CLINICAL FEATURES OF GINGIVITIS

TYPES OF GINGIVITIS

- 1. RECURRENT GINGIVITIS
- 2. CHRONIC GINGIVITIS

CLASSIFICATION

- 1. LOCALIZED MARGINAL GINGIVITIS
- 2. LOCALIZED DIFFUSE GINGIVITIS
- 3.LOCALIZED PAPILLARY GINGIVITIS
- 4.GENERALIZED MARGINAL GINGIVITIS
- 5. GENERALIZED DIFFUSE GINGIVITIS

GINGIVAL BLEEDING ON PROBING

- Bleeding on probing appears earlier than colour change
- 2. BOP may not be a good diagnostic indicator for clinical attachment loss, its absence is an eccellent negative predictor of future attachment loss

GINGIVAL CAUSED BY LOCAL FACTORS

 Developmental tooth variation, caries, frenum pull, iatrogenic factors, malpositioned teeth, mouth breathing, over hangs, partial denture, lack of attached gingiva, and recession.

GINGIVAL BLEEDING ASSOCIATED WITH SYSTEMIC DISEASES

- 1. Vitamin c deficiency
- 2. platelet disorder
- 3.vitamin k deficiency-hypoprothrombinemia
- 4.coagulation defects-hemophilia,leukemia,christmas disease.
- 5.multiple myeloma
- 6.post rubella

- 1. hormonal replacement therapy
- 2. antihypertensive calcium channel blockers
- 3. immunosuppresant drugs
- 4. antiinflammatory drugs(aspirin)

COLOUR CHANGES IN GINGIVITIS

- 1.coral pink
- 2. red- acute
- 3.blue-chronic
- 4. mettallic pigmentation(bismuth, arsenic, mercury ,silver, lead)

COLOUR CHANGES ASSOCIATED WITH SYSTEMIC DISEASES

- 1. addison's disease
- 2. peut'z jegher's disease
- 3. albright's syndrome(polyostotic fibrous dysplasia)

CHANGES IN CONSISTENCY OF GINGIVA

- 1. ACUTE GINGIVITIS
- diffuse puffiness and softening
- sloughing with greyish, flake like particles of debris adhering to eroded surface
- -vesicle formation
- 2.CHRONIC GINGIVITIS
- soggy puffiness that pits on pressure
- marked softness and friability with ready fragmentattion on explorationwith probe
- pinpoint surface areas of redness and desquamation

CHANGES IN SURFACE TEXTURE OF GINGIVA

- -stippling restricted to attached gingiva only and localized to subpapillary area
- in CHRONIC INFLAMMATION, gingival surface is smooth shiny or firm and nodular
- -atrophic gingivitis -> epithelial atrophy
- chronic desquamative gingivitis->peeling of the surface

CHANGES IN POSITION OF GINGIVA

- 1. TRAUMATIC LESIONS
- -Chemical injuries-aspirin ,hydrogen peroxide, silver nitrate
- -physical injuries-lip,oral and tongue piercing
- thermal injuries-hot drinks and foods
- 2. Actual position-level of epithelial

CHANGES IN GINGIVAL CONTOUR

- Actual position
- Apparent position
- Abfraction
- abrasion

- Mccall festoon-rolled thickened band
- Still mans cleft- narrow triangle













