

# Well - Tara Parker-Pope on Health

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## Rethinking the Twice-Yearly Dentist Visit

By CATHERINE SAINT LOUIS

For decades, dentists have urged all adults to schedule preventive visits every six months. But a new study finds that annual cleanings may be adequate for adults without certain risk factors for periodontal disease while people with a high risk may need to go more often.

Almost half of adults age 30 and older, about 65 million, have a form of chronic inflammatory gum disease that can ultimately lead to tooth loss. The study, published on Monday in *The Journal of Dental Research*, suggests that the frequency of dental visits for cleanings and other preventive services should be tailored to each person's risk factors for periodontal disease.

"The findings suggest that for low-risk patients, a yearly prophylactic visit does prevent tooth loss over a protracted period of 16 years, and there's no significant difference in an added visit," said Dr. Robert J. Genco, a periodontist and SUNY distinguished professor of oral biology at the University at Buffalo, who was not involved in the study. "They found if you had more than one risk factor, that maybe two visits isn't optimal."

Prevention reduces tooth loss, but there has been little evidence to support a twice-yearly visit to the dentist for everyone. The new study looked at insurance claims data for 5,117 adults, primarily in Michigan, to determine whether tooth extraction was linked to a previous history of one or two dental visits a year in patients with varying risks for periodontal disease. The subjects were classified as high risk if they smoked or had diabetes or certain variations in the interleukin-1 gene, which some studies have suggested may be linked to periodontal disease in white people. Subjects were deemed low risk if they had none of these risks.

Researchers found no statistical difference in tooth loss among low-risk patients whether they went for a checkup once or twice a year. But in the high-risk group, roughly 17 percent of patients who had had two visits a year had a tooth extracted, compared with roughly 22 percent of those who had had just one a year.

The researchers said that even two visits a year might not suffice to reduce tooth loss in patients with multiple risk factors.

"If you are high risk, it is much more important for you to be seen frequently, but for the low-risk people it's not," said Dr. William V. Giannobile, the study's lead author and the chairman of the department of periodontics at the University of Michigan School of Dentistry.

"The take-away is not that you don't need to see the dentist, it's that each patient needs to be treated in their own individual way," he added.

Two authors of the study own shares in Interleukin Genetics, the company that makes the genotype test for interleukin-1. The company helped finance the study along with the National Institutes of Health.

Dr. Genco called the paper “a major advance in using risk profiles to tailor-make a preventive regimen.”

But Dr. Ray C. Williams, a periodontist and the dean of the School of Dental Medicine at Stony Brook University, faulted the study for not directly addressing the subjects’ oral hygiene, a significant factor in tooth loss. Nonetheless, he praised the research because it “sounds the signal that it is time to make dentistry more individual and more personalized” and added, “We ought to be able to tailor the treatment to the need.”

Dr. Paul Beirne, the lead author of a 2007 review of preventive dental visits published in [The Cochrane Database of Systematic Reviews](#) and a dentist, said that no conclusions could be drawn from the new study about the optimal frequency of dental visits for cavity management because risk factors for tooth decay were not addressed. The findings are not applicable to children, he noted.

Of the more than 25,000 adults invited to participate, roughly 20 percent returned cheek swabs for the genetic test. It is not known if there are systematic differences between those who participated and those who declined, so results should be interpreted cautiously, he said.

Still, the new study provides evidence that a “one size fits all” preventive regimen is inappropriate, said Dr. Beirne, a lecturer in epidemiology at University College Cork in Ireland.