

USE OF TOPICAL DOXYCICLYNE IN ADJUNCTION TO MECHANICAL DEBRIDMENT FOR THE TREATMENT OF RESIDUAL/RECURRENT PERIODONTAL POCKETS. 1 YEAR RESULTS OF A PROSPECTIVE COHORT STUDY

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Residual periodontal pockets after non-surgical therapy are usually candidate for surgical treatment. Failures depend from an uncomplete decontamination of the pocket due to local anatomical factors, the use of local highly concentrated antibiotic could represent a further step in not surgical treatment.

The aim of the study was to evaluate the effect of a session of SCRCP + local antibiotic in the management of residual periodontal pockets.

1 year prospective, cohort study on patients referring to authors' private practice who during supportive periodontal therapy showed at least 1 site with PPD > 4 mm and BoP +.

Participants should be cooperative, systemically healthy adults; no known hypersensitivity to tetracyclines; FMPS and FMBS < 25%.

Parameters: PPD, BoP, REC.

Procedure: thoroughly SCRCP by mean of hand instruments, ultrasonic and airflow devices followed by application of a doxycycline gel; 3 months recall program

Results

21 patients (9 M, 12 F, mean age 62, 18 non-smokers) were enrolled providing 46 sites. Baseline mean PPD was 7,0 mm distributed as follow: 0% PPD ≤4, 54,3 % 4 < PPD ≤6 and 45,7% PPD > 6; 100% BoP +.

3 months: mean PPD = 3,9mm (Δ =-3,1 mm); 71,7 % of the sites showed a PPD ≤ 4, 26,1 % 4 < PPD ≤6 and 2,2 % had PPD > 6. No sites showed worsening, 3 sites (7%) did not improve; 43 (93%) improved at least 1 mm. BoP+ sites decreased at 41,3 %.

1 year evaluation: mean PPD =-4,2 mm, 65,2 % of the sites showed a PPD ≤ 4, 28,3 % 4 < PPD ≤6 and 6,5 % had PPD > 6 and % BoP+ 47,8. 65% of the sites deeper than 6 mm at BL decreased at PPD ≤ 4.

Thus, from the data of the present investigation it appears that tested procedure was effective in promoting healing of residual or recurrent pockets in well controlled maintenance patients for at least 1 year.

Lack of a control group precludes a full understanding of the role of the antibiotic but the evident reduction in the number of bleeding sites and in PPD is encouraging and needs further investigations.