Gum Disease Major Cause: Bacteria, Bacteria Toxins And Plaque

Gingivitis, and also generally, gum disease or periodontal disease, begins with bacterial growth in your mouth and may end -- if not properly treated -- with tooth loss due to destruction of the tissue that surrounds your teeth.

What's the Difference Between Gingivitis and Periodontitis?
Gingivitis (gum inflammation) usually precedes periodontitis. In the early stage of gingivitis, bacteria in plaque buildup, causing the gums to become inflamed and to easily bleed during tooth brushing. Although the gums may be irritated, the teeth are still firmly planted in their sockets. No irreversible bone or other tissue damage has occurred at this stage.

Another term for plaque is biofilm (see Biofilm - The Infection Starter) which is an aggregate of microorganisms that adhere to each other. When gingivitis is left untreated, it can advance to periodontitis. In a person with periodontitis, the inner layer of the gum and bone pull away from the teeth and form pockets. These small spaces between teeth and gums collect debris and can become infected. The body's immune system fights the bacteria as the plaque spreads and grows below the gum line.

Toxins or poisons -- produced by the bacteria in plaque as well as the body's own over produced "good" enzymes (MMPs) involved in fighting infections -- start to break down the bone and connective tissue that hold teeth in place. As the disease progresses, the pockets deepen and more gum tissue and bone are destroyed. When this happens, teeth are no longer anchored in place, they become loose, and tooth loss occurs. Gum disease is the leading cause of tooth loss in adults.

To fight Gum disease you must try to reduce bacteria, bacteria toxins and plaque (Biofilm).
Let’s look at how OraCare helps reduce these three causes of Periodontal Disease.

Inhibiting Bacteria Growth
Oracare was tested at the University of Iowa College of Dentistry on inhibition of bacterial growth. Oracare was found to not only inhibit the growth but killed the microbes of all bacterial species tested in an MIC in vitro assay: Lactobacillus
acidophilus, Pseudomonas aeruginosa, Proteus mirabilis, Streptococcus mutans, Prevotella intermedia, Porphyromonas gingivalis, Treponema denticola, Tannerella forsythia, Treponema socranskii, and Aggregatibacter actinomycetemcomitans. In addition, Oracare inhibited the growth of Candida albicans.

Breaking up Biofilm
A study done at West Virginia stated that Oracare was one of the best products ever tested for the elimination of Biofilm. Chlorine Dioxide is being use by over 1000 cities to purify their water and one of the main reasons is its ability to break up Biofilm.

Eliminating Bacteria Toxins (VSCs)
In a second study done at the University of Iowa College of Dentistry, OraCare was tested against other oral hygiene products for the inactivation of VSCs in three separate experiments. In these experiments Oracare was compared to a 0.12% chlorhexidine rinse. The percent reduction in VSCs following a rinse with Dentist Select was 100% and statistically greater than that observed following a rinse with chlorhexidine or with water, the negative control.

Chlorhexidine actually removed less of those toxins than did water. In the later two phases of this study, Oracare was further tested against other brand name mouthrinses. They included Tom’s of Maine Wicked Fresh, Closys, TheraBreath, and Smart Mouth, Breath Rx, Oxyfresh zinc rinse, Crest Pro-Health, and Listerine original formula.

As before, the Dentist Select Mouthrinse removed 100% of the measurable VSCs produced by P. gingivalis and was the only mouthrinse to result in a statistically significant reduction in VSCs compared to the negative control (water rinse). The percent reduction in VSCs following a rinse with Oracare was statistically greater by far than the percent reduction in VSCs following a rinse with any of the other brands tested.

Conclusion
We cannot yet state that Oracare can treat or improve periodontal disease. These studies do provide strong evidence for ongoing studies to evaluate the
potential of Oracare in treating periodontal diseases. It is evident in these University studies that Oracare may be best rinse in addressing these three major causes of Periodontal Disease.