. Bakterio-plakak ("biofilm") eragindako gingibitisa

Chapple et al., 2018; Trombelli et al., 2018	Osasuna			Gingibitisa		
	Periodonto osoa	Periodonto murritzua		Periodonto osoa	Periodonto murritzua	
		Paziente ez periodontala	Paziente periodontal egonkorra		Paziente ez periodontala	Paziente periodontal egonkorra
Intsertzio-galera (zundatzerakoan)	Ez	Bai		Ez	Bai	
Zundaketa-sakonera (onartuz pseudopoltsik ez)	≤ 3 mm	≤ 3 mm (leku guztiek)	≤ 4 mm (lekuik ez ≥ 4 mm OJ-I-rekin) / (leku guztiek)	≤ 3 mm	≤ 3 mm (leku guztiek)	
Oadol-jarioa indizea (Oj-I) (odoltzea zundatzerakoan)	< % 10			Bai (≥ % 10); Mugatua ≤ % 30 eta Orokortua > % 30		
Hezur-galera (HZ) erradiografikoa	Ez	Possible	Bai	Ez	Possible	Bai



# A. Bakterio-plakak ("biofilm") eragindako gingibitisa

## A. "Biofilm"-arekin bakarrik erlazionatua

## B. Faktore lokal edo sistemikoek eraginda:

### i. Arrisku faktore sistemikoak (faktore aldatzaileak):

- (a) Tabakoa
- (b) Hipergluzemia
- (c) Faktore nutrizionalak berriak
- (d) Agente farmakologikoak (preskribatua, ez-preskribatua eta errekreatiboak)
- (e) Sexu hormona esteroideak:

- (f) Pubertaroa
- (g) Ziklo menstruala
- (h) Haurdunaldia
- (i) Antisorgailuak

### j) Kondizio hematologikoak

### ii. Arrisku faktore lokalak (faktore hartaratzzaileak):

- (a) Bakterio-plaka pilatzeari eragiten dioten faktoreak

## C. Droegek eragindako hortzoiaaren handitzeak

Murakami et al., 2018



posizio  
berria



Aguirre-Zorzano et al., 2016

Egileen irudia



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# A. Bakterio-plakak ("biofilm") eragindako gingibitisa: arrisku faktoreak (larritasuna eta gradua)

Lokalak (hartaratzaileak)	Sistemikoak (aldatzaileak) "hiper" - hantura
<p>1. Bakterio-plaka pilatzeari eragiten dioten faktoreak</p> <ul style="list-style-type: none"> <li>• Anatomikoak (esmalte-perlek)</li> <li>• Iatrogenikoak (errestaurazioak, azpigingibaleko ertz edo marjinak...)</li> </ul> <p>Lang <i>et al.</i>, 1983, Schätzle <i>et al.</i>, 2001</p>	<p>1. Tabakoa</p> <p>2. Faktore metabolikoak (pazientearen hipergluzemia: diabetikoak ala ez)</p>
<p>2. Aho-lehortasuna</p> <ul style="list-style-type: none"> <li>• Ezpainen batzearen ezintasuna</li> <li>• Xerostomia</li> </ul> <p>Mizutani <i>et al.</i>, 2015</p>	<p>1. Nutrizio-gabeziak (C bitamina)</p> <p>2. Farmakoak</p> <p>3. Hormona esteroideak gehitzea (pubertaro, haurdunaldia, menopausia, antisorgailuak)</p> <p>4. Hematologikoak</p>

Murakami *et al.*, 2018



## B. Bakterio-plakak ("biofilm") ez eragindako gingibitisa

### A. Desordena genetikoa/garapenekoak:

- i. Fibromatosi gingibal hereditarioa

### B. Infekzio espezifikoak:

- i. Jatorri bakterianoa:

- (a) *Neisseria gonorrhoeae*
- (b) *Treponema pallidum*
- (c) *Mycobacterium tuberculosis*
- (d) Gingibitis streptococcal-a

berriak

- ii. Jatorri birikoa:

- (a) Coxsackie birusa (esku-hanka-aho gaixotasuna)
- (b) Herpes simplea I & II (primarioa edo atzerakaria)
- (c) Barizela-zoster (barizela & herpes - V. nerbioa)
- (d) Molusku kutsakorra
- (e) Gizatiar papiloma birusa (zelula ezkatadun papiloma; *condyloma acuminatum*; garatxo arrunta; hiperplasia fokal epiteliala)

