Editorial

Oral Physician: The Future Relationship between Dentistry and Medicine

The link between periodontal disease and systemic diseases has been progressively recognized over the past two decades. Currently, there is a large amount of data in epidemiological, clinical and laboratory studies that strongly correlate the role of periodontal pathogens on systemic organs by producing proinflammatory cytokines, chemokines and inflammatory mediators. Bacteria and byproducts from the oral cavity are commonly introduced into the bloodstream; the extent of the pathogenic bacterial migration depends on the severity of the gingival inflammation. Oral bacteria have been found in arteries, lungs, the brain, amniotic fluid and pancreas. The vibrant effect of dental plaque-host immune reaction leading to adverse influence on systemic health is illustrated in Figure 1.

A new approach to patient care is emerging as it relates to dentistry and systemic medicine. In the future, a dental patient will undergo a complete periodontal-initiated systemic risk assessment at their dental office visit, thus a ‘Dentist’ will have a more crucial role as an ‘Oral Physician’ as depicted in Figure 2.

The association between poor oral health and systemic diseases has become significant tissue; the new ‘Oral Physician’ will work closely with the medical physician to insure overall health in their patient.

Fig. 1: Relationship between periodontitis and systemic health
I would like to introduce you to an organization that is bridging the gap between all health care professions. The American Academy for Oral Systemic Health (AAOSH) is an organization of health care leaders and health professionals dedicated to the relationship of oral health and whole body health. Its vision is to improve interdisciplinary health care and collaboration, and the health of people everywhere by changing public and professional awareness of the mouth-body health links.

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