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PERIODONTITIS AND CORONARY HEART DISEASE

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Periodontitis is a serious infection or inflammation of the gums that involves the destruction of soft tissues and bones supporting the teeth. The causes of periodontitis are some species of gram-negative bacteria colonizing on dental plaque in the subgingival area. Research reports, the disease not only has local effects. Other researchers report that people with the periodontal infection have a higher risk for coronary heart disease (CHD) than those who do not suffer. Research shows that periodontitis sufferers are 1.5-4 times more likely to develop cardiovascular disease. On the other hand, coronary heart disease is the leading cause of death for non-infectious diseases. In periodontal infections there is an increase in C-reactive protein and pro-inflammatory activity, but HDL-cholesterol is lower than control. The presence of such infections affects the endothelial cells, blood coagulation, fat metabolism and monocytes or macrophages. Poor oral health will increase the incidence of periodontitis infection. Periodontitis increases the risk of coronary heart disease.

Keywords: periodontitis, coronary heart disease, gram-negative bacteria
PERIODONTITIS AND CORONARY HEART DISEASE

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Periodontitis is a serious infection of the tissues that support the teeth. The causes of periodontitis are various species of gram-negative bacteria. Each bacterium and their products such as lipopolysaccharide (LPS) can enter the periodontal tissue and blood circulation through the sulcus epithelium and cause changes in the inflammatory response and systemic changes in the patient. The causes of periodontitis can be related to the accumulation of plaque, biofilm formation, and tooth decay. Risk factors for periodontitis include smoking, diabetes, and other chronic diseases. Periodontitis is a major cause of tooth loss and affects the quality of life of millions of people worldwide.

Coronary Heart Disease
Coronary heart disease is the number one cause of death in the world. In 2020, the World Health Organization (WHO) reported more than 17.7 million people worldwide died from coronary heart disease (CHD). Coronary heart disease is a condition of coronary artery disease that occurs when plaque in the coronary arteries restricts blood flow to the heart muscle.

Periodontitis and Coronary Heart Disease
Epidemiological studies have proven that periodontal disease is associated with an increased risk of cardiovascular disease. In another study, it showed that patients suffering from periodontitis had a 1.93 greater risk of developing cardiovascular disease than patients without periodontitis. Experimental studies conducted by injecting Porphyromonas gingivalis (PG) into rat subcutaneous tissue诱导了 inflammation in the heart tissue.

Periodontitis
Periodontitis is an infectious and inflammatory disease of the tissues that support the teeth. The causes of periodontitis are various species of gram-negative bacteria, such as Porphyromonas gingivalis. Each bacterium and their products such as lipopolysaccharide (LPS) can enter the periodontal tissue and blood circulation through the sulcus epithelium and cause changes in the inflammatory response and systemic changes in the patient. The causes of periodontitis can be related to the accumulation of plaque, biofilm formation, and tooth decay. Risk factors for periodontitis include smoking, diabetes, and other chronic diseases. Periodontitis is a major cause of tooth loss and affects the quality of life of millions of people worldwide.

Mechanism
Periodontitis begins with the formation of plaque attached to the root surface. Dental plaque is a film of multi-species bacteria containing periodontal bacteria, food particles, and tooth debris. At the heart, atherosclerosis is an inflammatory reaction. This process involves the interaction between immune mechanisms and metabolic pathways, accompanied by accumulation of lipids in the walls of the coronary arteries. The hypothesis of atherosclerosis is an adaptive response to injury, suggesting that the onset of lesion formation is characterized by endothelial dysfunction. Endothelial dysfunction may be due to increased levels of Low-Density Lipoprotein (LDL-out), oxLDL, free radicals from cigarette smoke, and neointima formation. Injury that occurs in blood vessels induces endothelial cells to form cytokines and growth factors. Inflammatory responses stimulate proliferation and smooth muscle cell migration to the inflammatory area, resulting in thickening of the artery wall.

Conclusion
Periodontitis increases the risk of coronary atherosclerotic lesions caused by coronary artery wall thinning, subendothelial dissection, lipid deposition, atheroma, thrombus, intimal calciﬁcation, and medial inﬁltration.

References
CERTIFICATE

this is to certify that

Dr. dr. Farida Juliantina Rachmawaty, MSc

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