- iii. Jatorri fungikoa:

- (a) Kandidosia Hortzoi-eritema lineala desagertzen da
- (b) Beste mikosiak (adb. histoplasmosia, aspergilosisia)



## B. Bakterio-plakak ("biofilm") ez eragindako gingibitisa

### C. Kondizio immuneak eta hanturazkoak:

#### i. Hipersentiberatasun erreakzioa:

(a) Kontaktuzko alergia

berriak

(b) Plasma zelula gingibitisa

Etiologia: Kanelari alergia (txiklean dago)

(c) Eritema multiformea

#### ii. Azalaren eta mintz mukosoen gaixotasun autoinmuneak:

(a) Penfigo arrunta

(b) Penfigoidea

(c) Liken laua

(d) Lupus eritematosoa (sistemikoa / diskoidoa)

#### iii. Hanturazko lesio pikortsuak (aurpegiko pikortasunak):

(a) Crohn gaixotasuna

(b) Sarkoidosia



## B. Bakterio-plakak ("biofilm") ez eragindako gingibitisa

berriak

### D. Prozesu errektiboak:

#### i. Epuloideak:

- (a) Epulis fibrosoa
- (b) Granuloma fibroblastiko kaltzifikantea
- (c) Epulis baskularra (granuloma piogenikoa)
- (d) Zelula erraldoi periferikoen granuloma

### E. Neoplasiak:

#### i. Pre-gaiztoa:

- (a) Leukoplasia
- (b) Eritroplasia

#### ii. Gaiztoa:

- (a) Zelula ezkatadunen kartzinoma
- (b) Zelula leuzemikoen infiltrazioa
- (c) Linfoma (Hodgkin / Ez-Hodgkin)



## B. Bakterio-plakak ("biofilm") ez eragindako gingibitisa

### F. Gaixotasun endokrino, nutrizional & metabolikoak:

- i. Bitamina gabeziak:
  - (a) Bitamina C gabezia (eskorbutoa)

### G. Lesio traumatikoak:

- i. Trauma fisiko / mekanikoak:
  - (a) Keratosi frikzionala
  - (b) Mekanikoki eragindako ultzera gingibala
  - (c) Lesio artifiziala (norbanako-kaltea)
- ii. Erredura kimikoa (toxikoa)
- iii. Min termikoa:
  - (a) Hortzoaren erredura

berriak

### H. Hortzoaren pigmentazioa:

- i. Melanoplakia
- ii. Erretzaileen melanosia
- iii. Drogek eragindako pigmentazioa (antimalariokoak, minoziklina)
- iv. Amalgama tatuajea



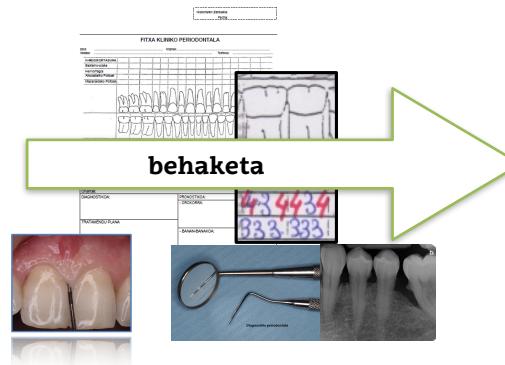
# Eta zer egingo dugu, paziente berria etortzen denean???

Anamnesia

Ahoaren miaketa

Periodontograma

Hegal-ausikiaren erradiografiak



Periodonto osasuntsua



Gingibitisa



Periodontitisa



# Diagnostikoa egiteko funtsezko urratsak

1. Zehaztu pazientea osasunean dagoen ala, alderantziz, gingibitisa edo periodontitisa izateko susmagarria den
2. Zehaztu gingibitisaren kasua izateko irizpideak betetzen dituen
3. Zehaztu periodontitisaren kasua izateko irizpideak betetzen dituen
4. Zehaztu eta ezberdindu periodontitisaren faseak
5. Zehaztu eta ezberdindu periodontitisaren graduak
6. Zehaztu pazienteak bestelako gaixotasun periodontala edo/ eta periimplantarioa duen



