

Fetner & Hartigan, Periodonitcs

Occlusal Trauma in Patients with Periodontal Disease

Definition, Diagnosis, Treatment and Goals/Outcomes

Occlusal trauma affects the supporting structures of the tooth or teeth and is usually treated in conjunction with reducing inflammation.

Clinical features of occlusal trauma are:

- 1 - tooth mobility
- 2 - tooth migration
- 3 - tooth pain or discomfort on chewing or percussion (tapping on tooth)
- 4 - can be seen radiographically by a professional
- 5 - jaw pain
- 6 - wear patterns on teeth
- 7 - chipped enamel or broken/cracked teeth
- 8 - fremitus (which is movement of teeth when grinding together)

Treatment of occlusal trauma involves an adjustment which is when the dental professional will reshape the chewing surfaces of the teeth. The reshaping process has also eliminated pain in the head, neck and jaw. Patients who have had occlusal adjustments often notice that their teeth hit more evenly which makes chewing easier. Generally the amount of tooth structure that is removed during an occlusal adjustment is very minimal and it is difficult for the patient to detect visually or in the chewing surfaces of the teeth. Sometimes the fabrication of a nightguard for a patient to wear at bedtime to prevent clenching and grinding is also needed to prevent further trauma and damage.

Goals of occlusal adjustments:

- 1 - eliminate tooth mobility
- 2 - provide comfortable chewing position
- 3 - comfortable occlusion
- 4 - reduce inflammation from trauma

If occlusal trauma remains untreated the following may occur:

- 1 - mobility continues to increase followed by eventual tooth loss.
- 2 - tooth movement continues
- 3 - patient pain and discomfort persists
- 4 - jaw pain may worsen
- 5 - chewing difficulty will continue.

Sources: The American Academy of Periodontology. Guidelines for periodontal therapy
Volume 71, number 5