# Diagnostikoa egiteko funtsezko urratsak

1. Zehaztu pazientea osasunean dagoen ala, alderantziz, gingibitisa edo periodontitisa izateko susmagarria den:



Zeinu eta seinale klinikoak

Erradiografia periapikalak

Periodontograma



# Diagnostikoa egiteko funtsezko urratsak

1. Zehaztu pazientea osasunean dagoen ala, alderantziz, gingibitisa edo periodontitisa izateko susmagarria den
2. Zehaztu gingibitisaren kasua izateko irizpideak betetzen dituen:

Odol-jario indizea

Hezur-galera erradiografikorik

Gingibitis mugatua ( $OJ-I \leq \% 30$ )

Gingibitis orokortua ( $OJ-I > \% 30$ )



Osasuntsua



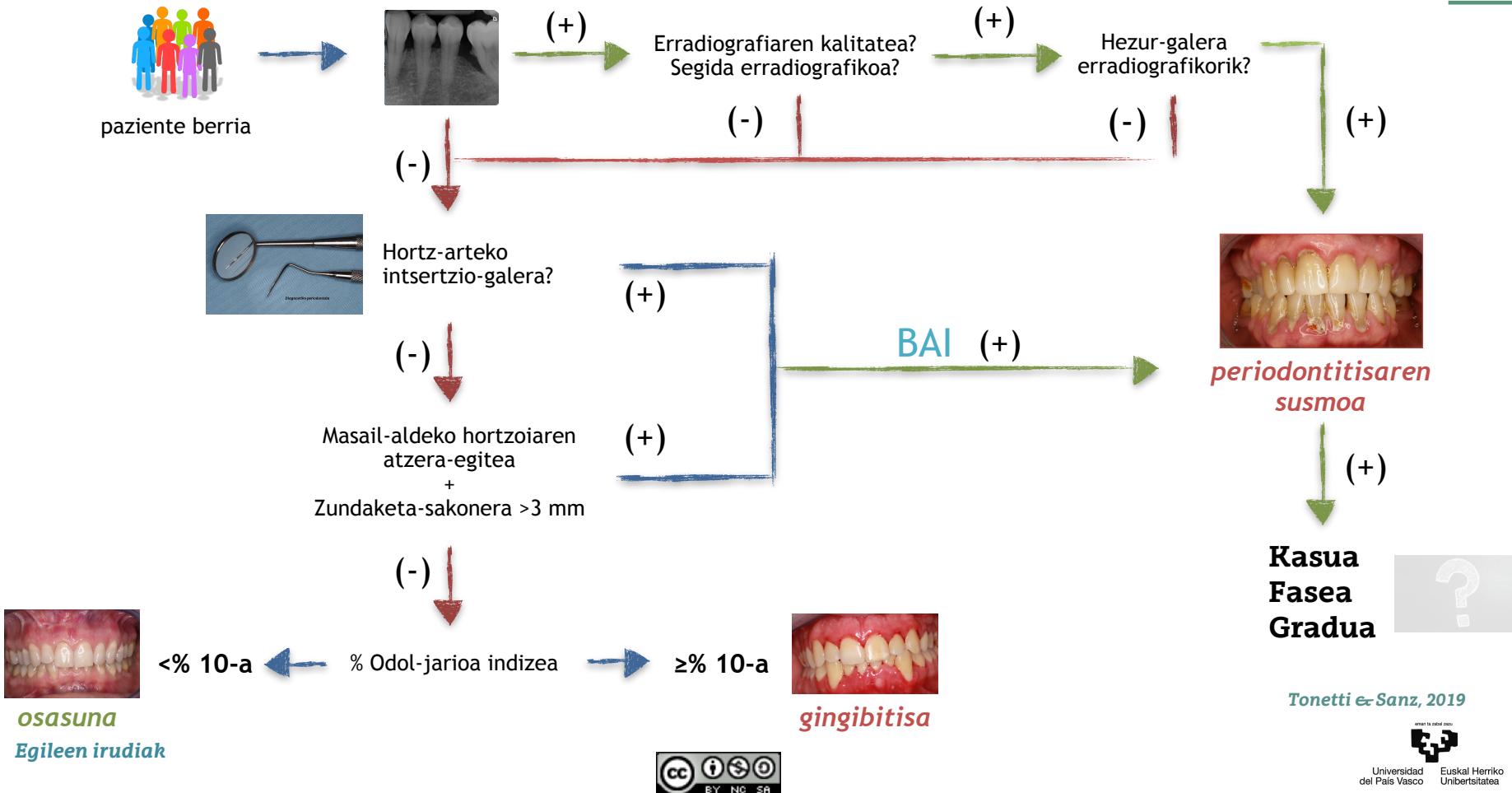
Gingibitis



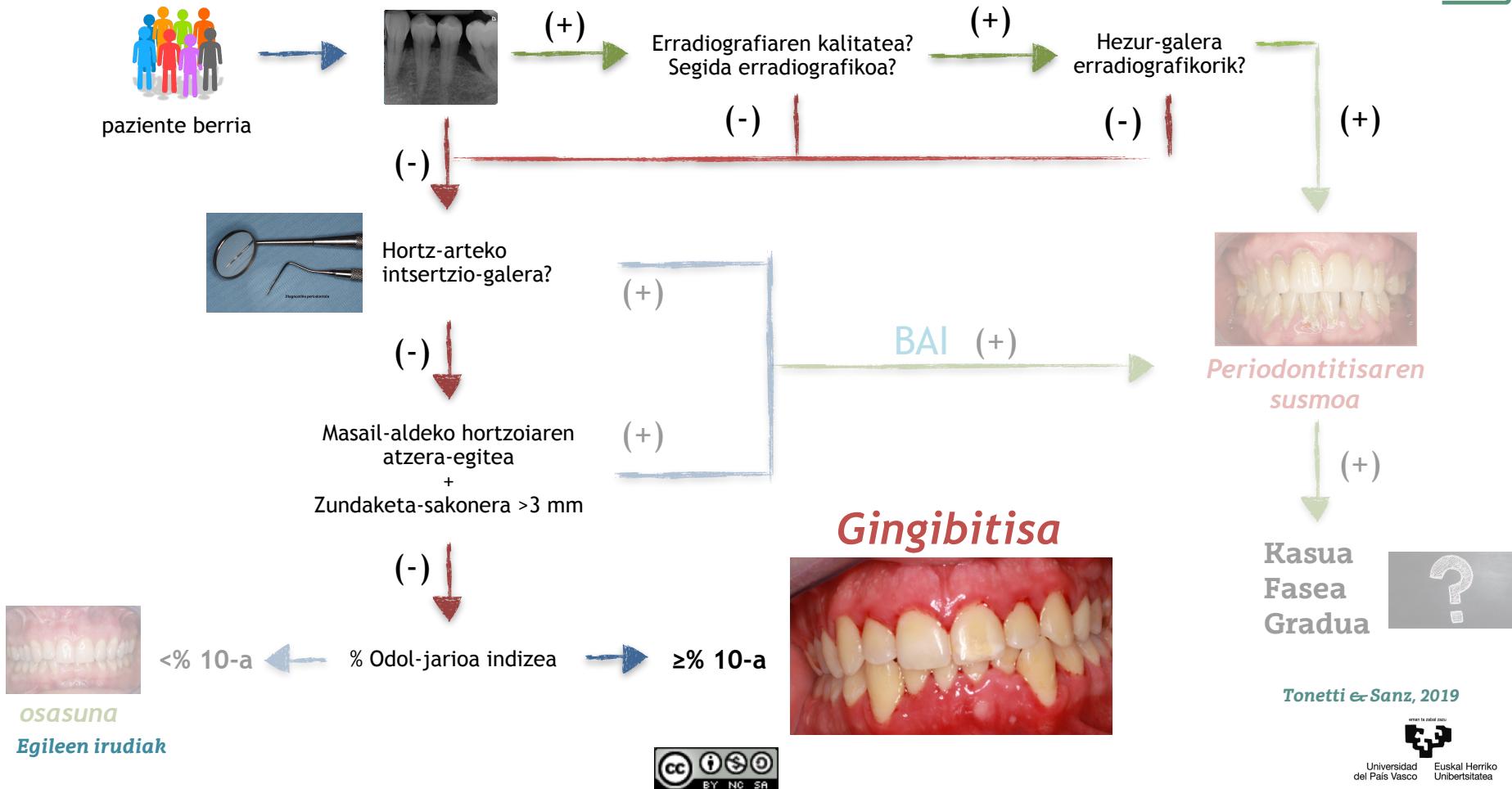
Periodontitisa



# 1. urrats gakoa



# 1. urrats gakoa





Periodonto osasuntsua



%100



Gingibitisa



Periodontitisa



*itzulgarria*



Egileen irudiak



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